



# How to Properly Complete Your OSHA 300 Form

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February 18, 2021  
9 – 10am



# PRESENTERS



**ANTHONY POSTON**

ARM, AIM

*CEO / RISK MANAGER*

*ESM INSITE*



**SINEAD SCROSOPPI**

*CUSTOMER SUCCESS*

*ESM INSITE*

# TEAM



# Presentation Housekeeping

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WORKER'S COMP  
FOCUS



SAFETY / CAL-OSHA  
COMPLIANCE

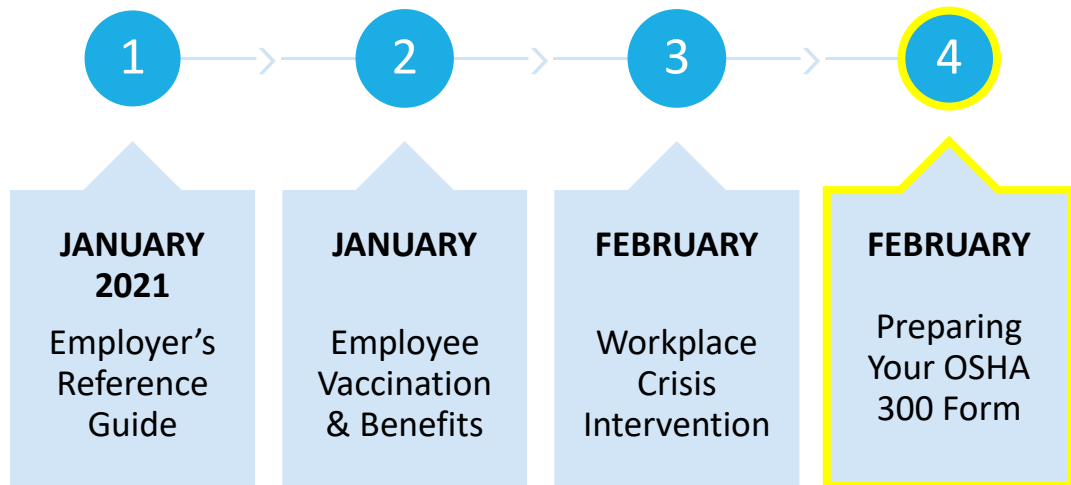
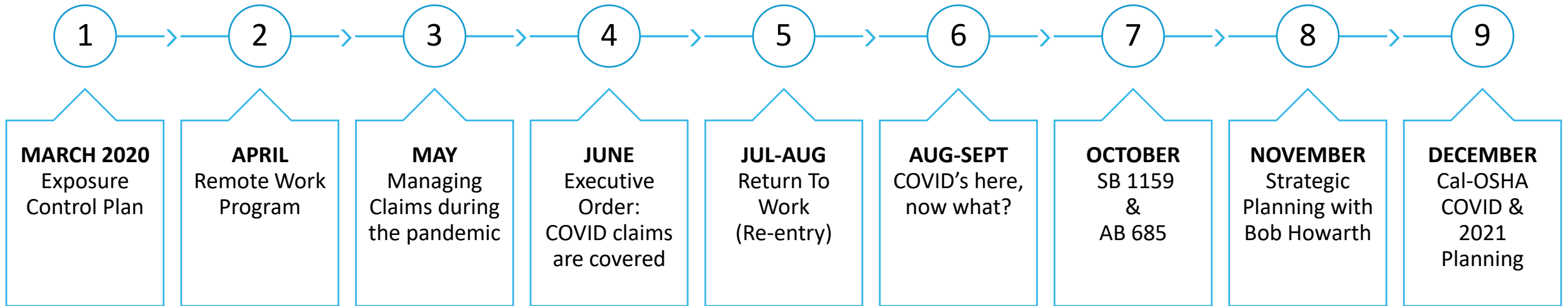


COVID RISK  
MANAGEMENT



Q&A DURING &  
AFTER WEBINAR

# COVID-19 WEBINAR SERIES: SUPPORTING OUR CUSTOMER'S NEEDS THROUGH THIS PANDEMIC JOURNEY



# Today's Topics

- OSHA 300 Did You Knows
- How to complete the OSHA 300
- Tracking COVID cases on the form
- Submitting to Fed/OSHA ITA
- Tools for tracking trends and setting goals

Today's webinar slides



## How to Properly Complete Your OSHA 300 Form

February 18, 2021  
9 – 10am



<http://www.esminsite.com/s/ESM-How-to-Proplery-Complete-your-OSHA-Form-300-Webinar.pdf>

# Poll

Have you completed your OSHA Form 300 form for 2020?

Yes

No



# Cal/OSHA's 300 Recording requirements, including fillable forms:

- 300
- 300A
- 301

[https://www.dir.ca.gov/dosh/dosh\\_publications/RecKeepOverview.pdf](https://www.dir.ca.gov/dosh/dosh_publications/RecKeepOverview.pdf)

Form 300, 300A, 301 in Excel: <https://www.osha.gov/sites/default/files/new-osha300form6-30-16.xlsx>

## Brief Guide to Recordkeeping Requirements

*With forms for recording work-related injuries and illnesses*

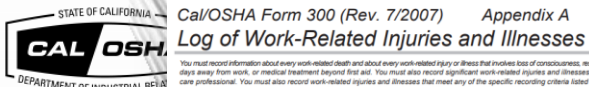
### Cal/OSHA Recordkeeping Website:

[www.dir.ca.gov/dosh/etools/recordkeeping/index.html](http://www.dir.ca.gov/dosh/etools/recordkeeping/index.html)

#### What's Inside...

In this package, you'll find information that will help you complete Cal/OSHA's Log and Summary of Work-Related Injuries and Illnesses for the next several years. On the following pages, you'll find:

- ▼ **An Overview: Recording Work-Related Injuries and Illnesses** — General instructions for filling out the forms in this package and definitions of terms you should use when you classify your cases as injuries or illnesses.
- ▼ **Calculating Injury and Illness Incidence Rates** — A worksheet for determining the number of recordable injuries and illnesses occurring among workers over a period of time.
- ▼ **How to Fill Out the Log** — An example to guide you in filling out the Log properly.
- ▼ **Cal/OSHA Form 300: Log of Work-Related Injuries and Illnesses** — Form for recording specific details about work-related injuries and illnesses. (You may make as many copies of the Log as you need.) Notice that the Log is separate from the Summary.
- ▼ **Cal/OSHA Form 300A: Annual Summary of Work-Related Injuries and Illnesses** — Removable Annual Summary page for easy posting from February 1 through April 30. Note that you post the Annual Summary only, not the Log.
- ▼ **Worksheet to Help You Fill Out the Summary** — A worksheet for figuring the average number of employees who worked for your establishment and the total number of hours worked.



**Cal/OSHA Form 300 (Rev. 7/2007) Appendix A  
Log of Work-Related Injuries and Illnesses**

You must record information about every work-related death and about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in CCR Title 8 Section 14300.12. Feel free to use two lines for a single case if you need to. You must complete an Injury and Illness Incident Report (Cal/OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local Cal/OSHA office for help.

Identify the person		Describe the case			Classify the case												
(A) Case no.	(B) Employee's name	(C) Job title (e.g., Welder)	(D) Date of injury or onset of illness	(E) Where the event occurred (e.g., Loading dock work area)	(F) Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill (e.g., Several sharp bars on right forearm from outsize tank)	Using these four categories, check ONLY the most serious result for each case:		Enter the number of days the injured or ill worker was:		Check the " Injury " column or choose one type of illness:							
						Death	Days away from work	Job transfer or restriction	Other recordable injury or illness	Activity Base	Days lost due to injury or restriction	(1)	(2)	(3)	(4)	(5)	(6)
		Secretary				(G) 04	(H) 00	(I) 00	(J) 00	(K) 00	Days						
		Secretary									Days						
		Secretary									Days						
		Secretary									Days						
		Secretary									Days						
		Secretary									Days						
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		Secretary									Days						
		Secretary									Days						
		Secretary									Days						
		Secretary									Days						
		Secretary									Days						

**Attention:** This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes. See CCR Title 8 14300.290(a)(4)(10).

Year 20

Establishment name

City  State

**Page total:**  of

Be sure to transfer these totals to the Summary page (Form 300A) before you post it.

ESM INSITE



# 2020 Form 300A (Summary)

Must be posted  
from:

February 1<sup>st</sup>, 2021 to  
April 30<sup>th</sup>, 2021

“in a visible location”

Cal/OSHA Form 300A (Rev. 7/2007) **Appendix B**  
**Annual Summary of Work-Related Injuries and Illnesses**

Year 20\_\_

Department of Industrial Relations  
Division of Occupational Safety & Health

All establishments covered by CCR Title 8 Section 14300 must complete this Annual Summary, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.  
Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write "0."  
Employees, former employees, and their representatives have the right to review the Cal/OSHA Form 300 in its entirety. They also have limited access to the Cal/OSHA Form 301 or its equivalent. See CCR Title 8 Section 14300.35, in Cal/OSHA's recordkeeping rule, for further details on the access provisions for these forms.

**Number of Cases**

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(G)	(H)	(I)	(J)

**Number of Days**

Total number of days away from work	Total number of days of job transfer or restriction
<input type="text"/>	<input type="text"/>
(K)	(L)

**Injury and Illness Types**

Total number of . . . (M)			
(1) Injuries	<input type="text"/>	(4) Poisonings	<input type="text"/>
(2) Skin disorders	<input type="text"/>	(5) Hearing loss	<input type="text"/>
(3) Respiratory conditions	<input type="text"/>	(6) All other Illnesses	<input type="text"/>

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

**Establishment information**

Your establishment name

Street

City  State  ZIP

Industry description (e.g., *Manufacture of motor truck trailers*)

Standard Industrial Classification (SIC), if known (e.g., *SIC 3715*)

**Employment information** (If you don't have these figures, use the optional Worksheet to estimate.)

Annual average number of employees

Total hours worked by all employees last year

Sign here

**Knowingly falsifying this document may result in a fine.**

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

Company executive  Title

Phone  Date

<https://www.dir.ca.gov/dosh/DoshReg/AppendxB300AFinal.pdf>

# Poll

Have you posted your 2020 OSHA Form 300A “in a visible location”?

Yes

No



Do California employers have to electronically file their OSHA 300?

***Yes, but...***

## **20 – 249 employees**

- Must report **IF** your industry is on this list ([Appendix H](#))

## **250+ employees**

- Must report **UNLESS** specifically exempted by T8 CCR §14300.2 ([Appendix A, Table 1](#))

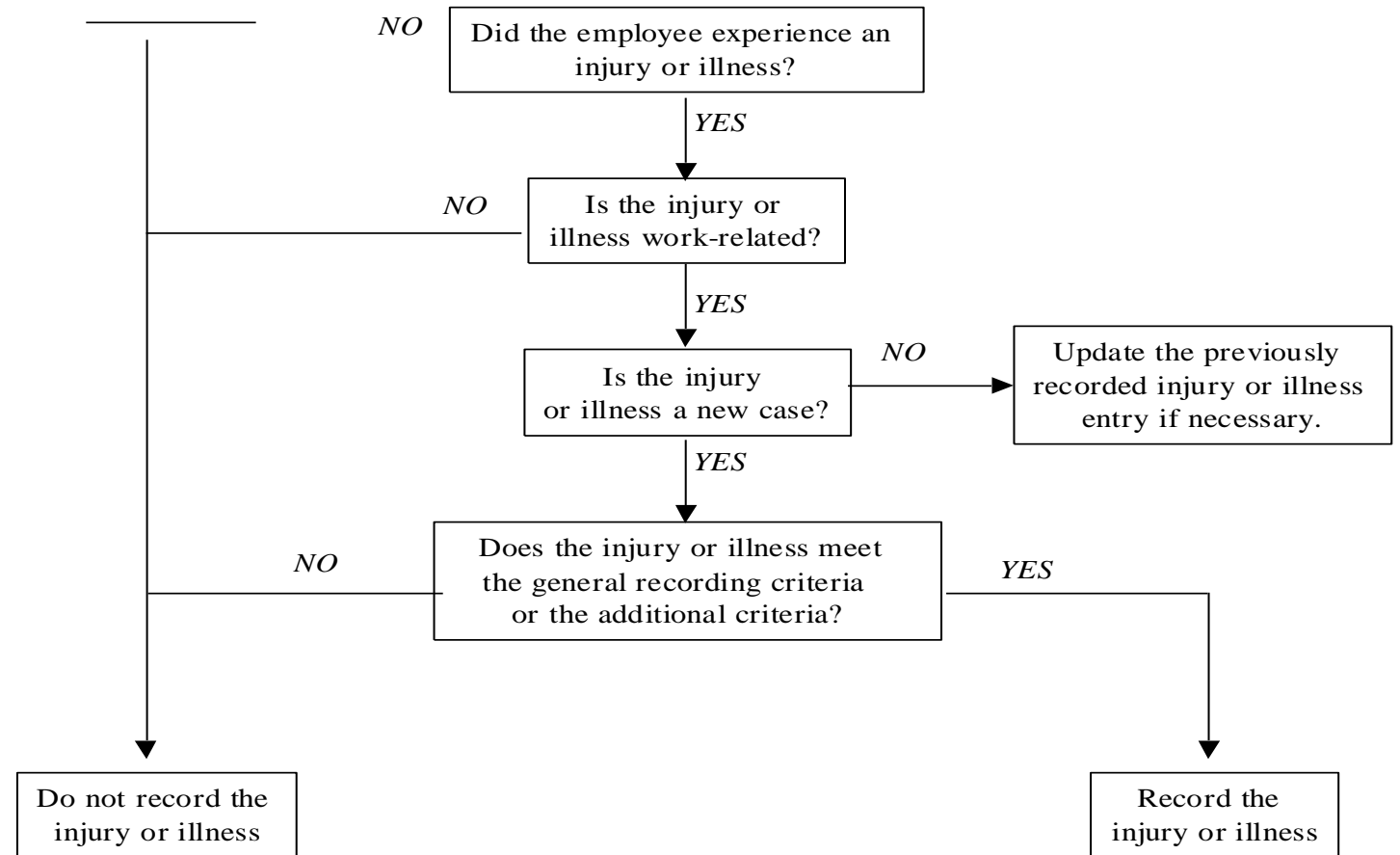
Fed/OSHA: Under 20 employees, **reporting not required** to ITA.

Cal/OSHA: Under 10 employees(including temps), **recording not required.** ([T8 CCR 14300.1](#))

Must report if asked to do so in writing by OSHA, BLS, DOSH

# Is the injury recordable?

- Cal-OSHA's decision tree →
- Review your Work Comp loss runs
  - Request from your broker
  - Cases that are beyond "first aid" must be recorded
  - Do the injuries on your loss runs match up with your 300 Form?



# What is recordable?

To be recordable, an illness must be work-related and result in one of the following:

- Death.
- Days away from work.
- Restricted work or transfer to another job.
- Medical treatment beyond first aid.
- Loss of consciousness.
- A significant injury or illness diagnosed by a physician or other licensed health care professional.
- Needlestick or cut from sharp.
- Standard Threshold Shift (STS) in an employee's hearing.

# Are First Aid injuries recordable?

# **NO.**

## California Labor Code §5401(a):

First Aid is defined as **any one-time treatment, and any follow up** visit for the purpose of observation of minor scratches, cuts, burns, splinters, or other minor industrial injuries, which do not ordinarily require medical care.

Labor Code Reference [here](#)

## OSHA's 14 First Aid Definitions:

1. Using non-prescription medications at non-prescription strength.
2. Administering tetanus immunizations.
3. Cleaning, flushing, or soaking wounds on the skin surface.
4. Using wound coverings, such as bandages "Band Aids", gauze pads, etc. or using Steri-strips or butterfly bandages.
5. Using hot or cold therapy
6. Using any totally non-rigid means of support, such as elastic bandages, wraps, non-rigid back belts. etc.
7. Using temporary immobilizations devices while transporting an accident victim (splints, slings, neck collars, or back boards).
8. Drilling a fingernail or toenail to relieve pressure or draining fluids form blisters.
9. Using eye patches
10. Using simple irrigation or a cotton swab to remove foreign bodies not embedded in or adhered to the eye.
11. Using irrigation, tweezers, cotton swab, or other simple means to remove splinters or foreign material from areas other than the eye.
12. Using finger guards
13. Using massages
14. Drinking fluids to relieve heat stress

***Not recordable on the OSHA 300 log.***

Reference pg. 3, [here](#)

# Do I have to record COVID-19 illnesses on my OSHA 300?

## Yes, but...

- To be recordable, an illness must be work-related and result in one of the following:
  - **The case is a confirmed case of COVID-19, as defined by the CDC.**
  - **The case is work-related, as defined by 29 CFR § 1904.5.**
  - Death.
  - Days away from work.
  - Restricted work or transfer to another job.
  - Medical treatment beyond first aid.
  - Loss of consciousness.
  - A significant injury or illness diagnosed by a physician or other licensed health care professional.

If a work-related COVID-19 case meets one of these criteria, then covered employers in California must record the case on their 300, 300A and 301 or equivalent forms.

# § 3205: Definitions

## COVID-19 Case

- (1) Has a positive “COVID-19 test” as defined in this section
- (2) Is subject to COVID-19-related order to isolate issued by a local or state health official
- (3) Has died due to COVID-19, in the determination of a local health department or per inclusion in the COVID-19 statistics of a county.

## COVID-19 Exposure

- Being within six feet of a COVID-19 case for a cumulative total of 15 minutes or greater in any 24-hour period

## High-Risk Exposure Period

- For persons who develop COVID-19 symptoms: from two days before they first develop symptoms until 10 days after symptoms first appeared, and 24 hours have passed with no fever, without the use of fever-reducing medications, and symptoms have improved
- For persons who test positive who never develop COVID-19 symptoms: from two days before until ten days after the specimen for their first positive test for COVID-19 was collected.



# How do I know if the COVID case was work related?

- “An injury or illness is presumed to be work-related if it results from events or exposures occurring in the work environment.”
- Employers are to evaluate the employee’s work duties and environment to determine the likelihood that the employee was exposed during the course of their employment.
- Was the employee exposed to a COVID-19 case at the worksite?
- Review your Work Comp loss runs.
  - Are there COVID-19 cases on the report?
    - Recall: SB 1159 requires the reporting of COVID cases to the carrier
  - Compare your OSHA 300 log to your Work Comp loss runs, are there discrepancies?

# COVID FAQ



Is time an employee spends in quarantine considered “days away from work” for recording purposes?

**NO.**

Unless the employee also has a work-related illness that would otherwise require days away from work, **time spent in quarantine is not “days away from work” for recording purposes.**

This means under the “Days Away From Work” column, any COVID-19 cases you have “0” days away.

Reference [here](#).

York Risk Services Group, Inc., a Sedgwick company, through this report, provides the ability to export workers' compensation loss data to assist an employer with OSHA record keeping responsibilities. It is the employer's obligation to determine if an accident is recordable and to also determine the lost work days, restricted work days, and other relevant data elements. This report produces data subject to the input criteria chosen and is presented for subsequent manipulation using Excel or import into a third party application utilized by the employer. York Risk Services Group, Inc., a Sedgwick company, does not render legal advice and the information contained in this report should not be regarded as such.

# OSHA's Form 300 (Rev. 01/2004)

## Log of Work-Related Injuries and Illnesses

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational

Year **2020**

**U.S. Department of Labor**  
Occupational Safety and Health Administration

You must record information about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria

Form approved OMB no. 1218-0176

Identify the person		Describe the case				Classify the case				Enter the number of days the injured or ill worker was:									
(A) Case No.	(B) Employee's Name	(C) Job Title (e.g., Welder)	(D) Date of injury or onset of illness (mo./day)	(E) Where the event occurred (e.g. Loading dock north end)	(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)	CHECK ONLY ONE box for each case based on the most serious outcome for that case:				Away From Work (days)		On job transfer or restriction (days)		Check the "injury" column or choose one type of illness:					
						Death	Days away from work	Remained at work		Away From Work (days) (K)	On job transfer or restriction (days) (L)	Injury (M)	Skin Disorder (2)	Respiratory Condition (3)	Poisoning (4)	Hearing Loss (5)	All other illnesses (6)		
						(G)	(H)	Job transfer or restriction (I)	Other recordable cases (J)										
		Supervisor	9/10/20		Left Eye/While working on peeler #14 caustic acid splashed on his left eye.				x	0	0	x							
		General Labor	7/29/20		Coronavirus COVID 19-Lungs/COVID-19 +				x	0	0							x	
		General Labor	4/8/20		Coronavirus COVID 19-Lungs/COVID-19				x	0	0							x	
		Cookroom Cooker / Cooler	8/26/20		Coronavirus COVID 19-Whole Body/COVID-19				x	0	0							x	
		Belt Worker	8/18/20		Coronavirus COVID 19-Lungs/COVID-19				x	0	0							x	
		QA Tech	8/17/20		Coronavirus COVID 19-Whole Body/COVID-19				x	0	0							x	
		Filler/Seamer	3/17/20		Coronavirus COVID 19-Headache/COVID-19				x	0	0							x	
		Belt Sorter	7/29/20		Coronavirus COVID 19/COVID-19 +				x	0	0							x	
		Blending Unloader	8/4/20		Coronavirus COVID 19-Lungs/COVID-19				x	0	0							x	
		Electrician/Mechanic	8/10/20		Coronavirus COVID 19-Lungs/COVID-19				x	0	0							x	
		Belt Worker	7/13/20		Coronavirus COVID 19-Cough, Sore Throat/COVID-19				x	0	0							x	
		Mechanic	7/20/20		Coronavirus COVID 19-Lungs/COVID-19 Positive				x	0	0							x	
		Belt Sorter	8/6/20		Coronavirus COVID 19-Lungs/COVID-19				x	0	0							x	
		Canner Trainer	8/19/20		Coronavirus COVID 19-Lungs/COVID-19				x	0	0							x	
		Supervisor	8/26/20		Coronavirus COVID 19-Body Chill, Hard Time Breathing, Headaches, Fever/COVID-19				x	0	0							x	
		General Laborer	8/17/20		Coronavirus COVID 19-Whole Body Aches/COVID-19				x	0	0							x	
		General Labor - Belt Sorter	8/7/20		Coronavirus COVID 19-Headache/COVID-19				x	0	0							x	
		Unknown	7/30/20		Coronavirus COVID 19-No Accident/COVID-19				x	0	0							x	
		Outside Sales	7/13/20		Coronavirus COVID 19-Sore Throat, Dizzy, Prefever Sign/COVID-19				x	0	0							x	
		Basil Weigh Master	8/13/20		Coronavirus COVID 19-Stomache/Feeling ill in the Basil room				x	0	0							x	
		Can Operator	7/10/20		Coronavirus COVID-19				x	0	0							x	
		General Labor	7/21/20		Coronavirus COVID-19				x	0	0							x	
		Sanitation - P1/ Prep Outside	8/14/20		Coronavirus COVID-19/Throat, Body Started Aching				x	0	0							x	
		Filler/Seamer Op	9/15/20		Left Knee/Walking in parking lot B she tripped over a wheel stop and fell on her left knee				x	0	0	x							

# Multiple Locations?

Employers must keep a separate log for each establishment that is expected to be in operation for one year or longer.

## BUT...

Employers can maintain records for separate establishments at the business headquarters, provided that:

1. The incident can be transmitted from the separate location to headquarters **within 7 calendar days of the occurrence**
2. Employer can produce and send the records to the separate location within four (4) hours. (consider using a prefix ID to track by location)

OSHA reference, [here](#)



# Poll

How long must employers keep the OSHA 300 log and 300A summary?





**FAQs**

# FAQ 1



**Is there a limit to the number of days away from work I must count?**

Yes, you may "**cap**" the total days away at **180** calendar days and are not required to keep track of the number of calendar days away from work if the injury or illness resulted in more than 180 calendar days.

Reference [here](#).

# FAQ 2



## Can I remove a record if the case is later deemed not work related?

Yes, you can go back and remove the claim. It's best to use the Excel OSHA 300 log so that you can modify as needed. There is a 5-year requirement to maintain the logs.

Note that you don't have to update the annual summary 300A (unless you want to).

Reference [1904.33](#)



# FAQ 3



**If a case occurs in one year but results in days away during the next calendar year, do I record the case in both years?**

No, you **only record the injury or illness once**. If the employee is still away from work because of the injury or illness when you prepare the annual summary, **estimate the total number of calendar days** you expect the employee to be away from work up to the 180-day cap.

Reference [here](#).

# FAQ 4



**How do I count weekends, holidays, or other days the employee would not have worked anyway?**

Count the number of calendar days the employee was unable to work as a result of the injury or illness, regardless of whether or not the employee was scheduled to work on those day(s).

Reference [here](#).

# Poll

Have you logged into OSHA's ITA site and uploaded your 300A information for 2020 or prior?

Yes

No



# Let's review how to add your OSHA 300A information to OSHA's ITA

First: Complete your OSHA 300 form and 300A.

Second: Login / Sign up to OSHA's ITA:

<https://www.osha.gov/injuryreporting>

UNITED STATES DEPARTMENT OF LABOR

Occupational Safety and Health Administration

CONTACT US FAQ A TO Z INDEX ENGLISH ESPAÑOL

OSHA STANDARDS TOPICS HELP AND RESOURCES

SEARCH OSHA

Final Rule / Injury Tracking Application

## Injury Tracking Application

Launch the Injury Tracking Application

Who

What

When

How

Job Aids (How-To documentation)

### ANNOUNCEMENTS

March 2, 2021, is the deadline for electronically reporting your OSHA Form 300A data for calendar year 2020. Collection will begin January 2, 2021. The collection of CY 2019 data and beyond will include the collection of establishments' Employer Identification Numbers (EIN). If you submit your data using a csv file or API, you can view the new layout by selecting the "How" tab above.

Remember, not all establishments need to submit their OSHA 300A Data. To review which establishments need to provide their data, [click here](#).

### Frequently Asked Questions

ITA Reporting Requirements OSHA Recordkeeping Requirements

#### FAQs about the ITA

#### Account Access

Does OSHA notify employers that they need to report their Form 300A data? And if not, where do I get my Username and Password to login and provide my data?

A 3D rendering of a white smartphone lying on a light-colored wooden desk. The screen of the phone is filled with a grid of numerous small, colorful book icons, representing a vast library of digital resources. In the background, a white coffee cup is visible on the left, and a pencil lies on the desk in the bottom right corner. The text "Additional Resources" is overlaid in the center of the phone's screen.

*Additional Resources*

# Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even if no injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete

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

Employees former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR 1904.35, in OSHA's Recordkeeping rule, for further details on the access provisions for these forms.

### Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
0	26	4	106
(G)	(H)	(I)	(J)

### Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
778	182
(K)	(L)

### Injury and Illness Types

Total number of...	(1) Injury	(2) Skin Disorder	(3) Respiratory Condition	(4) Poisoning	(5) Hearing Loss	(6) All Other Illnesses
(M)	99	4	0	0	0	33

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

### Establishment information

Your establishment name ESM INSITE

Street 2377 Gold Meadow Drive, Ste. 100

City Gold River State CA Zip 95670

Industry description (e.g., Manufacture of motor truck trailers)

Loss control con

Standard Industrial Clas

OR North American Industri

### Employment informati

Annual average number

Total hours worked by a year

### Sign here

Knowingly falsifying this document may result in a fine.

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

Company executive

Title

Phone

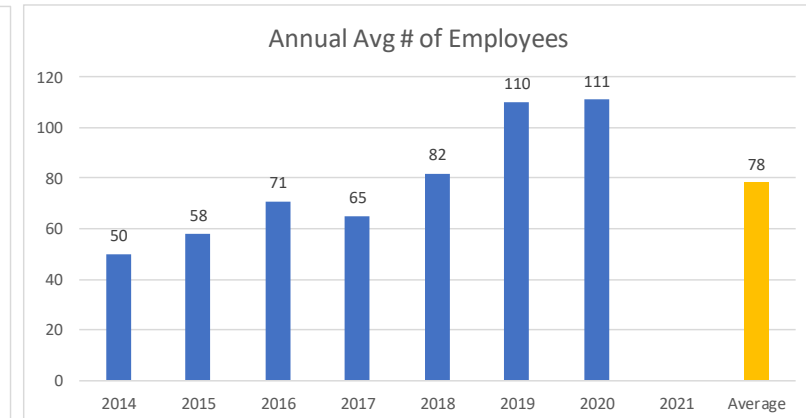
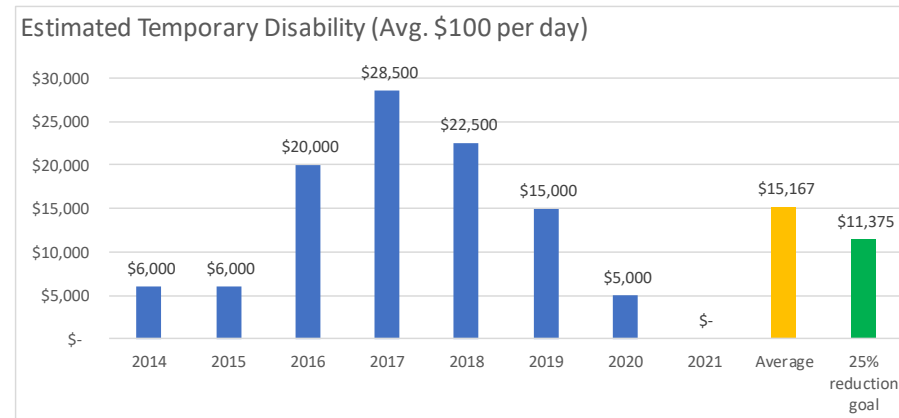
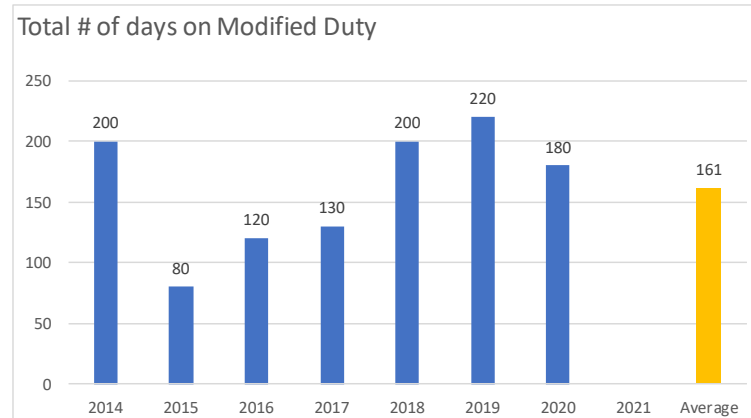
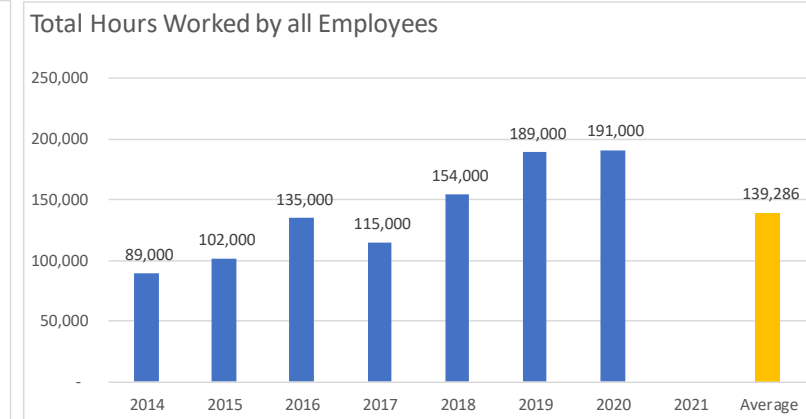
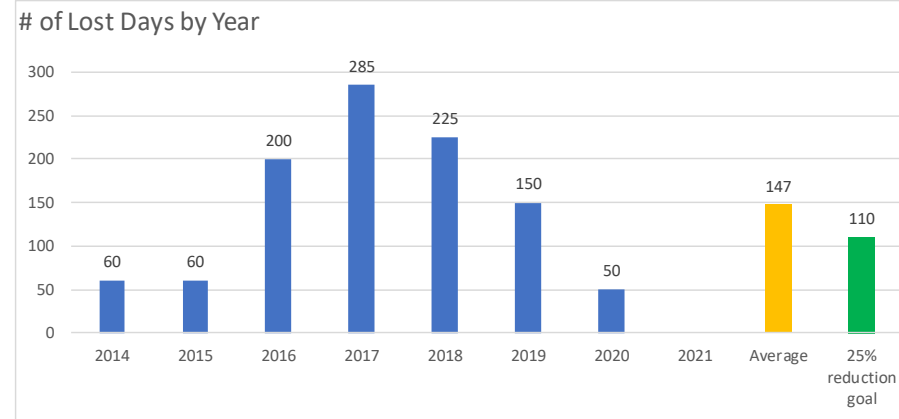
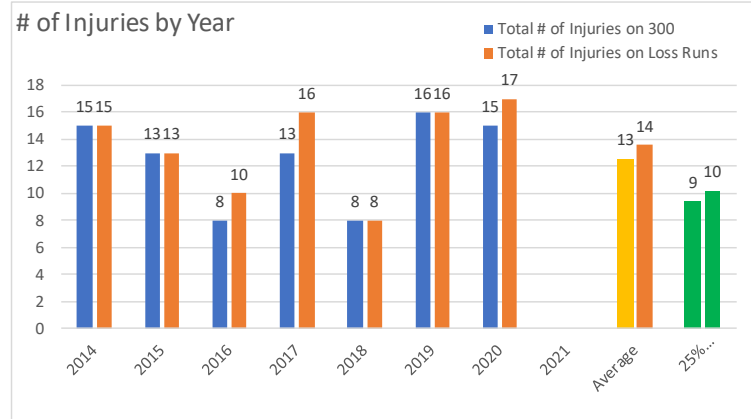
Date

Calculate Temporary Disability paid:  
**Total number of days away (778)**  
**Temporary Disability (Avg. \$100/day)**  
**Estimated TD paid (\$77,800)**

# OSHA 300 Log Tracker (Sample)



	2014	2015	2016	2017	2018	2019	2020	2021	Average	25% reduction goal	Monthly KPI
Total # of Injuries on 300	15	13	8	13	8	16	15		13	9	1
Total # of Injuries on Loss Runs	15	13	10	16	8	16	17		14	10	1
Total # of Lost Days	60	60	200	285	225	150	50		147	110	9
Total # of days on Modified Duty	200	80	120	130	200	220	180		161		
Annual Avg # of Employees	50	58	71	65	82	110	111		78		
Total Hours Worked by all Employees	89,000	102,000	135,000	115,000	154,000	189,000	191,000		139,286		
# of COVID Injuries						4	5		5		
# of COVID Lost Days						45	50		48		
Estimated TD (\$100/day)	\$ 6,000	\$ 6,000	\$ 20,000	\$ 28,500	\$ 22,500	\$ 15,000	\$ 5,000	\$ -	\$ 15,167	\$ 11,375	\$ 948



# Finding your NAICS code

NAICS: North American Industry Classification System

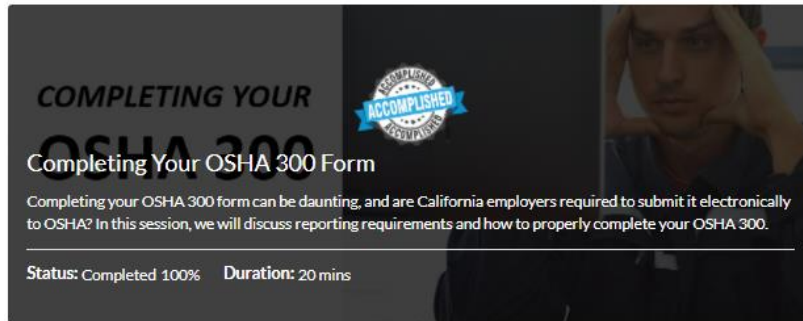
- <https://www.naics.com/search/>
- <http://www.census.gov/eos/www/naics/>
- Fed/OSHA ITS website, when creating an establishment, you can search by industry name.  
<https://www.osha.gov/injuryreporting/ita>
- Call your Work Comp broker





# OSHA 300 Learning Plan

(we'll be adding today's recording to INSITE)



**COMPLETING YOUR OSHA 300 Form**

Completing your OSHA 300 form can be daunting, and are California employers required to submit it electronically to OSHA? In this session, we will discuss reporting requirements and how to properly complete your OSHA 300.

Status: Completed 100% Duration: 20 mins

## Plan activities

Activity	Status	Duration
<b>Completing Your OSHA 300 Form*</b>	100%	20 mins
<b>Completing Your OSHA 300 Form*</b> Completing your OSHA 300 form can be daunting, and are California employers required to submit it electronically to OSHA? In this session, we will discuss reporting requirements and how to properly complete your OSHA 300.	100%	15 mins
<b>Completing Your OSHA 300 Quiz*</b> Completing your OSHA 300 form can be daunting, and are California employers required to submit it electronically to OSHA? In this session, we will discuss reporting requirements and how to properly complete your OSHA 300.	100%	5 mins

## COMPLETING YOUR OSHA 300

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Awarded To  
**Anthony Poston**  
For Successfully Completing  
Completing Your OSHA 300 Form  
Date of Completion  
May 14, 2019

**COMPLIANCE**

# Employer's 2021 COVID-19 Regulatory Reference Guide Learning Plan

## An Employer's COVID-19 Regulatory Reference Guide For 2021

The COVID-19 virus along with the ever-changing regulations continue to create challenges for California employers. Join us for ESM's one-hour webinar where we provide a guide to navigating the regulatory complexities.

Status: Not Started 0% Duration: 59 mins Achievements:

### Plan activities

^ An Employer's COVID-19 Regulatory Reference Guide for 2021\* Status: 0% Duration: 59 mins



0%

#### An Employer's COVID-19 Regulatory Reference Guide for 2021\*

The COVID-19 virus along with the ever-changing regulations continue to create challenges for California employers. Join us for ESM's one-hour webinar where we provide a guide to navigating the regulatory complexities.

Launch



0%

#### Slides for Covid-19 Reference Guide Video

Slides from ESM's COVID-19 Reference Guide Video

View

# COVID-19 2021 Reference Guide

For California Employers



For INSITE users Complete your Learning Plan [here](#)



# Vaccination Requirements & COVID Paid Leave

## Learning Plan

Law firm guests: Littler

**Vaccination Requirements And COVID Paid Leave**

As the COVID-19 vaccination begins its roll out to the general population, concerns that range from personal, medical, religious and more are rising. Join ESM and Littler as they explore an employer's options for vaccination and COVID paid leave.

Status: Not Started 0% — Duration: 1 hr 3 mins — Achievements:

February 3, 2021

Plan activities

^ Vaccination Requirements and COVID Paid Leave\* Status: 0% Duration: 1 hr 3 mins

- Vaccination and COVID Paid Leave Overview\*** [Launch](#)  
As the COVID-19 vaccination begins its roll out to the general population, concerns that range from personal, medical, religious and more are rising. Join ESM and Littler as they explore an employer's options for vaccination and COVID paid leave. 1 hr(s) 3 mins 0%
- Vaccination Requirements and COVID Paid Leave Slides** [View](#)  
Vaccination Requirements and COVID Paid Leave Slides 0 min 0%



## Vaccination Requirements & COVID-19 Paid Leave

February 3, 2021



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Vaccination Requirements and COVID Paid Leave

Date of Completion  
February 18, 2021

PREPARED

# Workplace Crisis Intervention Learning Plan

## Special guest: Hector Alvarez



### Workplace Crisis Intervention

*Moving back into the workplace*

February 4, 2021

Special guest: Hector Alvarez  
Certified Threat Manager, Alvarez Associates, LLC



**Workplace Crisis Intervention With Hector Alvarez**

Catastrophic life events, like COVID-19, can have significant and lasting impacts on the workplace; stress, loss, injuries even fatalities. Join ESM & Hector Alvarez as they review common mental health issues and how they may impact the workplace.

Status: In Progress 0% Duration: 1 hr 1 min Achievements:

February 4, 2021

Special guest: Hector Alvarez

#### Plan activities

Workplace Crisis Intervention with Hector Alvarez\* Status: 0% Duration: 1 hr 1 min

- Workplace Crisis Intervention with Hector Alvarez\* [Launch](#)  
Catastrophic life events, like COVID-19, can have significant and lasting impacts on the workplace; stress, loss, injuries even fatalities. Join ESM & Hector Alvarez as they review common mental health issues and how they may impact the workplace. 1 hr(s) 1 mins 0%
- Workplace Crisis Intervention with Hector Alvarez Slides [View](#)  
Workplace Crisis Intervention Slides 0 min 0%

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Date of Completion  
February 18, 2021

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