



**Open Range**  
SOFTWARE

## **CTS User Manual**

# **Injury-Illness**

Last Edited: 23 July 2022

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# Introduction

The CTS Injury-Illness program provides a user-friendly system to record, manage, and report information on incidents involving personal injury or illness, motor vehicle accidents, or damage to property. This software is a powerful tool for effectively managing workplace safety and health. Using this software correctly can help ensure your company will:

- Comply with OSHA occupational injury and illness recordkeeping and reporting requirements, including printing OSHA Form 300 and 300A
- Comply with Department of Energy (DOE) recordkeeping and reporting requirements, including printing DOE Form 5484.3 and bulk loading CAIRS
- Analyze injury and illness trends over time so that patterns with common causes can be identified and targeted for preventive measures
- Support investigation of accidents and “near miss” incidents to identify their causes and means for prevention
- Document necessary corrective actions and track them to closure

By using the features provided, your organization will be able to lower workers' compensation costs, improve employee morale and productivity, reduce the extent and severity of work-related injuries and illnesses, and provide fast, easy, and secure access to injury and illness records.

# Chapter 1 – Injury-Illness Incident Introduction

Typically, once a worker is injured, they go to medical. Their supervisor is notified (if not already aware). Using CTS247, the supervisor can send medical a summary of the incident details. Safety and Health is notified automatically by entry of a CTS247 record, through a medical interface, or manually (i.e., phone or email).

Safety and Health Team will enter as many details as they can about the case. Then they assign an investigator to the case, during the investigation process. The Safety and Health Investigator will perform an evaluation of the injury to determine its classification. Classifications are recordable or not recordable, defined by CTS case codes.

## CTS Case Codes

Case Code	Case Code Description	Use and Meaning	OSHA Recordability
00	NO INJURY ILLNESS	Near miss incident	Non-Recordable
01	NON CHARGEABLE	Non chargeable incident that you still want to record	Non-Recordable
02	FIRST AID	Injury or illness requiring only first aid treatment	Non-Recordable
03	INJURY, RECORDABLE	Injury resulting in the employee remaining at work <b>without</b> job transfer or restriction	OSHA Recordable
04	ILLNESS, RECORDABLE	Illness resulting in the employee remaining at work <b>without</b> job transfer or restriction	OSHA Recordable
4A	ILLNESS, LOST WORKDAY, REST.	Illness resulting in the employee remaining at work <b>with</b> job transfer or restriction	OSHA Recordable
4B	ILLNESS, LOST WORKDAY, AWAY	Illness resulting in the employee <b>missing</b> one or more day of work	OSHA Recordable
06	INJURY, LOST WORDAY, REST.	Injury resulting in the employee remaining at work <b>with</b> job transfer or restriction	OSHA Recordable
07	INJURY, LOST WORKDAY, AWAY	Injury resulting in the employee <b>missing</b> one or more day of work	OSHA Recordable
08	FATALITY	Injury or illness resulting in the death of an employee	OSHA Recordable
99	INCOMPLETE	Incomplete or uncertain case classification. This field should be updated when the case can be properly classified	Non-Recordable

If the case is deemed OSHA recordable (and sometimes non-recordable), corrective actions will be created. A responsible contact, often the supervisor, will be assigned to the case. For recordable cases, the site will report to OSHA and DOE through their incident notification reports (OSHA 300a) and DOE CAIRS.

If an injured worker loses any workdays (i.e., away from site, restricted from normal duties), the restricted/lost time is recorded as DAR (Days Away Restricted). Once corrective actions have been completed and the worker is back to work on normal schedule and duties, the case is closed by Safety and Health.

Each year, the OSHA Log is generated and signed by management, reflecting individual cases at the establishment (workplace). These cases are known as LTI (Lost Time Incidents).

Annually, the OSHA 300a summary report is signed by management. This report provides work hours for the entire establishment, along with the incident information.

Every month, management requests injury rate details. By calculating injuries divided by work hours, they can keep track of trends. This data is extremely valuable in striving to keep injury rates low.

CTS effectively provides a user-friendly experience to a wide range of technological levels. This makes succeeding OSHA and DOE standards much easier. This software provides multiple ways to report/track incidents.

REPORT	DESCRIPTION
CTS247: Incident Notification	Add an incident. View incidents on calendar.
CTS249: Incident Tracking	Track incidents. Add details such as reference, case list, follow-up, root cause, HPI, keywords, and sort groups.
CTS257: CAIRS Reporting	Create .txt export files to upload using CAIRS bulk upload tool.
CTS260: OSHA Log Report	Provides annual LTI data for an establishment.
CTS240: OSHA 300a Reporting	Summarizes annual work hours detail and incident information for an establishment.
CTS251: Trend Report	Incident data for each company site is displayed. Can be filtered by DART or TRC counts/rates.
CTS271: Safe Work Days	Lost Time Incident data is displayed for all system records. Can be filtered by company, establishment, site, or organization.
CTS252: Injury Illness Cost Index Report	Case data including employee hours, TRC cases/rate, DART cases/rate, lost workday cases/rate are displayed.

# Chapter 2 – Creating Establishments and Organizations

Creating Establishments and Organizations are pertinent to properly setting up Injury Illness tracking and reporting. Organizations are typically defined by an HR systems reporting organization when employees are loaded into the system.

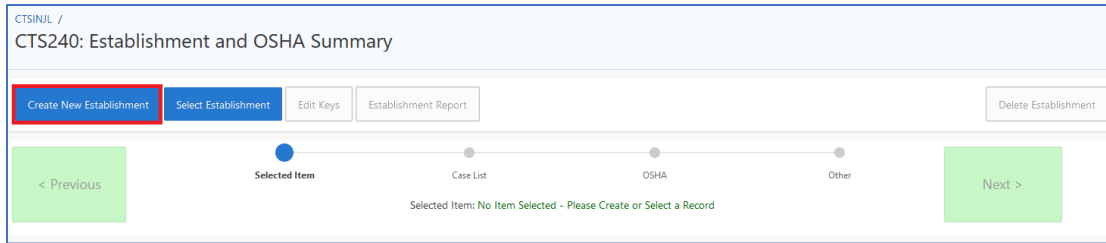
According to OSHA standards, “The term *establishment* means a single physical location where business is conducted or where services or operations are performed. Where distinctly separate activities are performed at a single physical location, each activity shall be treated as a separate establishment.” (U.S. Dept of Labor) This chapter primarily focuses on creating establishments.

## Create A New Establishment in CTS240

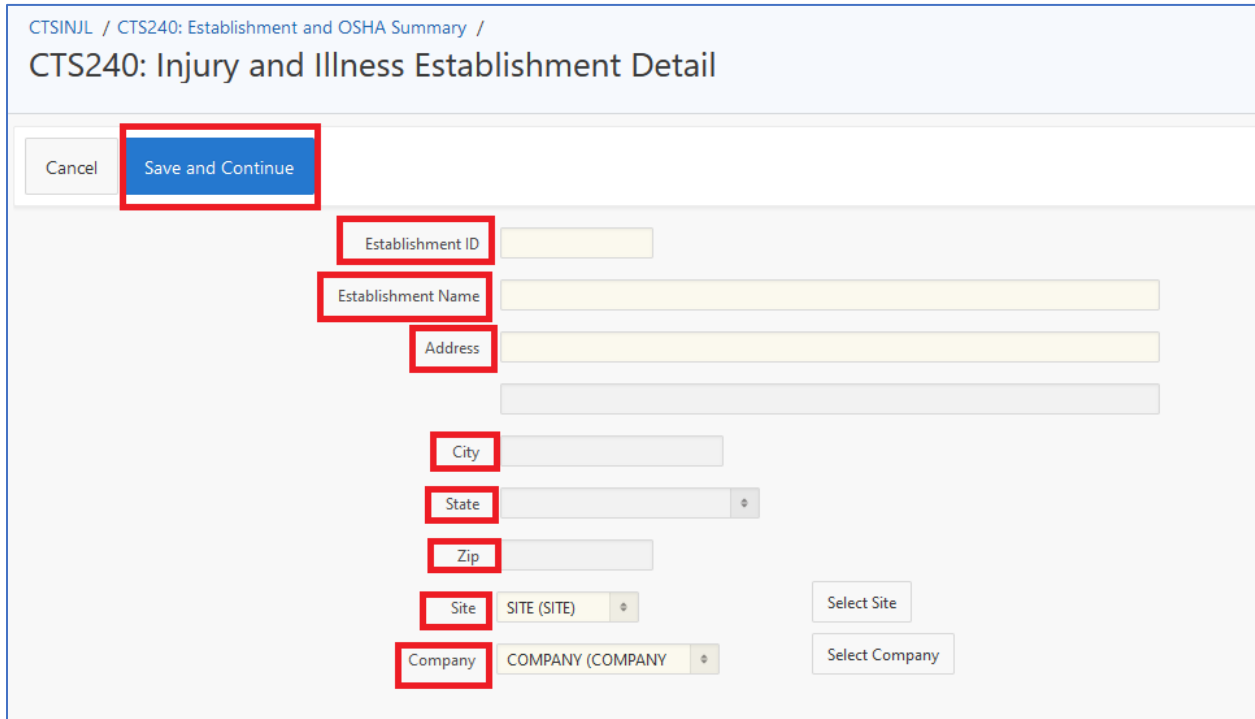
To add an establishment, click CTS240: Establishment and OSHA Summary under *Support* submenu.

The screenshot displays the 'Injury-Illness' section of the software interface. The navigation menu at the top includes 'Main Menu', 'Metrics', 'Portal', 'Exposure Assessment', 'IH Programs', 'JHA', 'Checklist', 'Medical Surveillance', 'Injury-Illness' (highlighted), 'HMIS', 'EDR', and 'Toolkit'. The main content area is organized into three sub-menus: 'Injury and Illness Entry and Edit', 'Injury and Illness Reports', and 'Support'. The 'Support' sub-menu is expanded, showing several options. The option 'CTS240: Establishment and OSHA Summary' is highlighted with a red border and a red 'Create New' icon. Other options in the 'Support' sub-menu include 'CTS242: Monthly Work Hours Entry', 'CTS246: Monthly Mileage Entry', 'CTS266: Injury-Illness Data Utilities', 'CTS269: Load Monthly Work Hours', and 'CTS270: Filter Groups and Counts'. The 'Injury and Illness Reports' sub-menu contains options like 'CTS250: Injury and Illness Listing Report', 'CTS251: Injury and Illness Trend Report', 'CTS252: Injury and Illness Cost Index Report', 'CTS254: Monthly Hours Report', 'CTS257: CAIRS Export', 'CTS260: OSHA Log Report', 'CTS267: Incident Report', 'CTS271: Safe Work Days', and 'CTS273: Injury-Illness Review By Org ID'. The 'Injury and Illness Entry and Edit' sub-menu includes 'CTS241: Injury and Illness', 'CTS247: Incident Notification', and 'CTS249: Incident Tracking'.

Click **Create New Establishment** button.

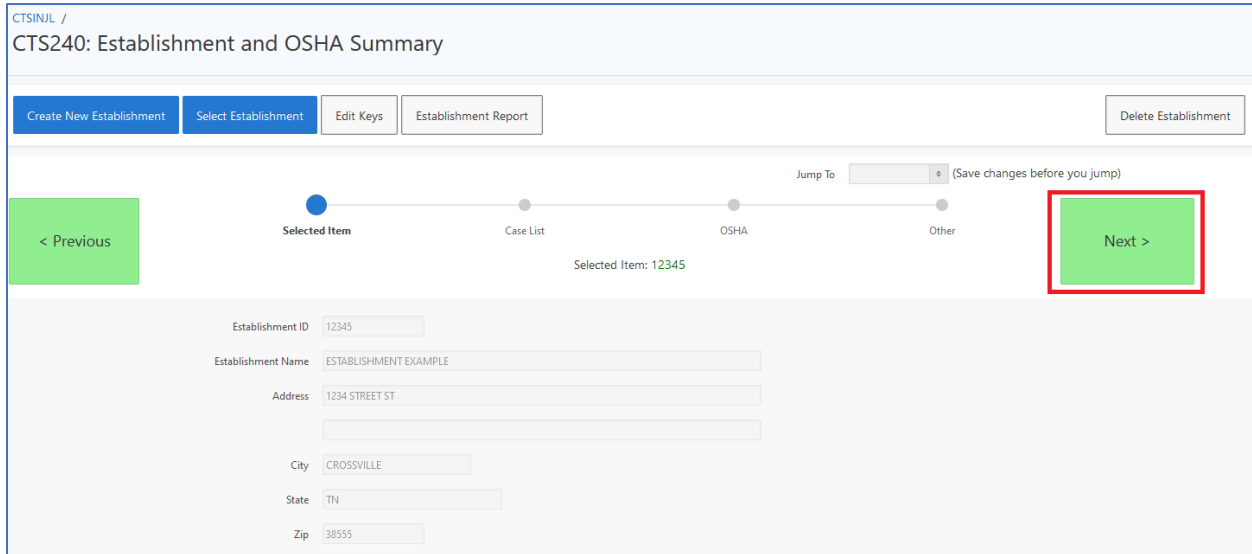


Enter text into *Establishment ID*, *Establishment Name*, *Address*, *City*, and *Zip* text fields. Use pulldown menu to select *State*, *Site*, and *Company*. Click **Save and Continue** button.



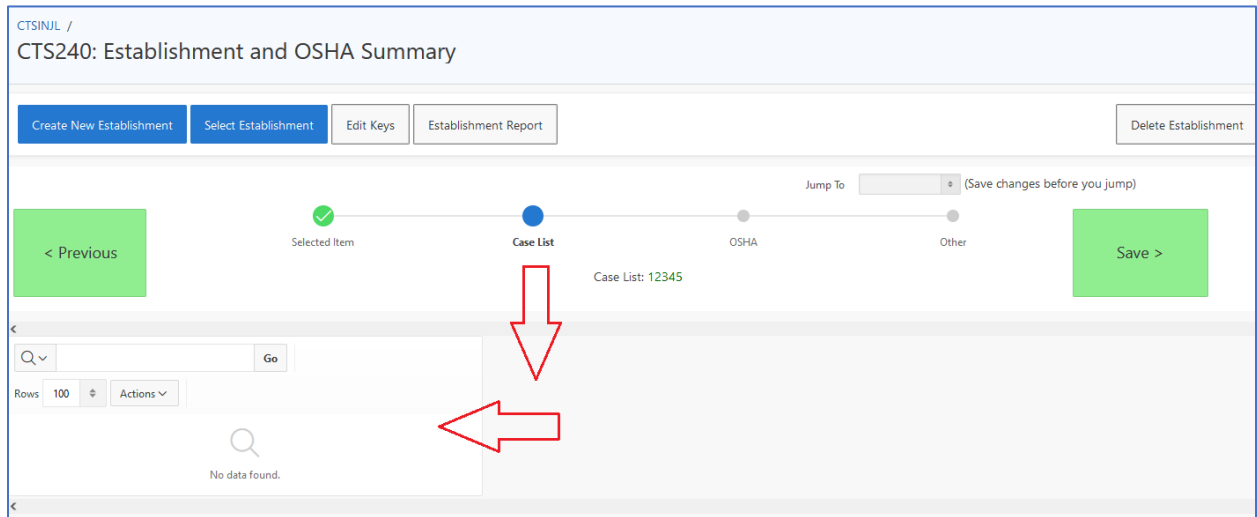
FIELD	DESCRIPTION
Establishment ID	Numeric identification for establishment
Establishment Name	Name of establishment
Address	Street Address
City	City
State	State
Company	Owning company of establishment

Click **Next** button to proceed to *Case List* tab.



### Case List

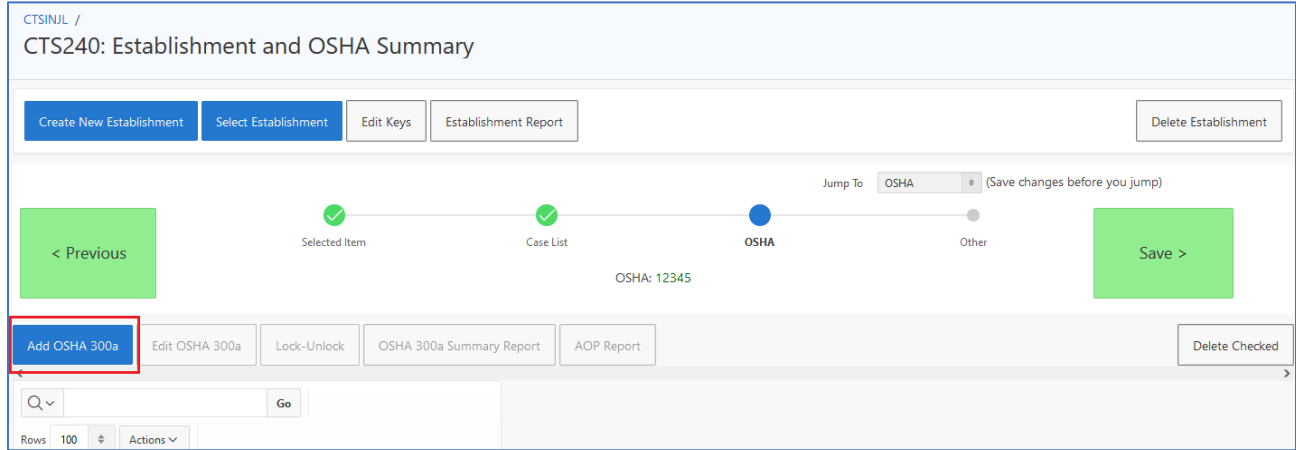
For reference, Open/Closed cases by Establishment are listed on the *Case List* screen. Click **Save** button to proceed to OSHA screen.





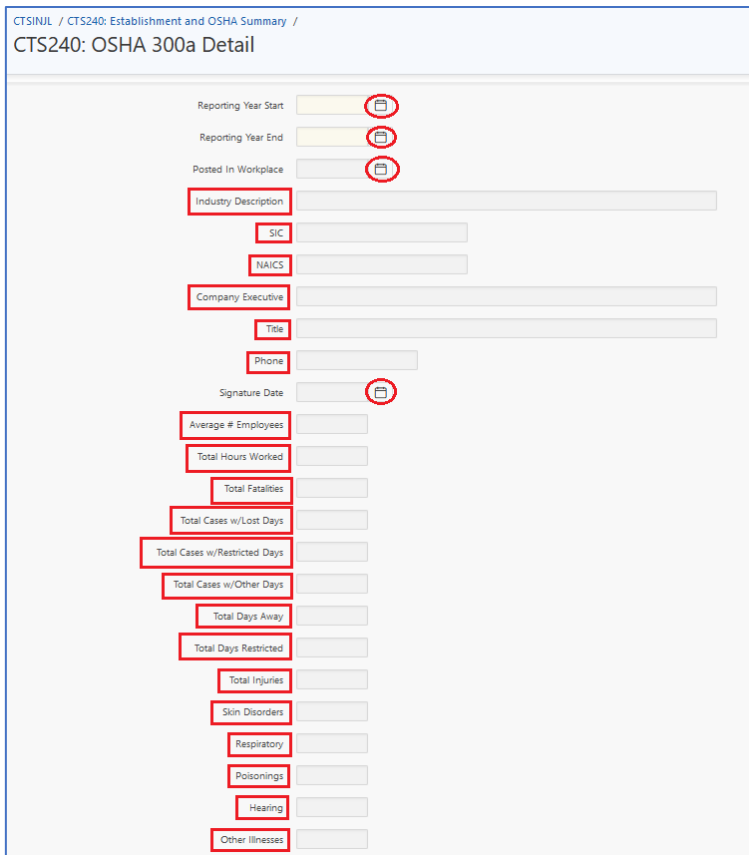
# OSHA

Click **Add OSHA 300a** button.



Enter text in *Industry Description, SIC, NAICS, Company Executive, Title, Phone, Average # Employees, Total Hours Worked, Total Fatalities, Total Cases w/Lost Days, Total Case w/Restricted Days, Total Cases w/Other Days, Total Days Away, Total Days Restricted, Total Injuries, Skin Disorders, Respiratory, Poisonings, Hearing, and Other Illnesses* text fields.

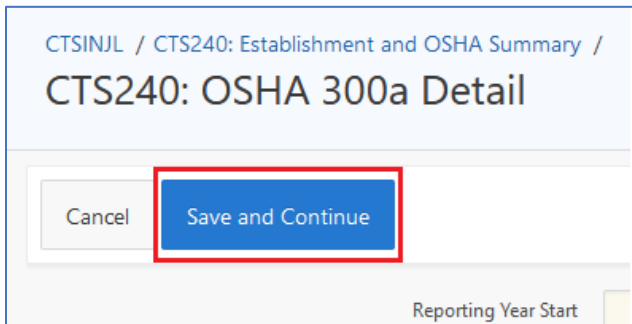
Click calendar buttons to select *Reporting Year Start, Reporting Year End, Posted in Workplace, and Signature* dates.



<b>FIELD</b>	<b>DESCRIPTION</b>
Reporting Year Start	Date reporting year begins
Reporting Year End	Date reporting year ends
Posted in Workplace	Date report was posted
Industry Description	Brief description of industry
SIC	Standard Industrial Classification
NAICS	North American Industry Classification System
Company Executive	Name of company executive
Title	Title of company executive
Phone	Contact phone number for company executive
Signature Date	Date report was signed
Average # of Employees	Average number of company employees
Total Hours Worked	Total number of hours worked
Total Fatalities	Total fatalities during reporting period
Total Cases w/ Lost Days	Total cases with lost days
Total Cases w/ Restricted Days	Total cases with restricted days
Total Cases w/ Other Days	Total cases with other type days
Total Days Away	Total days away from job facility
Total Days Restricted	Total days on restricted/limited duty
Total Injuries	Total number of injuries during reporting period

Skin Disorders	Number of skin disorders reported
Respiratory	Number of respiratory issues reported
Poisonings	Number of poisonings reported
Hearing	Number of hearing issues reported
Other Illnesses	Number of any other illnesses reported

Click **Save and Continue** button.



Click **Save** button to proceed to Other screen.

CTSINJL / CTS240: Establishment and OSHA Summary

Create New Establishment | Select Establishment | Edit Keys | Establishment Report | Delete Establishment

Jump To: OSHA (Save changes before you jump)

< Previous | Selected Item | Case List | OSHA | Other | Save >

OSHA: 12345

Add OSHA 300a | Edit OSHA 300a | Lock-Unlock | OSHA 300a Summary Report | AOP Report | Delete Checked

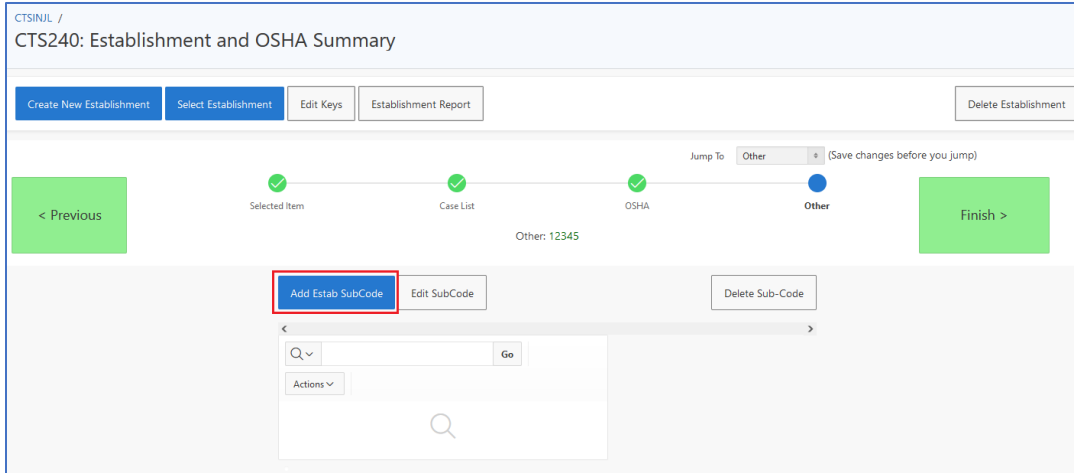
Go Rows 100 Actions

	Edit OSHA 300a	Year Start Date	Year End Date	Posted In Workplace Date	Lock Date	Average # Employees	Total Hours Worked	Total Fatalities	Total Cases w/Lost Days	Total Cases w/Restricted Days	Total Cases w/Other Days	Total Days Away	Total Days Restricted	Total Injuries	Skin Disorders	Respiratory	Poisonings	Hearing	Other Illnesses
<input checked="" type="checkbox"/>	<input type="checkbox"/>	01- JAN-2022	31- DEC-2022	15- DEC-2021		1200	48000	0	33	66	42	365	3600	60	12	40	2	33	15

## Other

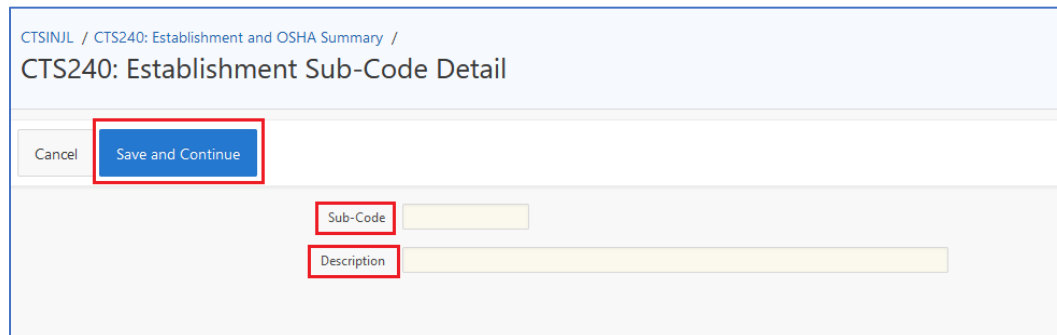
The SubCode is an optional breakdown that can be used for sorting cases.

Click **Add Estab SubCode** button.

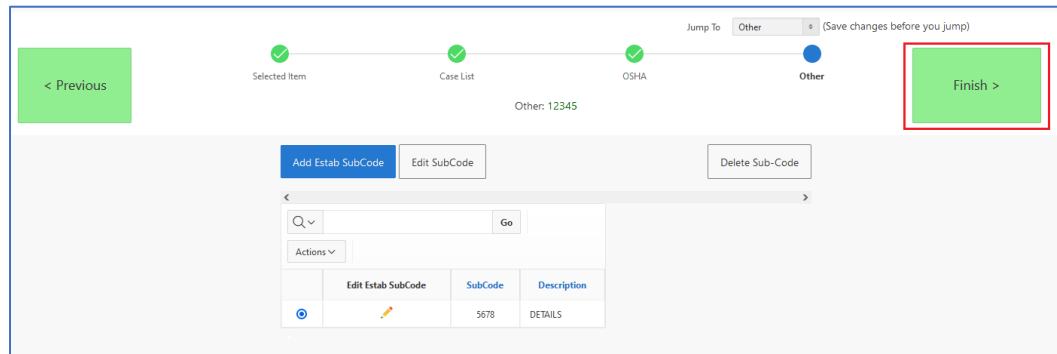


Enter text in *Sub-Code* and *Description* text fields.

Click **Save and Continue** button.



Click **Finish** button.



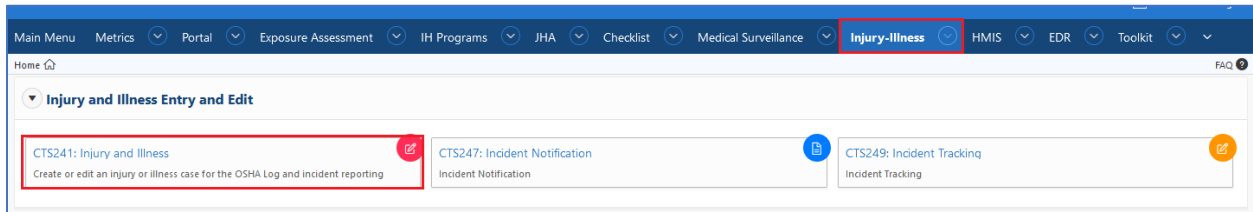
The newly created establishment is now available to reference throughout the injury-illness module.

# Chapter 3 – Case Creation

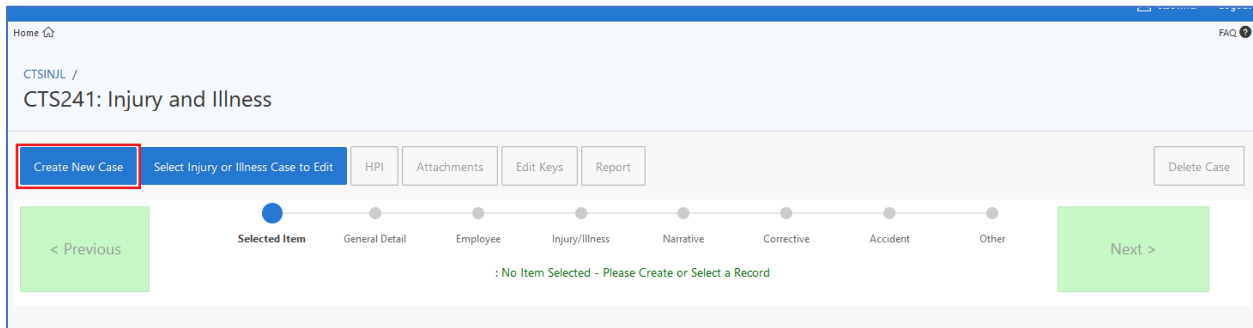
Case creation begins with the worker notifying medical of an injury or illness. The worker’s supervisor is notified of the incident (if not already aware). Ideally, the supervisor would use **CTS247** to send a summary of the situation to medical via incident tracking.

## CTS241: Create New Case

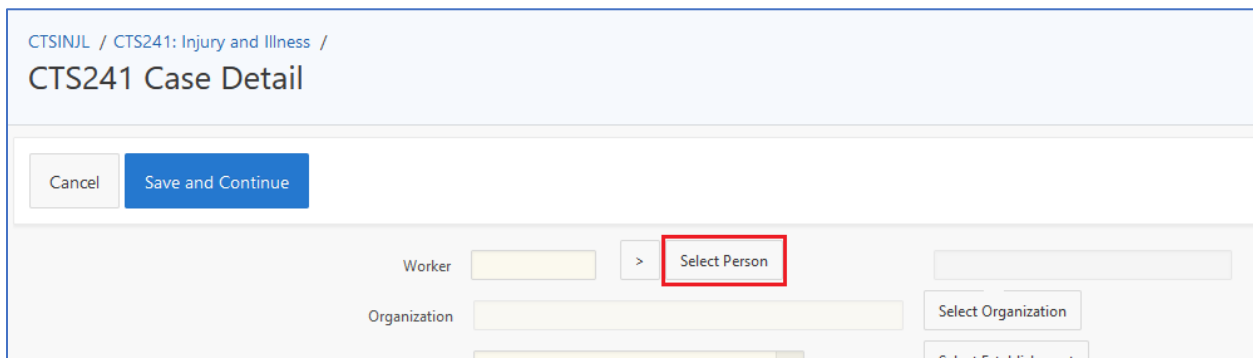
To create a new injury or illness case for the OSHA Log and incident reporting, click **CTS241: Injury and Illness**.



Click **Create New Case** button.



Click **Select Person** button to choose the worker that is injured or ill.



Click blue **Select** text to select a worker from the list.

Select	ITTECH	JOHN	ITSTBADGE	ITSTLOGON	ITST@FAKE.MAIL	SITE	COMPANY	SUPERVISOR	SUPBADGE
Select	MANAGER	MILLARD	GMBADGE	MGRLOGON	MANAGER@FAKE.MAIL	SITE	COMPANY		
Select	MEDPROVIDER	MANDY	MEDBADGE	MEDLOGON	PHYSICIAN@FAKE.MAIL	SITE	COMPANY	SUPERVISOR	SUPBADGE
Select	NOBODY	NOBODY	NOBODY	NOBODY		SITE	COMPANY		
Select	NOTIFYME	NANCY	NMBADGE	NMLOGON	NOTYFME@FAKE.MAIL	SITE	COMPANY	SUPERVISOR	SUPBADGE
Select	PLANNER	PENELOPE	PLANBADGE	PLANLOGON	PLANNER@FAKE.MAIL	SITE	COMPANY	SUPERVISOR	SUPBADGE
Select	REPWORKER	ROGER	REPWKRBADGE	REPLOGON	REPWKR@FAKE.MAIL	SITE	COMPANY	SUPERVISOR	SUPBADGE
Select	SUPERVISOR	SILLY	SUPBADGE	SUPLOGON	SUPERVISOR@FAKE.MAIL	SITE	COMPANY	MANAGER	GMBADGE
Select	SYSTEM	INITIAL	ITBADGE	CTSOWNER	owneremail@fakeit.com	SITE	COMPANY	SYSTEM	ITBADGE
Select	WORKER	WILLIAM	WKRBADGE	WKRLOGON	WORKER@FAKE.MAIL	SITE	COMPANY	SUPERVISOR	SUPBADGE

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**NOTE:** If unable to find a specific worker, add their information into **CTS403: Master Personnel List**. See **CTS Master List User Manual**.

Once system returns with selected worker, *Organization* and *Establishment* are auto filled.

Click the calendar buttons to select *Occur Date* and *Report Date*.

Use pulldown menu to select *Case Code*.

Enter *Case Number* in text field.

Use dropdown menus to select *Site* and *Company*.

Click **Save and Continue** button.

CTSINJL / CTS241: Injury and Illness / CTS241 Case Detail

Cancel **Save and Continue**

Worker: WKRBADGE > Select Person WORKER, WILLIAM

Organization: OPL1 OPL1 Select Organization

Establishment: 400650U Establishment name for 400650 Select Establishment

Occur Date: (mm/dd/yyyy)

Report Date: (to health services)

Case Code: 99 INCOMPLETE ←

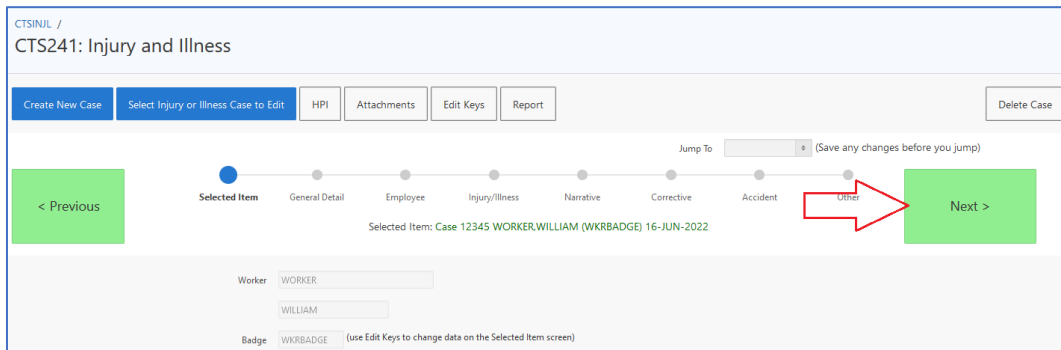
Case Number:

Site: SITE (SITE) Select Site

Company: COMPANY (COMPANY) Select Company

FIELD	DESCRIPTION
Worker	Name of worker
Organization	Name of organization
Establishment	Name of establishment
Occur Date	Date incident occurred
Report Date	Date incident was reported
Case Code	Indicates current status of case
Case Number	Identifying number assigned to case
Site	Name of site
Company	Name of company

Click **Next** button to continue to **General Detail** screen.



## General Detail

On the General Detail screen, click **Select Location** button.

The screenshot shows the 'General Detail' screen. At the top, there are buttons for 'Create New Case', 'Select Injury or Illness Case to Edit', 'HPI', 'Attachments', 'Edit Keys', 'Report', and 'Delete Case'. Below these is a progress bar with steps: 'Selected Item', 'General Detail' (active), 'Employee', 'Injury/Illness', 'Narrative', 'Corrective', 'Accident', and 'Other'. A 'Jump To' dropdown is set to '4' with a note '(Save any changes before you jump)'. Below the progress bar, there are input fields for 'Location', 'Where Event Occurred or Report Location', and 'Time Of Event (military)'. A red box highlights the 'Select Location' button, with a red arrow pointing to it from the right.

Click blue **Select** text to select a location from the list.

	Location ↑	Loc-2	Loc-3	Location Name	Location Category	Code	Site	Company	# Cases
Select	AREA 1	-	-	-	OFFICE AREA	F000004	SITE	COMPANY	0
Select	AREA 1	BUILDING 1	-	-	OFFICE AREA	F000003	SITE	COMPANY	993
Select	AREA 1	BUILDING 1	ROOM 1	-	OFFICE AREA	F000002	SITE	COMPANY	0
Select	AREA 1	BUILDING 1	ROOM 2	-	OFFICE AREA	F000005	SITE	COMPANY	1
Select	AREA 1	BUILDING 1	ROOM 3	-	OFFICE AREA	F000006	SITE	COMPANY	0
Select	AREA 1	BUILDING 1	ROOM 4	-	OFFICE AREA	F000007	SITE	COMPANY	0
Select	AREA 1	BUILDING 1	ROOM 5	-	OFFICE AREA	F000009	SITE	COMPANY	0
Select	AREA 1	BUILDING 1	ROOM 6	-	IH LAB	F000008	SITE	COMPANY	0
Select	AREA 2	-	-	-	PRODUCTION	F000012	SITE	COMPANY	1000

A red box highlights the 'Select' text in the first row of the table, and a red arrow points down to it from the left.

Once system returns with *Location*, enter text into *Where Event Occurred or Report Location* text field.

Enter *Time of Event* in military format.

Use pulldown menus to select *Accident Occurred*, *Accident Occurred on Employers Premises*, and *Investigation Type* options.

Click **Save** button to continue to **Employee** screen.



CTSINJL / CTS241: Injury and Illness

Location: AREA 2

Where Event Occurred or Report Location: first floor lobby

Time Of Event: 1300 (military)

Accident Occurred: Accident occurred Indoors

Accident Occurred on Employers Premises: Ye

Investigation Type: INVESTIGATION C

FIELD	DESCRIPTION
Location	Worker’s job location
Where Event Occurred or Report Location	Location where incident took place
Time of Event	When incident occurred in military time
Accident Occurred	Indoors or outdoors
Accident Occurred on Employers Premises	Yes or No
Case Code	Indicates current status of case, 99 – incomplete is default
Investigation Type	Investigation A, B, C, or non-recordable

## Employee

On the Employee screen, use the pulldown menus to select *Privacy Case*, *Sex*, and *Experience On Job Code* options.

Enter text into *Home Address* text field.

Enter *Time Employee Began Work* in military time.

The screenshot shows the 'Employee' tab in a web application. At the top, there are navigation buttons: 'Create New Case', 'Select Injury or Illness Case to Edit', 'HPI', 'Attachments', 'Edit Keys', 'Report', and 'Delete Case'. Below these is a breadcrumb trail: 'Selected Item' (checked), 'General Detail' (checked), 'Employee' (active), 'Injury/Illness', 'Narrative', 'Corrective', 'Accident', and 'Other'. A 'Jump To' dropdown and '(Save any changes before you jump)' text are also present. The main form area contains the following fields: 'Privacy Case' (dropdown menu with 'No' selected, highlighted with a red box and arrow), 'Home Address' (text input field, highlighted with a red box), 'Sex' (dropdown menu with 'Male Worker' selected, highlighted with a red box and arrow), 'Birth Date' (calendar icon and date '01/01/1992', highlighted with a red circle), 'Hire Date' (calendar icon and date '06/01/2021', highlighted with a red circle), 'Occupation' (text input field with 'OPERATOR' and a 'Select Occupation' button, highlighted with a red box), 'Time Employee Began Work' (text input field with '(military)' and a 'Select Occupation' button, highlighted with a red box), and 'Experience On Job Code' (dropdown menu, highlighted with a red box and arrow).

Click **Select Occupation** button.

This screenshot is identical to the previous one, but the 'Select Occupation' button next to the 'Occupation' field is highlighted with a red box.

Click blue **Select** text to select *Job Title*.

	Job Title
Select	COMPUTER SUPPORT
Select	IH TECHNICIAN II
Select	IH TECHNICIAN III
Select	INDUSTRIAL HYGIENIST
Select	MAINTENANCE PLANNER
Select	MANAGEMENT
Select	OPERATIONS MANAGER
Select	OPERATOR
Select	OPERATOR LEVEL I
Select	PHYSICIAN
Select	SAFETY PROFESSIONAL

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Once system returns with *Occupation*, click **Save** button to proceed to **Injury/Illness** screen.

CTSINIL / CTS241: Injury and Illness

Create New Case | Select Injury or Illness Case to Edit | HPI | Attachments | Edit Keys | Report | Delete Case

Jump To: (Save any changes before you jump)

< Previous | Selected Item | General Detail | **Employee** | Injury/Illness | Narrative | Corrective | Accident | Other | Save >

Employee Detail: Case 12345 WORKER,WILLIAM (WKRBADGE) 16-JUN-2022

Privacy Case: No

Home Address: 1234 STREET AVE

Sex: Male Worker

Birth Date: 01/01/1992

Hire Date: 06/01/2021

Occupation: OPERATOR | Select Occupation

Time Employee Began Work: 0700 (military)

Experience On Job Code: OVER 12 MONTHS

FIELD	DESCRIPTION
Privacy Case	Yes or No
Home Address	Address of worker
Sex	Male, Female, or Unknown
Birth Date	Worker’s date of birth
Hire Date	Worker’s date of hire
Occupation	Worker’s occupation
Time Employee Began Work	Time employee started shift in military time
Experience On Job Code	Under 3 mos., 3-12 mos., or over 12 mos.

### Injury/Illness

On the Injury/Illness screen, use pulldown menus to select *Injury Code*, ‘*Has employee returned to work with no further anticipated workdays lost or restricted?*’, ‘*Has employee been permanently transferred to a different job because of the accident?*’, ‘*Has employee been terminated because of the accident?*’, ‘*Did employee die?*’ fields.

FIELD	DESCRIPTION
Injury Code	Choose code associated with type of injury
Calendar Days Lost	Actual calendar days or estimated expected
Calendar Days Restricted	Actual calendar days or estimated expected
Has employee returned to work with no further anticipated workdays lost or restricted?	Yes or No
Has employee been permanently transferred to a different job because of the accident?	Yes or No
Has employee been terminated because of the accident?	Yes or No
Did employee die?	Yes or No
Death Date	Use calendar button if applicable

Click **Save** button to continue to **Narrative** screen.

CTSINJL / CTS241: Injury and Illness

Create New Case | Select Injury or Illness Case to Edit | HPI | Attachments | Edit Keys | Report | Delete Case

Jump To [dropdown] (Save any changes before you jump)

< Previous | Selected Item | General Detail | Employee | **Injury/Illness** | Narrative | Corrective | Accident | Other | Save >

Injury/Illness Detail: Case 12345 WORKER.WILLIAM (WKRBADGE) 16-JUN-2022

Injury Code: Code 7g(29) - All others

Calendar Days Lost: (Actual calendar days if available or estimated expected)

Calendar Days Restricted: (Actual calendar days if available or estimated expected)

Has employee returned to work with no further anticipated workdays lost or restricted? No

Has employee been permanently transferred to a different job because of the accident? No

Has employee been terminated because of the accident? No

Did employee die? No

Death Date: [calendar icon]

## Narrative

On the Narrative screen, enter text into all text fields. Use pulldown menus to select *Treated in Emergency Room?* and *Hospitalized Overnight?* options.

FIELD	DESCRIPTION
Describe the activity in progress at time of accident	Description of worker’s activity at accident time
Describe the accident sequentially, beginning with initiating events	Chronological description of cause/effect of incident
Name any objects or substances and how they were involved	List things pertinent to the incident and why
Describe the nature of the injury or illness and name the body part affected	Description of incident and affected body part
Name of physician or other health care provider	Physician or health care provider’s name
Physician Address	Address of physician’s office

Name of Hospital	Hospital name worker was treated at
Hospital Address	Address of hospital where worker was treated
Treated in Emergency Room?	Yes or No
Hospitalized Overnight?	Yes or No
Accident Cause – Conditions	Description of hazard/accident cause
Accident Cause – Factors influencing a or b	Description of any incident influencing factors

Click **Save** to continue to **Corrective** screen.

The screenshot shows the 'Narrative' step of a multi-step process in the CTSINIL application. The breadcrumb trail includes: Selected Item, General Detail, Employee, Injury/Illness, Narrative (current step), Corrective, Accident, and Other. A red arrow points to the 'Save >' button. Below the breadcrumb, there are several text input fields for describing the accident and injury details, followed by fields for physician and hospital information.

CTSINIL /  
CTS241: Injury and Illness

Create New Case Select Injury or Illness Case to Edit HPI Attachments Edit Keys Report Delete Case

Jump To (Save any changes before you jump)

< Previous Selected Item General Detail Employee Injury/Illness Narrative Corrective Accident Other Save >

Narrative Detail: Case 12345 WORKER,WILLIAM (WKRBADGE) 16-JUN-2022

Describe the activity in progress at time of accident

Describe the accident sequentially, beginning with initiating events

Name any objects or substances and how they were involved

Describe the nature of the injury or illness and name the body part affected

Name of physician or other health care provider

Physician Address

Name of Hospital

Hospital Address

## Corrective

On the Corrective Action screen, under Corrective Action Memos submenu, enter text into *Corrective Actions Taken* and *Corrective Actions Recommended* text fields. Use calendar button to select *To Be Completed By* date. Click **Select Person** button to select a *Corrective Action Contact*.

Click blue **Select** text to select a worker from the list.

< Return Without Selection

New Item

Q v Go Rows 100 Actions v

1 - 14 of 14

	Last Name ↑	First Name	Badge	UID	Email	Org id1	Org id2	Org id3	Org id4	Supervisor	Supervisor Badge	Site	Company
Select	194	194	194	194	-	-	-	-	-	-	-	SITE	COMPANY
Select	IHLABMGR	LARRY	IHEQBADGE	IHEQPLOGON	IHLAB@FAKE.MAIL	IHSL1	-	-	-	SUPERVISOR	SUPBADGE	SITE	COMPANY
Select	IHPEEREVIEW	PETER	PRVWBADGE	IHSPEER	IHSPEER@FAKE.MAIL	IHSL1	-	-	-	SUPERVISOR	SUPBADGE	SITE	COMPANY
Select	IHSAFETYPRO	SANDY	IHSPBADGE	IHSPLOGON	IHSP@FAKE.MAIL	IHSL1	-	-	-	SUPERVISOR	SUPBADGE	SITE	COMPANY
Select	IHTECH	JOHN	IHSTBADGE	IHSTLOGON	IHST@FAKE.MAIL	IHSL1	-	-	-	SUPERVISOR	SUPBADGE	SITE	COMPANY

Once system returns with Corrective Action Contact, use calendar button to select *Date Corrective Action Completed* date. Click the **Click Here To Send Corrective Action Email** button.



Corrective Actions Recommended

To Be Completed By: 06/27/2022

Corrective Action Contact: PRVWBADGE | Select Person | IHPEEREVIEW, PETER | Phone

Date Corrective Action Completed: 06/24/2022

Click Here To Send Corrective Action Email

Accident Investigation Contact: | Select Person | Phone

Worker Supervisor: SUPBADGE | Select Person | SUPERVISOR, SILLY | Phone

Report prepared by / Investigator: | Select Person | Phone

Click Here To Send New Case Notification Email

Click **OK** button to confirm email send.

Are you sure you want to send the Corrective Action Email?

Cancel OK

Email is logged at bottom of the screen.

Date Sent	From who	To Who	Subject
20-JUN-2022	owneremail@fakeit.com	OWNEREMAIL@FAKEIT.COM, IHSPEER@FAKE.MAIL	INJURY CORRECTIVE ACTION FOR WORKER, WILLIAM 16-JUN-2022

Click **Select Person** button to select *Accident Investigation Contact*.

To Be Completed By: 06/27/2022

Corrective Action Contact: PRVWBADGE | Select Person | IHPEEREVIEW, PETER | Phone: [ ]

Date Corrective Action Completed: 06/24/2022

Click Here To Send Corrective Action Email

Accident Investigation Contact: [ ] | **Select Person** | [ ] | Phone: [ ]

Worker Supervisor: SUPBADGE | Select Person | SUPERVISOR, SILLY | Phone: [ ]

Report prepared by / Investigator: [ ] | Select Person | [ ] | Phone: [ ]

Click Here To Send New Case Notification Email

Report Prepared Date: [ ]

Click blue **Select** text to select a worker from the list.

Select	IHTECH	JOHN	IHSTBADGE	IHSTLOGON	IHST@FAKE.MAIL	IHSL1	-	-	-	SUPERVISOR	SUPBADGE	SITE	COMPANY
Select	MANAGER	MILLARD	GMBADGE	MGRLOGON	MANAGER@FAKE.MAIL	ADMIN	-	-	-	-	-	SITE	COMPANY
Select	MEDPROVIDER	MANDY	MEDBADGE	MEDLOGON	PHYSICIAN@FAKE.MAIL	MEDICAL	-	-	-	SUPERVISOR	SUPBADGE	SITE	COMPANY
Select	NOBODY	NOBODY	NOBODY	NOBODY	-	-	-	-	-	-	-	SITE	COMPANY
Select	NOTIFYME	NANCY	NMBADGE	NMLOGON	NOTIFYME@FAKE.MAIL	MAINL1	-	-	-	SUPERVISOR	SUPBADGE	SITE	COMPANY
Select	PLANNER	PENELOPE	PLANBADGE	PLANLOGON	PLANNER@FAKE.MAIL	MAINL1	-	-	-	SUPERVISOR	SUPBADGE	SITE	COMPANY
Select	REPWORKER	ROGER	REPWKRBADGE	REPLOGON	REPWKR@FAKE.MAIL	OPL1	-	-	-	SUPERVISOR	SUPBADGE	SITE	COMPANY
Select	SUPERVISOR	SILLY	SUPBADGE	SUPLOGON	SUPERVISOR@FAKE.MAIL	OPL1	-	-	-	MANAGER	GMBADGE	SITE	COMPANY
Select	SYSTEM	INITIAL	ITBADGE	CTSOWNER	owneremail@fakeit.com	IHSL1	-	-	-	SYSTEM	ITBADGE	SITE	COMPANY

Click **Select Person** button to select *Report prepared by / Investigator*.

Corrective Action Contact: PRVWBADGE | Select Person | IHPEEREVIEW, PETER | Phone: [ ]

Date Corrective Action Completed: 06/24/2022

Click Here To Send Corrective Action Email

Accident Investigation Contact: SUPBADGE | Select Person | SUPERVISOR, SILLY | Phone: [ ]

Worker Supervisor: SUPBADGE | Select Person | SUPERVISOR, SILLY | Phone: [ ]

Report prepared by / Investigator: [ ] | **Select Person** | [ ] | Phone: [ ]

Click Here To Send New Case Notification Email

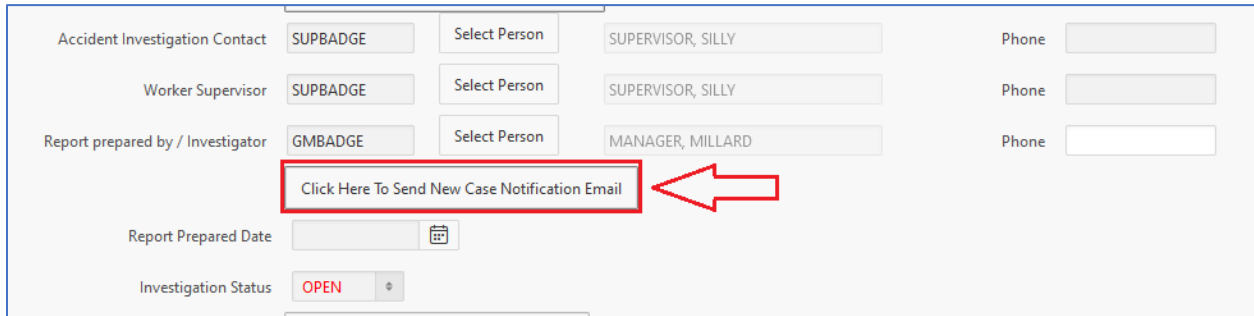
Report Prepared Date: [ ]

Investigation Status: OPEN

Click blue **Select** text to select a worker from the list.

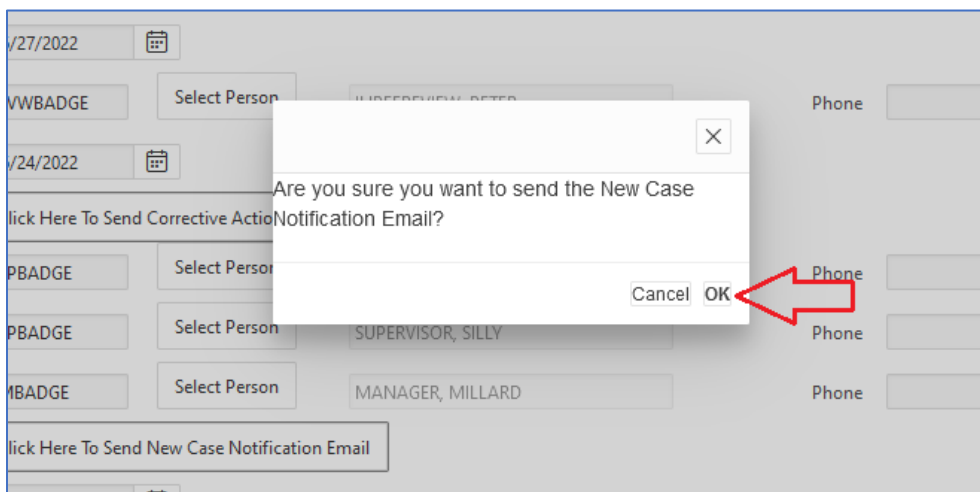
	Last Name ↑	First Name	Badge	UID	Email	Org id1	Org id2	Org id3	Org id4	Supervisor	Supervisor Badge	Site	Company
Select	194	194	194	194	-	-	-	-	-	-	-	SITE	COMPANY
Select	IHLABMGR	LARRY	IHEQBADGE	IHEQPLOGON	IHLAB@FAKE.MAIL	IHSL1	-	-	-	SUPERVISOR	SUPBADGE	SITE	COMPANY
Select	IHPEEREVIEW	PETER	PRVWBADGE	IHSPEER	IHSPEER@FAKE.MAIL	IHSL1	-	-	-	SUPERVISOR	SUPBADGE	SITE	COMPANY
Select	IHSAFETYPRO	SANDY	IHSPBADGE	IHSPLOGON	IHSP@FAKE.MAIL	IHSL1	-	-	-	SUPERVISOR	SUPBADGE	SITE	COMPANY
Select	IHTECH	JOHN	IHSTBADGE	IHSTLOGON	IHST@FAKE.MAIL	IHSL1	-	-	-	SUPERVISOR	SUPBADGE	SITE	COMPANY
Select	MANAGER	MILLARD	GMBADGE	MGRLOGON	MANAGER@FAKE.MAIL	ADMIN	-	-	-	-	-	SITE	COMPANY
Select	MEDPROVIDER	MANDY	MEDBADGE	MEDLOGON	PHYSICIAN@FAKE.MAIL	MEDICAL	-	-	-	SUPERVISOR	SUPBADGE	SITE	COMPANY

Click the **Click Here To Send New Case Notification Email** button.



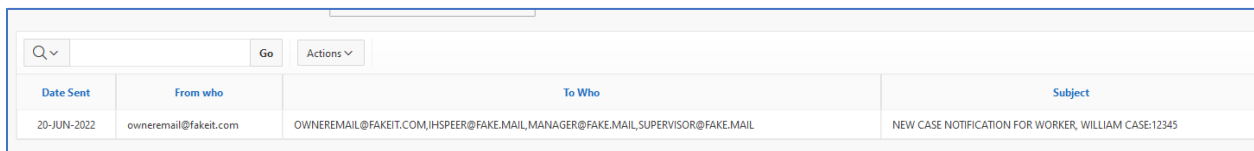
The screenshot shows a form with several fields. The 'Report prepared by / Investigator' field is highlighted with a red box, and a red arrow points to the button labeled 'Click Here To Send New Case Notification Email' located below it. Other fields include 'Accident Investigation Contact', 'Worker Supervisor', 'Report Prepared Date', and 'Investigation Status' (set to 'OPEN').

Click the **OK** button to confirm email send.





The screenshot shows a confirmation dialog box overlaid on the form. The dialog box contains the text: 'Are you sure you want to send the New Case Notification Email?'. At the bottom of the dialog box, there are two buttons: 'Cancel' and 'OK'. A red arrow points to the 'OK' button.

Email is added to log at the bottom of the screen.






Date Sent	From who	To Who	Subject
20-JUN-2022	owneremail@fakeit.com	OWNEREMAIL@FAKEIT.COM,HSPEER@FAKE.MAIL,MANAGER@FAKE.MAIL,SUPERVISOR@FAKE.MAIL	NEW CASE NOTIFICATION FOR WORKER, WILLIAM CASE:12345


Use calendar button to select *Report Prepared Date*.

Accident Investigation Contact SUPBADGE Select Person SUPERVISOR, SILLY Phone  
Worker Supervisor SUPBADGE Select Person SUPERVISOR, SILLY Phone  
Report prepared by / Investigator GMBADGE Select Person MANAGER, MILLARD Phone  
Click Here To Send New Case Notification Email  
Report Prepared Date     
Investigation Status OPEN  
Click Here To Send Case Complete Email


Use pulldown menu to toggle Investigation Status to **CLOSED**. Click the *Click Here To Send Case Complete Email* button.

Accident Investigation Contact SUPBADGE Select Person SUPERVISOR, SILLY Phone  
Worker Supervisor SUPBADGE Select Person SUPERVISOR, SILLY Phone  
Report prepared by / Investigator GMBADGE Select Person MANAGER, MILLARD Phone  
Click Here To Send New Case Notification Email  
Report Prepared Date 06/20/2022   
Investigation Status CLOSE    

Click Here To Send Case Complete Email



Click the **OK** button to confirm email send.

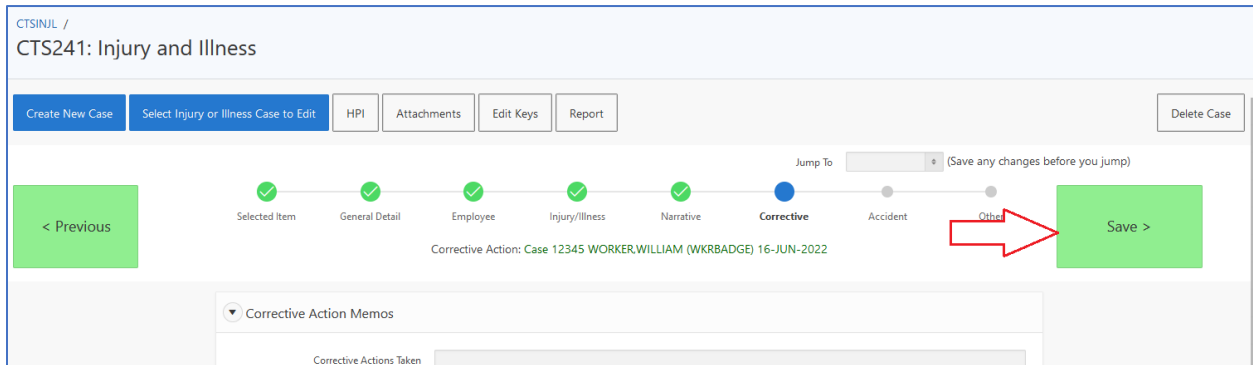
To Send Corrective Action Email? Are you sure you want to send the Case Complete Email?  
Cancel OK 

Email is added to log at the bottom of the screen.

Date Sent	From who	To Who	Subject
20-JUN-2022	owneremail@fakeit.com	OWNEREMAIL@FAKEIT.COM,IHSPER@FAKE.MAIL,MANAGER@FAKE.MAIL,SUPERVISOR@FAKE.MAIL	CASE COMPLETE NOTIFICATION FOR WORKER, WILLIAM CASE:12345
20-JUN-2022	owneremail@fakeit.com	OWNEREMAIL@FAKEIT.COM,IHSPER@FAKE.MAIL,MANAGER@FAKE.MAIL,SUPERVISOR@FAKE.MAIL	NEW CASE NOTIFICATION FOR WORKER, WILLIAM CASE:12345

FIELD	DESCRIPTION
Corrective Action Memos	Description of corrective actions taken and/or recommended
To Be Completed By	Deadline to complete corrective action
Corrective Action Contact	Select worker to oversee corrective action
Accident Investigation Contact	Select investigator
Worker Supervisor	Select worker’s supervisor
Report prepared by/ Investigator	Select reporter/investigator
Report Prepared Date	Enter report prep date
Investigation Status	Open or Closed

Click **Save** to continue to **Accident** screen.



## Accident

On the Accident screen, use pulldown menus to select all incident details.

**NOTE:** Click the arrow next to each section to expand it.

FIELD	DESCRIPTION
Type of Accident	Select type of accident
Nature of Injury or Illness	Select nature of incident
Part of body	Choose a body part
Agency	Select type of agent involved
Unsafe Condition	Select any known unsafe condition
Unsafe Act	Select any known unsafe act
Program Area	Select program area
Total Accident Damage \$	Enter dollar amount if known
Unsafe Personal Factor	Select level of unsafe personal factor if any
Task Category	Select task category
Activity	Select activity at time of incident
ISM Weakness	Select ISM weakness if any
General Factor	Select general factor level of incident

Under the *Additional Detail For Above Selections* submenu, enter text into all text fields.

▼ Additional Detail For Above Selections

Type of Accident

Unsafe Personal Factor

Nature of Injury or Illness

Task Category

Part of Body

Activity

Agency

Major Cause

Unsafe Condition

ISM Weakness

Unsafe Act

FIELD	DESCRIPTION
Type of Accident	Description of accident type
Unsafe Personal Factor	Description of unsafe personal factor
Nature of Injury or Illness	Description of nature of injury or illness
Task Category	Enter a task category
Part of Body	Enter affected body part
Activity	Description of activity at incident time
Agency	Enter agency
Major Cause	Description of incident major cause
Unsafe Condition	Description of any unsafe condition
ISM Weakness	Enter ISM weakness
Unsafe Act	Description of any unsafe act

Under the *Accident Analysis Checklist* submenu, use pulldown menus to select all options. Add notes to *Public Comment* text field.

FIELD	DESCRIPTION
Incident Related	Yes or No
Gloves Flag	Yes or No
Task Based	Yes or No
Task Based Type	Yes or No
Task Based Type	Select task based type
Safety Violations	Select Yes or No
Training Deficiency	Select Yes or No
Medical Restriction	Select Yes or No
Pre-existing	Select Yes or No
Safety Glasses/Goggles	Select Yes or No
Controls Identified	Select Yes or No



Controls Effective	Select Yes or No
Respirator	Select Yes or No
Safety Shoes	Select Yes or No
Hazard Identified	Select Yes or No
MSD	Select Yes or No

Under the *CAIRS Codes* submenu, there are codes that are not captured automatically by the system while creating a case in **CTS241**.

Enter corresponding text into these fields if needed.

CAIRS Codes

OCCUP

EQ1\_G

EQ2\_G

EQ\_C

DCAUSE

ICAUSE

LOSSEVENTCODE

BODYPARTII

IITYPE

PPECODES

ACTIVITYCODE

NEEDSCODING

PROGOFF

FIELD	DESCRIPTION
OCCUP	Enter code
EQ1_G	Enter code
EQ2_G	Enter code
EQ_C	Enter code

DCAUSE	Enter code
ICAUSE	Enter code
LOSSEVENTCODE	Enter code
BODYPARTII	Enter code
IITYPE	Enter code
PPECODES	Enter code
ACTIVITYCODE	Enter code
NEEDSCODING	Enter code
PROGOFF	Enter code

Click Save to continue to **Other** screen.

CTSINJL / CTS241: Injury and Illness

Jump To  (Save any changes before you jump)

< Previous    Selected Item    General Detail    Employee    Injury/Illness    Narrative    Corrective    **Accident**    Other    Save >

Accident Analysis: Case 12345 WORKER,WILLIAM (WKRBADGE) 16-JUN-2022

Type Of Accident  Select Type of Accident    Unsafe Personal Factor  Select Unsafe Personal Factor

Nature of Injury or Illness  Select Nature of Inj/Illness    Task Category  Select Task Category

Part of body  Select Part of Body    Activity  Select Activity

Agency  Select Agency    Major Cause  Select Major Cause

Unsafe Condition  Select Unsafe Condition    ISM Weakness  Select ISM Weakness

Unsafe Act  Select Unsafe Act    General Factor  Select General Factor

Program Area  Select Program Area

Total Accident Damage \$

▶ Additional Detail For Above Selections

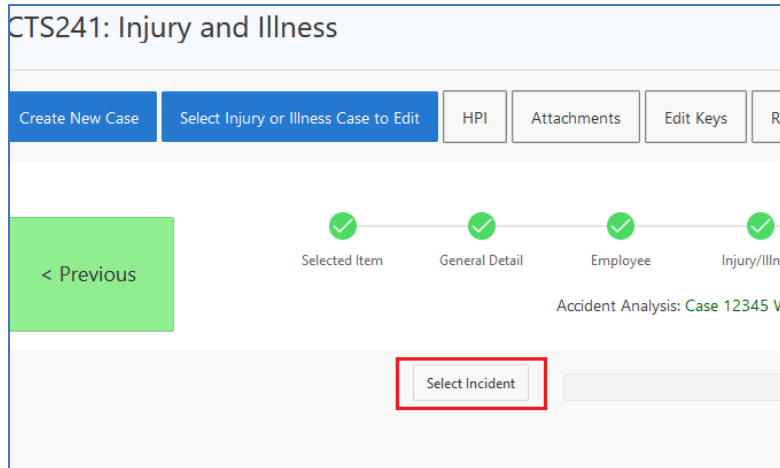
▶ Accident Analysis Checklist

▶ Public Comment

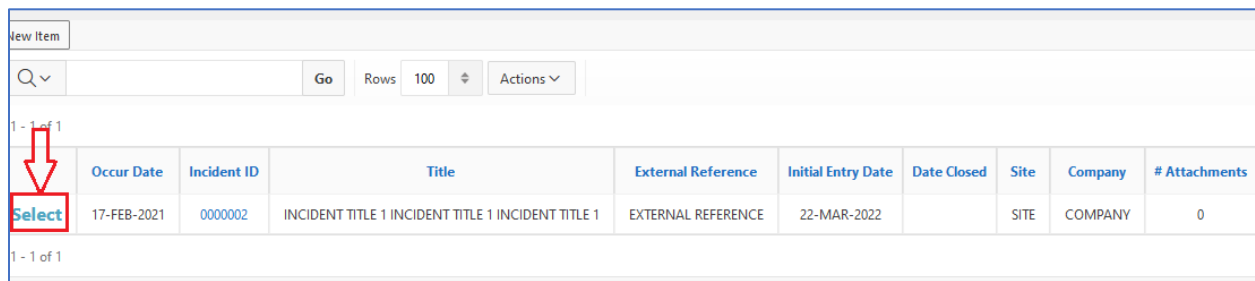
▶ CAIRS Codes

### Other

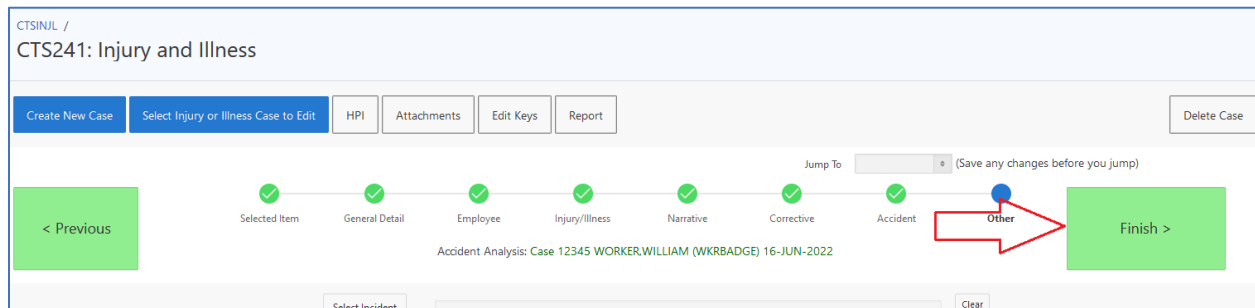
On Other screen, click **Select Incident** button.



Click blue **Select** text to select an incident.



Click **Finish** button to complete new case entry.

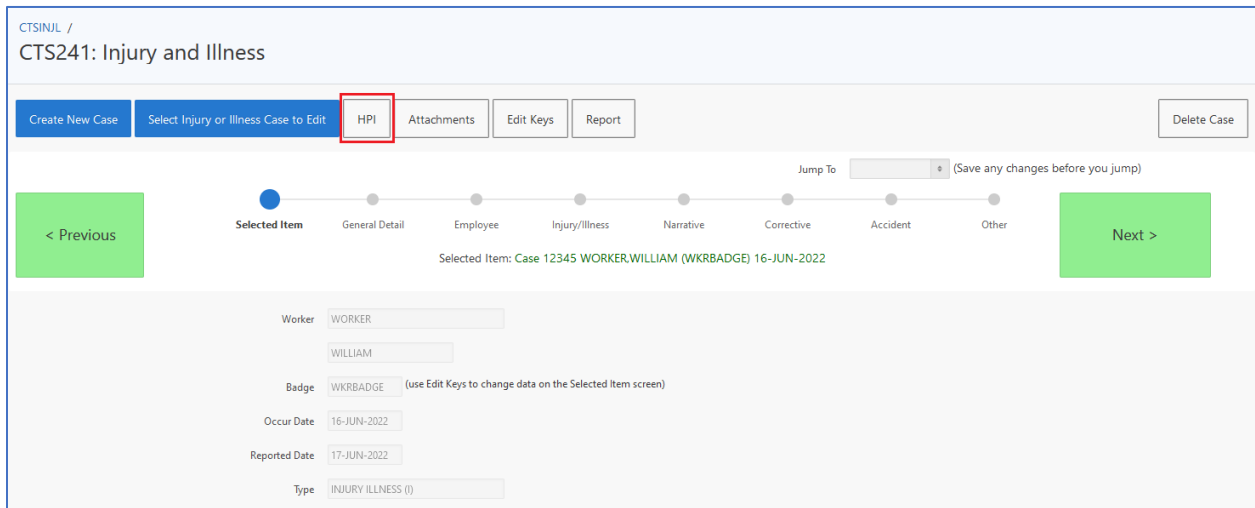


# HPI

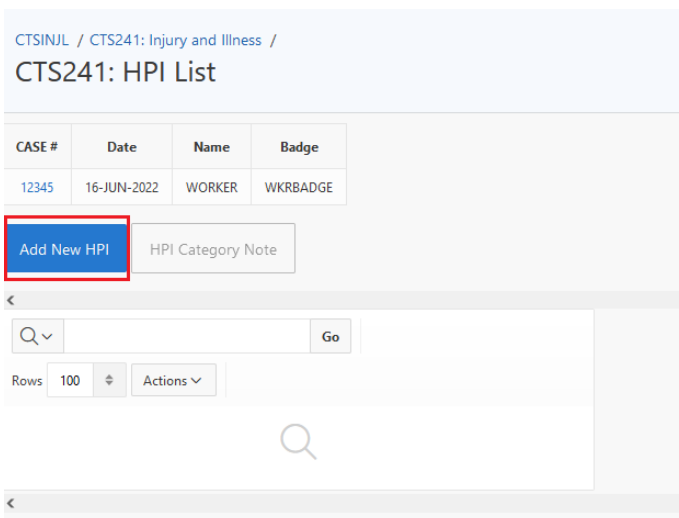
There may be additional features that management wants to take advantage of. Collecting additional data for trend reporting is up to each company.

One example of this is *HPI*, aka Human Performance Indicator, which can give more insight into injury-illness trends. There are four types of HPI: task demands, individual capabilities, work environment, and human nature. At management request, HPI is determined and entered by the case investigator as follows.

Select an existing case. Click **HPI** button.

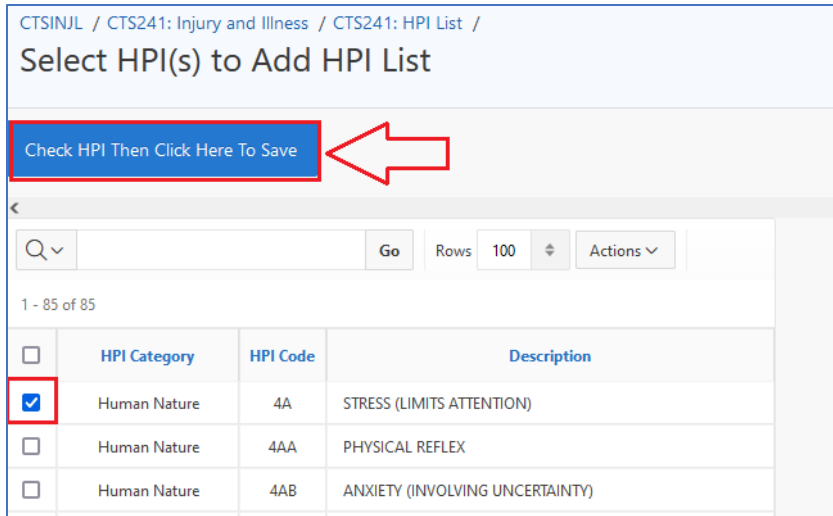


Click **Add New HPI** button.

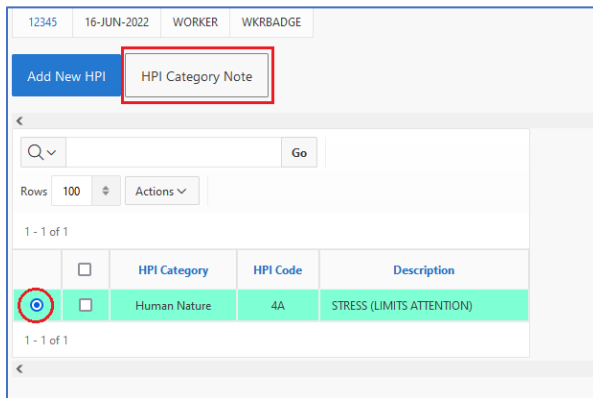


Click checkbox(es) to select HPI(s).

Click the **Check HPI Then Click Here To Save** button.



To add an HPI Category Note, click the radio button of an HPI. Click **HPI Category Note** button.



Enter text into *HPI Category Note* text field. Click **Save and Continue** button.



Click **CTS241: Injury and Illness** / breadcrumb to return to case entry/edit screen.

CTSINJL / CTS241: Injury and Illness /  
CTS241: HPI List

CASE #	Date	Name	Badge
12345	16-JUN-2022	WORKER	WKRBADGE

[Add New HPI](#)

<

Rows

1 - 1 of 1

<input type="checkbox"/>	HPI Category	HPI Code	Description
<input checked="" type="checkbox"/>	Human Nature	4A	STRESS (LIMITS ATTENTION)

1 - 1 of 1

<

HPI Category Notes

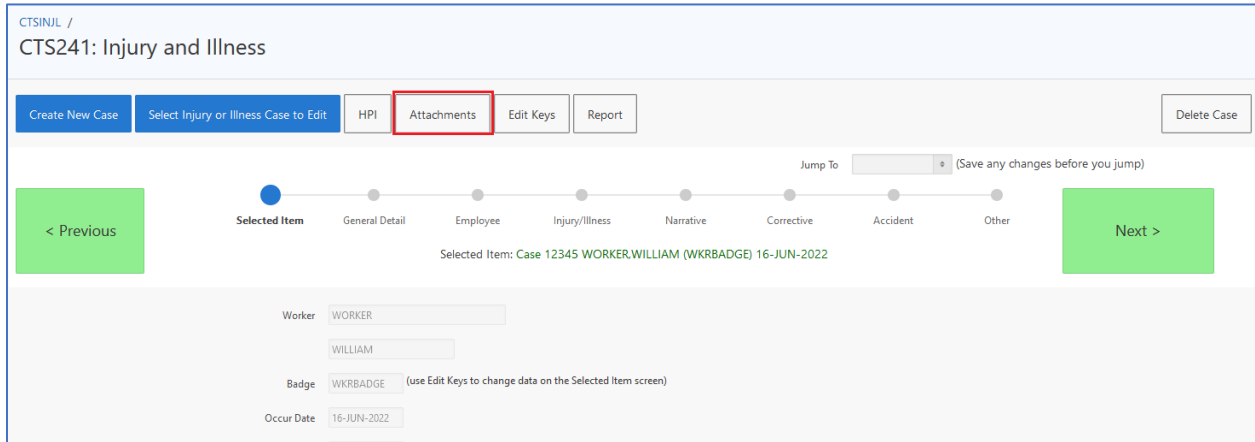
Human Nature Notes

**Spouse recently passed away. Attention span is minimal.**

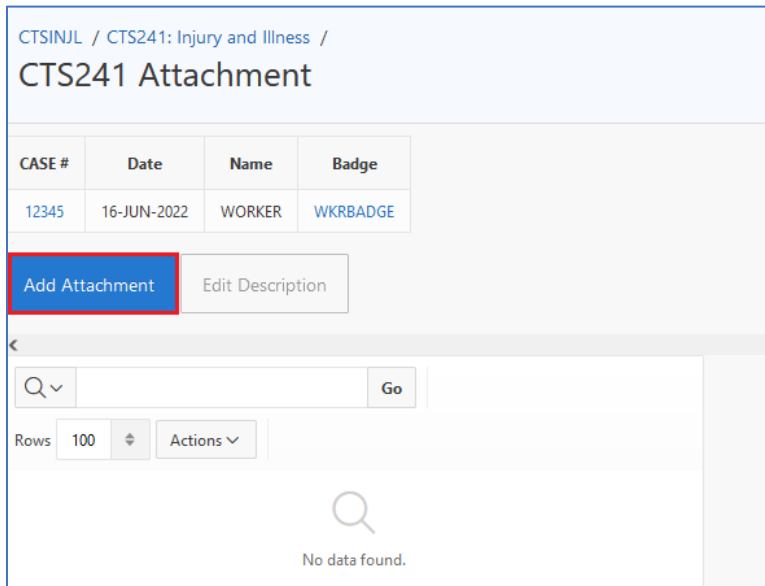
# Attachments

There may be times when additional documentation needs to be added to the case. Documents and photos can be uploaded via the **Attachment** button.

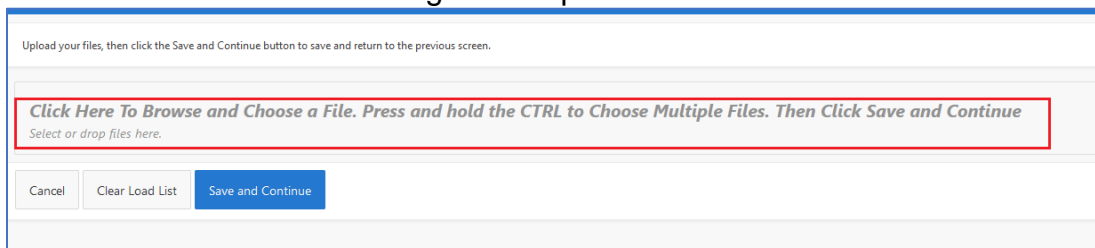
Click **Attachments** button.



Click **Add Attachment** button.



Click to browse for files or drag and drop files into the outlined box.



Once files are added, click **Save and Continue** button.

Upload your files, then click the Save and Continue button to save and return to the previous screen.

*Click Here To Browse and Choose a File. Press and hold the CTRL to Choose Multiple Files. Then Click Save and Continue Select or drop files here.*

Cancel Clear Load List **Save and Continue**

The list shown below will be saved when you click the Save and Continue button

File Name
people.png

Click **CTS241: Injury and Illness** / breadcrumb to return to case entry/edit screen.

CTSINJL / **CTS241: Injury and Illness** /

### CTS241 Attachment

CASE #	Date	Name	Badge
12345	16-JUN-2022	WORKER	WKRBADGE

**Add Attachment** Edit Description

<   Rows 100

1 - 1

		Edit Description	Description of attachment	Filename when uploaded	Date Attached	Attached By
<input type="radio"/>	<input type="checkbox"/>	View/Download		people.png	29-JUN-2022	CHARITY

1 - 1

<

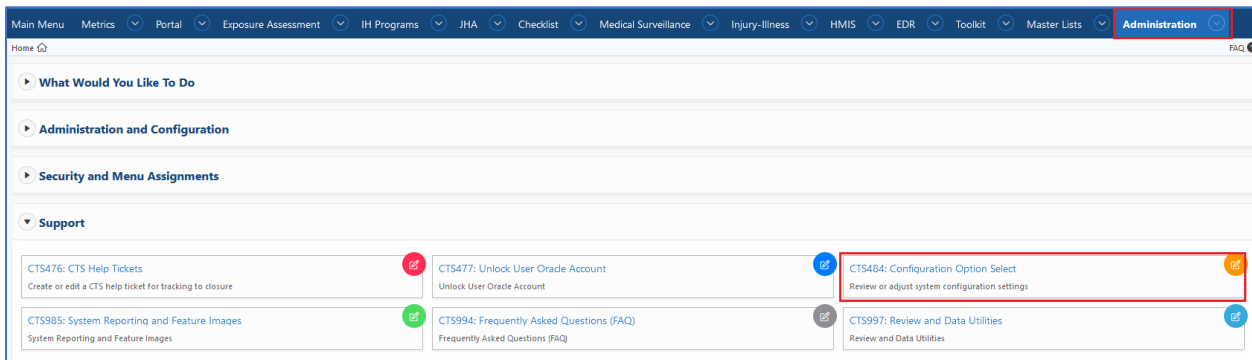


# Chapter 4 – Configuring & Using Email

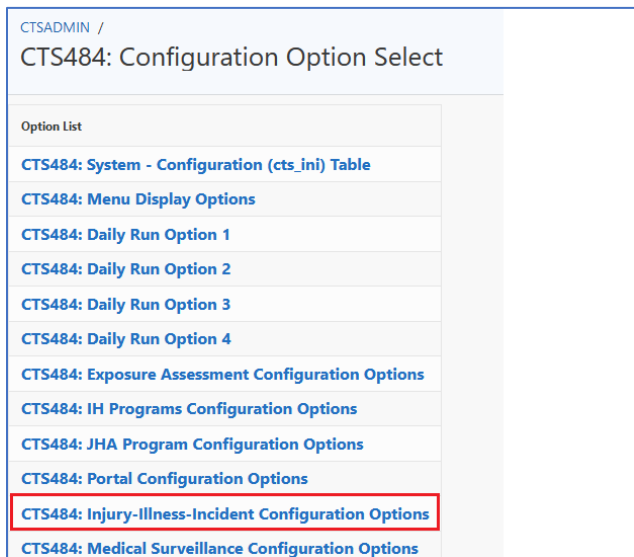
Email for injury-illness notification is customizable. This flexibility allows a user to craft custom email content and tailor the email settings. This chapter focuses on configuring and sending Corrective Action Email.

## Configure Email Content in CTS484

From CTS Main Menu, click **Administration**. Under *Support* submenu, click **CTS484: Configuration Option Select**.



Click blue **CTS484: Injury-Illness Incident Configuration Options** text.



Click blue **CTS484: Injury-Illness Configuration Options** text.

CTSADMIN / CTS484: Configuration Option Select /

### CTS484: Injury-Illness-Incident Configuration Options

Option List

- CTS484: Injury-Illness Configuration Options**
- CTS484: Incident Configuration Options

CTSADMIN / CTS484: Configuration Option Select / CTS484: Injury-Illness-Incident Configuration Options /

### CTS484: Injury-Illness Configuration Options

- ▶ Injury-Illness Program Contacts
- ▶ Injury-Illness Defaults
- ▶ Email (General)
- ▶ New Case Notification Email
- ▶ Corrective Action Email
- ▶ Case Complete Email

### Injury-Illness Program Contacts

▼ Injury-Illness Program Contacts

[Add Program Contact](#)

<

no data found

<

### Injury-Illness Defaults

▼ Injury-Illness Defaults

Save Default Information

Enable entry of workdays versus letting the system auto-calculate using calendar days

Report prepared by/investigator    Phone

Accident investigation contact    Phone

Name of physician

Physician address

Home address

Conditions

Actions

Factors Influencing

### Email (General)

▼ Email (General)

Save Email Configuration

Email account to use when sending CTS241 email  (if not entered the person pushing button email is used)

Automatically set case status closed when completion email is sent

Stop ALL email related to CTS241

### New Case Notification Email

▼ New Case Notification Email

Save New Case Notification Configuration

Stop New Case Notification Email

Enable Custom Email For Case Notification

Do not include link in New Case Notification Email

Hello message top of email

Header message near top of email

Footer message bottom of email

Send to person entering record when button is pushed

Send to Corrective Action Contact

Send to Report prepared by / Investigator

Send to Accident Investigation Contact

Send to anyone on the Injury-Illness Program Contacts

Under *Corrective Action Email* submenu, click checkboxes to select options. Enter text into text fields. Click **Save Corrective Action Configuration** button.

Corrective Action Email

Save Corrective Action Configuration

- Stop CTS241 Corrective Action Email
- Enable Custom Email For Corrective Action
- Do not include link in Corrective Action Email

Hello message top of email

Header message near top of email

Footer message bottom of email

- Send to person entering record when button is pushed
- Send to Corrective Action Contact
- Send to Report prepared by / Investigator
- Send to Accident Investigation Contact
- Send to anyone on the Injury-Illness Program Contacts

### Case Complete Email

Case Complete Email

Save Case Complete Configuration

- Stop CTS241 Case Complete Email
- Enable Custom Email For Case Complete
- Do not include link in Case Complete Email

Hello message top of email

Header message near top of email

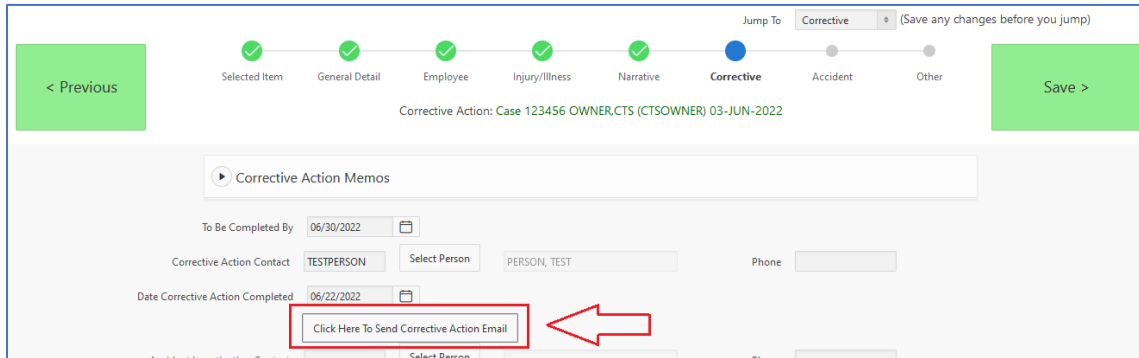
Footer message bottom of email

- Send to person entering record when button is pushed
- Send to Corrective Action Contact
- Send to Report prepared by / Investigator
- Send to Accident Investigation Contact
- Send to anyone on the Injury-Illness Program Contacts

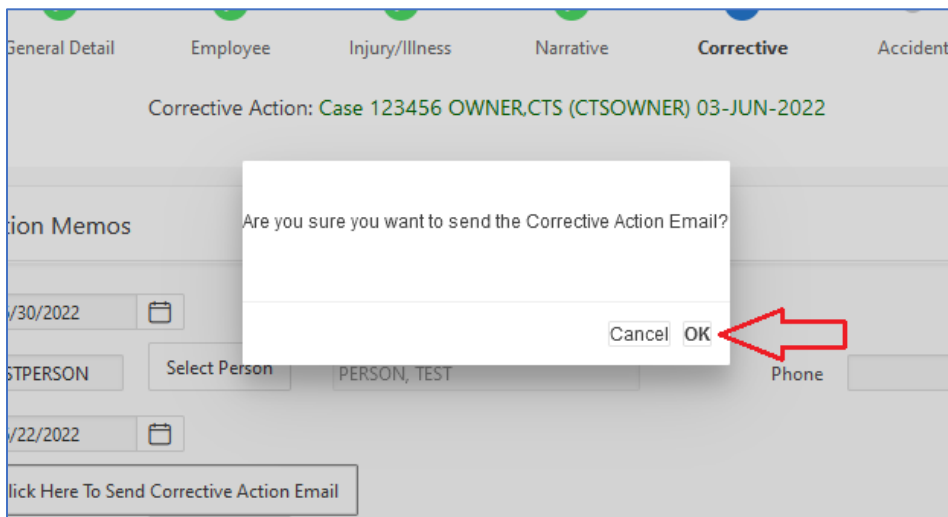
## Send Email Notifications in CTS241

Under the **Corrective** tab, use calendar buttons to select *To Be Completed By* and *Date Corrective Action Completed* dates. Click **Select Person** button.

Click the **Click Here to Send New Case Notification Email** button.



Click **OK** button to confirm email send.



Email is logged at bottom of the screen.

Date Sent	From who	To Who	Subject
20-JUN-2022	owneremail@fakeit.com	OWNEREMAIL@FAKEIT.COM,IHSPSEER@FAKE.MAIL,MANAGER@FAKE.MAIL,SUPERVISOR@FAKE.MAIL	CASE COMPLETE NOTIFICATION FOR WORKER, WILLIAM CASE:12345
20-JUN-2022	owneremail@fakeit.com	OWNEREMAIL@FAKEIT.COM,IHSPSEER@FAKE.MAIL,MANAGER@FAKE.MAIL,SUPERVISOR@FAKE.MAIL	NEW CASE NOTIFICATION FOR WORKER, WILLIAM CASE:12345

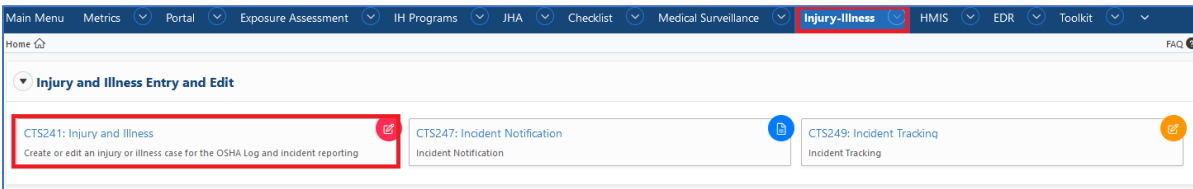
Click **Save** button. Click **CTSINJL** / breadcrumb to return to Injury Illness menu.

# Chapter 5 – Case Reporting

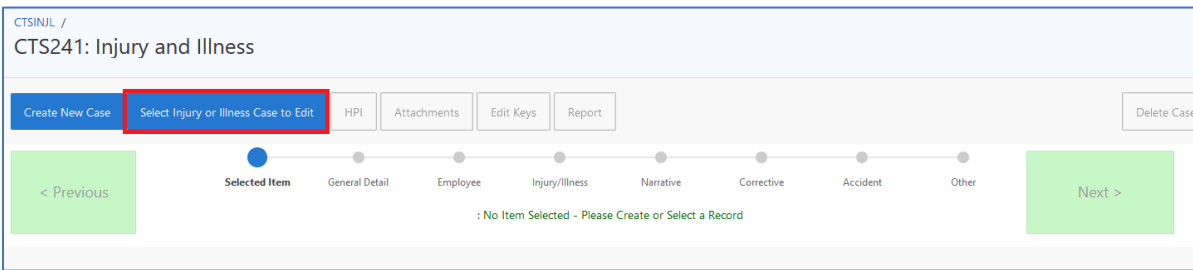
When reporting a case, raw data is transformed into valuable output. This chapter covers four reports that demonstrate this ability to help your company achieve success.

## CTS241: Case Investigation

Click **CTS241: Injury and Illness** button.



Click **Select Injury or Illness Case to Edit**.



Click blue **Select** text to select a worker/case.

	Date	Worker	Badge	First Name	Case	Case Code	Days Lost	Days Restricted	Investigation Status	Org IDL1	Org IDL2	Org IDL3	Org IDL4	Organization Description	# Attachments	Establishment	Company
Select	16-JUN-2022	WORKER	WKRBADGE	WILLIAM	12345	INCOMPLETE (99)	-	-	CLOSED	OPL1	-	-	-	OPL1	0	400650U	COMPANY
Select	06-MAY-2022	IHPEEREVIEW	PRVVBADGE	PETER	-	INCOMPLETE (99)	-	-	OPEN	IHSL1	-	-	-	IHSL1	0	400650U	COMPANY
Select	11-MAR-2022	SUPERVISOR	SUPBADGE	SILLY	-	INCOMPLETE (99)	-	-	OPEN	OPL1	-	-	-	OPL1	0	4006503	COMPANY
Select	11-MAR-2022	IHSAFETYPRO	IHSPBADGE	SANDY	-	INCOMPLETE (99)	-	-	OPEN	IHSL1	-	-	-	IHSL1	0	4006503	COMPANY
Select	11-MAR-2022	WORKER	WKRBADGE	WILLIAM	-	INCOMPLETE (99)	-	-	OPEN	OPL1	-	-	-	OPL1	0	4006503	COMPANY
Select	10-	SUPERVISOR	SUPBADGE	SILLY	-	INCOMPLETE (99)	-	-	OPEN	OPL1	-	-	-	OPL1	0	4006503	COMPANY

Click **Report** button.

CTSINJL /  
CTS241: Injury and Illness

Create New Case Select Injury or Illness Case to Edit HPI Attachments Edit Keys **Report** Delete Case

Jump To (Save any changes before you jump)

< Previous Selected Item General Detail Employee Injury/Illness Narrative Corrective Accident Other Next >

Selected Item: Case - WORKER.WILLIAM (WKRBADGE) 11-MAR-2022

Worker WORKER

Click blue **CTS241: Case Investigation** text.

CTSINJL / CTS241: Injury and Illness /  
CTS241: Injury and Illness

Reports

**CTS241: Case Investigation**

CTS241: OSHA 301 Incident

CTS241: Case Entry Detail

CTS241: DOE 5484.3 X-Form

Report will be displayed in a new browser tab. Close tab when finished viewing.

COMPANY  
SITE  
Field Incident Report

Employee:	WORKER WILLIAM	Badge #:	WKRBADGE
Job Title:	OPERATOR	Experience:	
Occurrence Date:	11-MAR-2022	Report Date:	
Organization:	OPL1	OPL1	
Supervisor:	SUPERVISOR.SILLY (SUPBADGE)		

Human Performance Improvement (HPI) Error Precursor

Task Demands Individual Capabilities

Work Environment Human Nature

Task Based

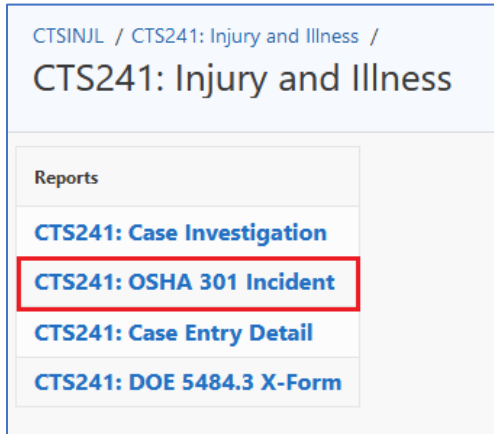
Accident Causes

Corrective Actions

Corrective Actions Supervisor: SUPERVISOR.SILLY (SUPBADGE) Phone:

# CTS241: OSHA 301 Incident

Click blue **CTS241: OSHA 301 Incident** text.



Report will be displayed in a new browser tab. Close tab when finished viewing.

COMPANY SITE OSHA 301 Incident Report	
<i>Employee Detail</i>	
<p>This Injury and Illness Incident Report is one of the first forms you must fill out when a recordable work-related injury or illness has occurred. Together with the Log of Work-Related Injuries and Illnesses and the accompanying Summary, these forms help the employer and OSHA develop a picture of the extent and severity of work-related incidents.</p> <p>Within 7 calendar days after you receive information that a recordable work-related injury or illness has occurred, you must fill out this form or an equivalent. Some state workers compensation, insurance, or other reports may be acceptable substitutes. To be considered an equivalent form, any substitute must contain all the information asked for on this form.</p> <p>According to Public Law 91-596 and 29 CFR 1904, OSHA's recordkeeping rule, you must keep this form on file for 5 years following the year to which it pertains.</p> <p>If you need additional copies of this form, you may photocopy and use as many as you need.</p>	
Completed by	
Title	SAFETY PROFESSIONAL
Phone	
Date	
<b>Information about the employee</b>	
1) Full Name	WORKER, WILLIAM
2) Street	
3) Date of birth	01-JAN-1992
4) Date hired	
5) Sex	Male
<b>Information about the physician or other health care professional</b>	
6) Name of physician or other health care professional	
7) If treatment was given away from the worksite, where was it given?	Facility
	Street
8) Was employee treated in emergency room?	No
9) Was employee hospitalized overnight as an in-patient?	No



# CTS241: Case Entry Detail

Click blue **CTS241: Case Entry Detail** text.

CTSINJL / CTS241: Injury and Illness /

## CTS241: Injury and Illness

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**Reports**

- [CTS241: Case Investigation](#)
- [CTS241: OSHA 301 Incident](#)
- [CTS241: Case Entry Detail](#)
- [CTS241: DOE 5484.3 X-Form](#)

Report will be displayed in a new browser tab. Close tab when finished viewing.

Injury and Illness Report			
<i>Injury and Illness</i>			
Establishment:	0000002	Establishment name for 4006503	
Site:	SITE	SITE	
Company:	COMPANY	COMPANY	
Organization ID:	OPL1	OPL1	
Case #:	-		
Occur Date:	11-MAR-2022		
Incident #:	INCIDENT TITLE 1 INCIDENT TITLE 1 INCIDENT TITLE 1 (0000002)		
<i>General Detail</i>			
Location:	AREA 1 BUILDING 1	SAMPLE	
Investigation Type:	Investigation C		
Accident Type:	Injury/Illness		
<i>Injury/Illness Detail</i>			
Injury Code:	10 Injury Code		
Has employee been permanently transferred to a different job because of the accident?	No		
Has employee been terminated because of the accident?	No		
Did employee die?	No		
<i>Narrative Detail</i>			
Treated in emergency room?	No		
Hospitalized overnight?	No		
<i>Corrective Action</i>			
Supervisor:	SUPBADGE	SUPERVISOR, SILLY	Phone:
<i>Accident Analysis</i>			
Type of Accident:	ANIMALS, INSECTS, ETC.		
Nature of injury or illness:	ABR., LAC., PUNCT., AVUL.		
Part of body:	ANKLE		
Agency:	ANIMALS, INSECTS, ETC.		
Unsafe Condition:	DEFECTIVE AGENCIES		
Unsafe Act:	ADHERING TO RESTRICTIONS		
Program Area:	BERYLLIUM AREA CHECKLIST		

# CTS241: DOE 5484.3 X-Form

Click blue **CTS241: DOE 5484.3 X-Form** text.

CTSINJL / CTS241: Injury and Illness /  
**CTS241: Injury and Illness**

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**Reports**

- [CTS241: Case Investigation](#)
- [CTS241: OSHA 301 Incident](#)
- [CTS241: Case Entry Detail](#)
- [CTS241: DOE 5484.3 X-Form](#)

Report will be displayed in a new browser tab. Close tab when finished viewing.

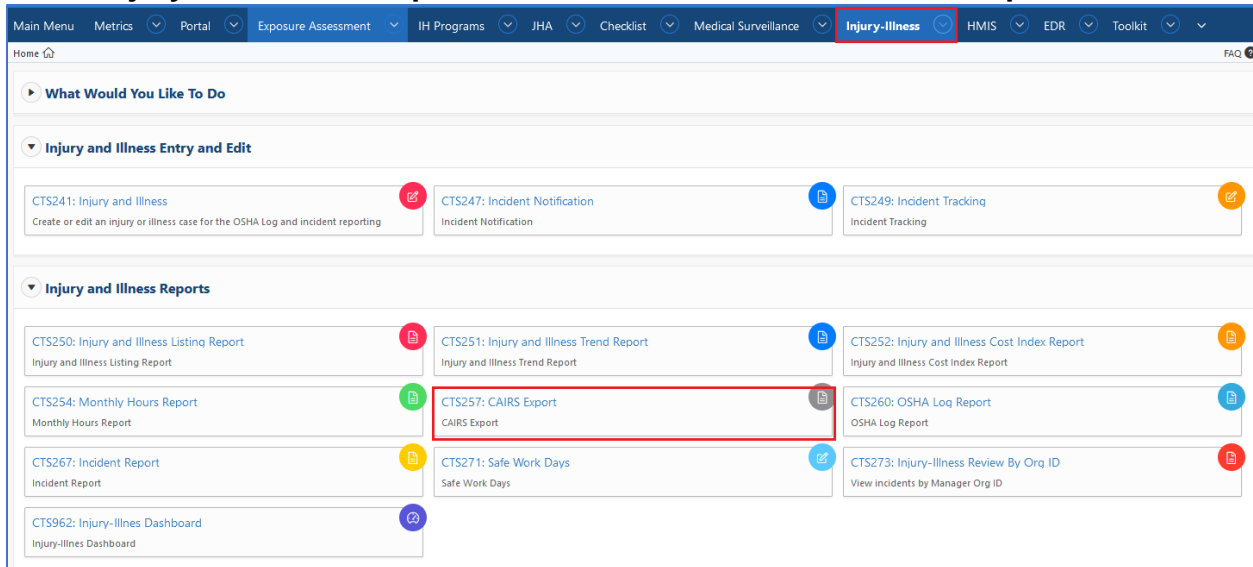
Information about the Organization			
Organization Name:	<b>Establishment name for 4006503</b>	Organization Code:	<b>4006503</b>
Department/Division/I.D. Code:	<b>OPL1</b>		
Information about the Employee			
1) Full Name:	<b>WILLIAM WORKER</b>	2) ID Number:	<b>WKRBADGE</b>
3) Street:			
4) Date of Birth:	<b>01-JAN-1992</b>	5) Date of Hire:	
6) Sex:	<b>M</b>	7) Job Title:	<b>OPERATOR</b>
		8) Occupation Code:	<b>WORKER</b>
9) Experience On Job/Equipment:			
10) Length of Employment:			
Information about the Physician or Other Health Care Professional			
11) Name of physician or other health care provider:			
12) If treatment was given away from worksite, where was it given?			
13) Was employee treated in an emergency room?	<b>No</b>		
14) Was employee hospitalized overnight as an in-patient?	<b>No</b>		
Information about the Case			
15) Case No :	<b>-</b>	Revision:	<b>No</b>
		Multi-Org Case:	<b>No</b>
		Multiple Case Number:	
16) Accident Type:	<b>Injury/Illness</b>		
17) Investigation Type:	<b>Investigation C</b>	18) Accident Place:	
19) On Employers Premise:		20) Specific Location:	
21) Date of Injury or Illness:	<b>11-MAR-2022</b>	22) Time Employee Began Work:	
23) Is time of event known:		24) Time of Event:	
25) OSHA Injury/Illness Classification:	<b>10 Injury Code</b>		
26) Number of days away from work:		27) Number of days of restricted work activity or job transfer:	
28) Permanent transfer to a different job because of disability due to accident:	<b>No</b>		
29) Terminated because of disability due to accident:	<b>No</b>	30) Is the case closed?	<b>No</b>
34a) Primary object or substance (Source) code.		34b) Other objects or sources	
34c) Did equipment design or defect contribute to accident cause or severity?			
34d) Personal protective equipment code (PPE being used by employee at the time of event):			
35) Did employee die?	<b>No</b>	If "Yes", enter date:	

# Chapter 6 – CAIRS Reporting (CTS257)

**CAIRS** (Computerized Accident/Incident Reporting System) is a database used to collect and analyze DOE and DOE contractor reports of injuries, illnesses, and other accidents that occur during DOE operations.

CTS provides for export of pertinent data required for CAIRS.

Under **Injury and Illness Reports** submenu, click **CTS257: CAIRS Export** button.



Click blue **CTS257: CAIRS Export** text.



A table of injury illness cases is displayed on-screen. Use pulldown menu to toggle between active cases (*Show Active*) and all cases (*Show All*).

Click **Actions** button, then **Download** to export full report in CSV or HTML format.



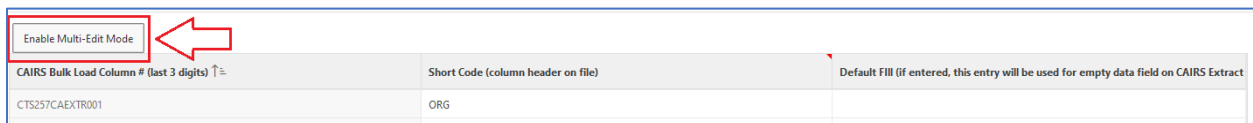
Click blue **CTS257: CAIRS Export Title Configuration** text.



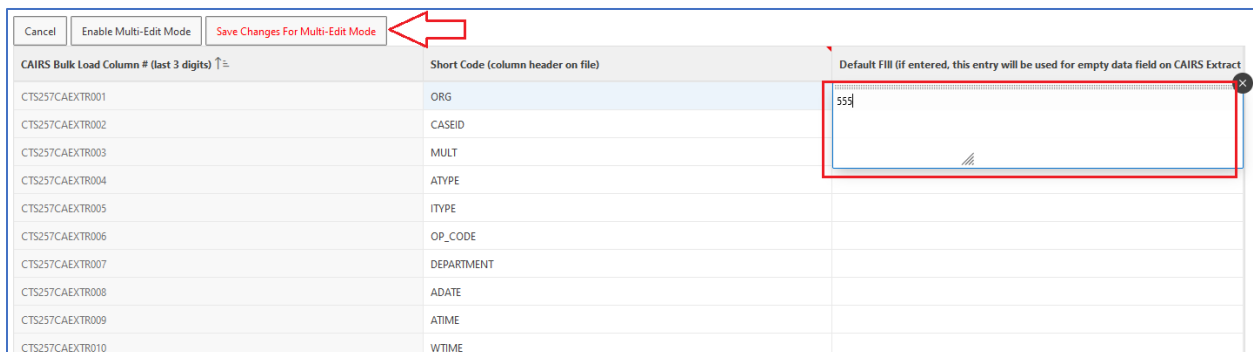
For reference, this table contains **CAIRS Bulk Load Column #s** and their respective **Short Codes**. Both *Short Code* and *Default Fill* columns are editable.

CAIRS Bulk Load Column # (last 3 digits) ↑	Short Code (column header on file)	Default Fill (if entered, this entry will be used for empty data field on CAIRS Extract)
CTS257CAEXTR001	ORG	
CTS257CAEXTR002	CASEID	
CTS257CAEXTR003	MULT	
CTS257CAEXTR004	ATYPE	
CTS257CAEXTR005	ITYPE	
CTS257CAEXTR006	OP_CODE	
CTS257CAEXTR007	DEPARTMENT	
CTS257CAEXTR008	ADATE	

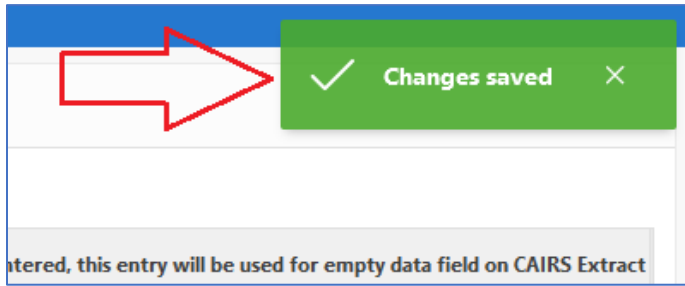
Click **Enable Multi Edit Mode** button.



Edit multiple fields. Click **Save Changes For Multi-Edit Mode** button.



Pop-up message indicates changes were saved.



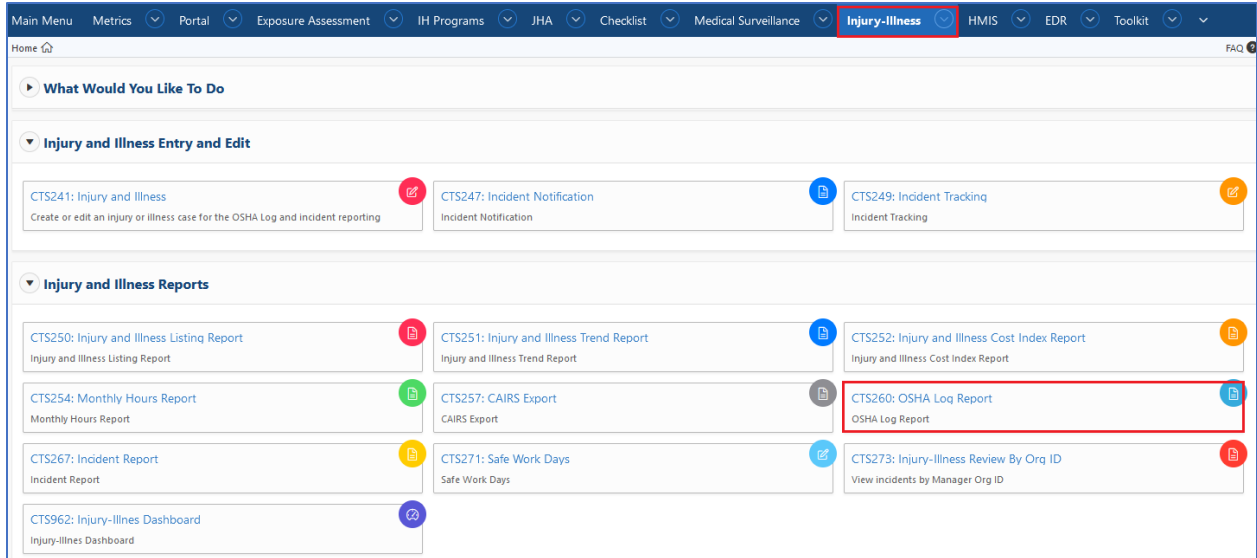
Close browser tab when finished viewing.

Click CTSINJL / breadcrumb to return to Injury Illness Menu.



# Chapter 7 – OSHA Log Reporting (CTS260)

Under **Injury and Illness Reports** submenu, click **CTS260: OSHA Log Report** button.



Click blue **CTS260: OSHA Log Report** button.



Click **Add/Edit Base Filters** button to select reporting dates.

**Add/Edit Base Filters**    AOP Report

**Filter Group is required**

Base Filters: Start=01-OCT-2021 End=30-JUN-2022

RUN DATE: 06/24/2022	Company Name: COMPANY	Address:	FOR CALENDAR YEAR 2021
BUREAU OF LABOR STATISTICS	Site Name: SITE		
LOG AND SUMMARY OF OCCUPATIONAL INJURIES AND ILLNESS			
stats 0 0 0 0 0 0 0 0 0 0 0 0			
NOTE: 1 - Injury 2 - Skin Disorder 3 - Respiratory Condition 4 - Poisoning 5 - Hearing Loss 6 - All Other Illnesses			

Use calendar buttons to select *Start Date* and *End Date*. Use pulldown menu to select OSHA LOG as *Filter Group*. Click **Save and Continue** button.

Cancel    **Save And Continue**

Start Date: 01/01/2021 [calendar icon] (mm/dd/yyyy)

End Date: 12/31/2021 [calendar icon]

Note: If a Filter Group is used, all other filters will be ignored except the start and end dates.

Filter Group: [pulldown menu]

- DART Count for each Site
- DART Rate for each Company
- DART Rate for each Establishment
- DART Rate for each Org?
- LTD Count for each Establishment
- OSHA LOG**
- TIC Count for each Establishment
- TIC Count for each Org?
- TIC Count for each Site
- TIC Rate for each Company
- TIC Rate for each Establishment
- TIC Rate for each Org?
- production work group 1,2,3

Set Screen Reader Mode On



RUN DATE 06/24/2022		Company Name: COMPANY		Address:		FOR CALENDAR YEAR 2021									
BUREAU OF LABOR STATISTICS				Site Name: SITE											
LOG AND SUMMARY OF OCCUPATIONAL INJURIES AND ILLNESS															
Case or File Number	Employee Name	Job Title	Date of Inj or Ill	Where Event Occurred	Desc Inj or Ill	Days Away From Work	Remained at Work		Days Away Work	Days On Job Transfer or Restriction	See the NOTE below				
							Job referred or restricn	Other Recordable Cases			1	2	3	4	5
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)
-	SANDY SANDY IHSAFETYPRO	INDUSTRIAL HYGIENIST	02-JAN-2021												X
-	MANDY MANDY MEDPROVIDER	PHYSICIAN	10-JAN-2021												X
-	WILLIAM WORKER	OPERATOR	26-JAN-2021												X
20001	MANDY MANDY MEDPROVIDER	PHYSICIAN	29-JAN-2021						X						X
20002	WILLIAM WORKER	OPERATOR	31-JAN-2021				X			69					X
20001	JOHN JOHN IHTECH	IH TECHNICIAN III	31-JAN-2021				X			16		27			X
-	MILLARD MILLARD MANAGER	MANAGEMENT	03-FEB-2021												X
-	JOHN JOHN IHTECH	IH TECHNICIAN III	03-FEB-2021												X
-	SANDY SANDY IHSAFETYPRO	INDUSTRIAL HYGIENIST	11-FEB-2021												X
20003	SANDY SANDY IHSAFETYPRO	INDUSTRIAL HYGIENIST	14-FEB-2021						X						X
-	WILLIAM WORKER	OPERATOR	21-FEB-2021												X
20004	SILLY SILLY SUPERVISOR	OPERATIONS MANAGER	21-FEB-2021				X			21		31			X
20002	MANDY MANDY MEDPROVIDER	PHYSICIAN	24-FEB-2021						X						X
-	JOHN JOHN IHTECH	IH TECHNICIAN III	25-FEB-2021												X
-	SILLY SILLY SUPERVISOR	OPERATIONS MANAGER	04-MAR-2021												X
-	MILLARD MILLARD MANAGER	MANAGEMENT	04-MAR-2021												X
-	WILLIAM WORKER	OPERATOR	10-MAR-2021												X
-	WILLIAM WORKER	OPERATOR	12-MAR-2021												X
-	SANDY SANDY IHSAFETYPRO	INDUSTRIAL HYGIENIST	14-MAR-2021												X
-	WILLIAM WORKER	OPERATOR	21-MAR-2021												X
20005	SANDY SANDY IHSAFETYPRO	INDUSTRIAL HYGIENIST	24-MAR-2021						X						X
20006	MANDY MANDY MEDPROVIDER	PHYSICIAN	24-MAR-2021						X						X
-	MILLARD MILLARD MANAGER	MANAGEMENT	24-MAR-2021												X
6002	JOHN JOHN IHTECH	IH TECHNICIAN III	27-MAR-2021				X					6			X
	MILLARD MILLARD														

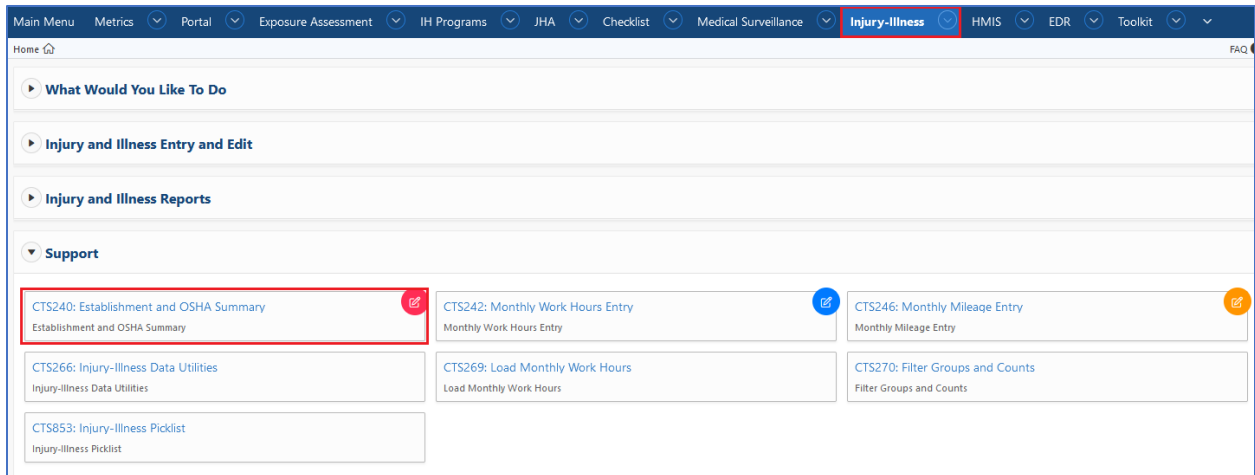
SAMPLE

Close browser tab when finished viewing.  
Click **CTSinJL** / breadcrumb to return to Injury Illness menu.

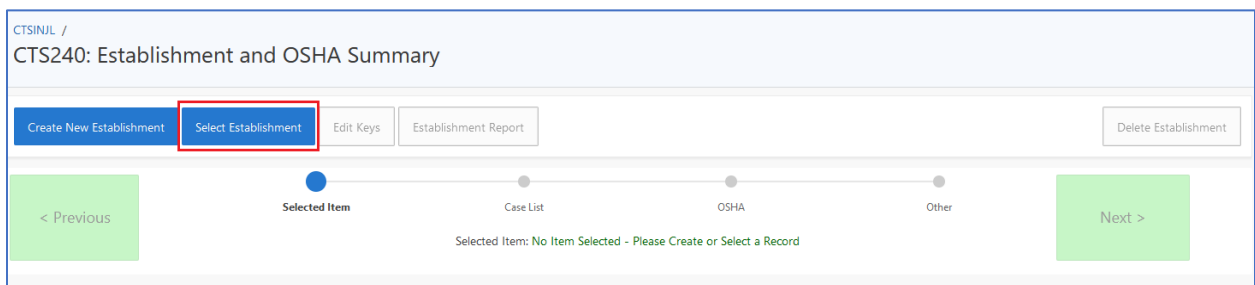
[CTSinJL /](#)  
**CTS260: OSHA Log Report**

# Chapter 8 – OSHA 300a Reporting (CTS240)

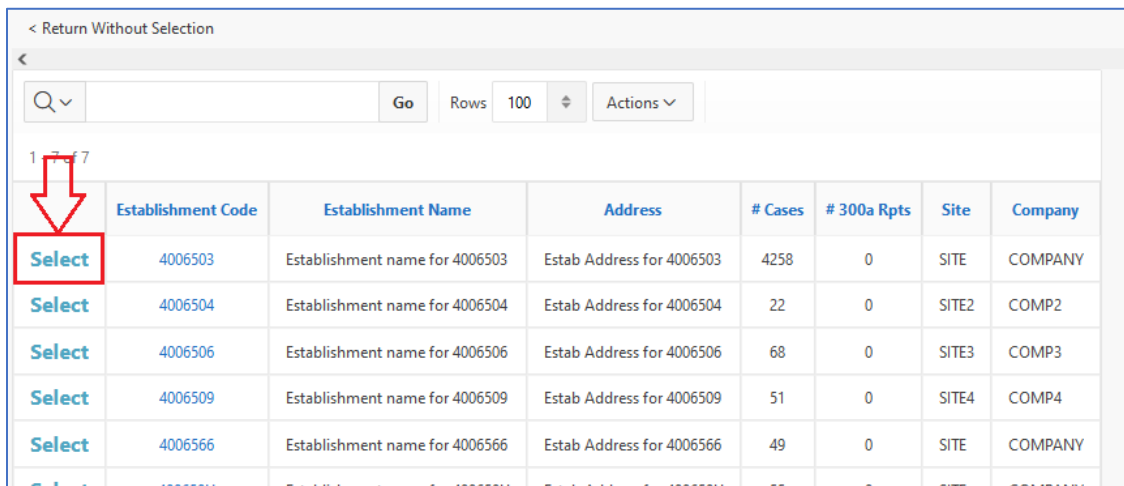
Under **Support** submenu, click **CTS240: Establishment and OSHA Summary** button.



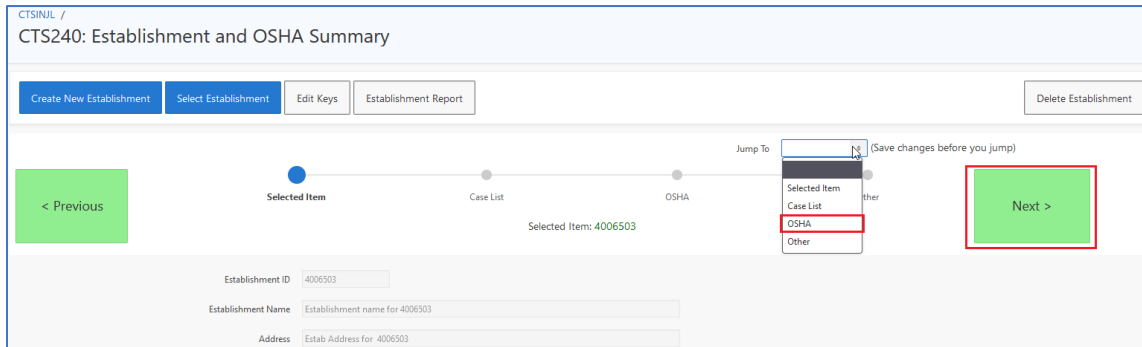
Click **Select Establishment** button.



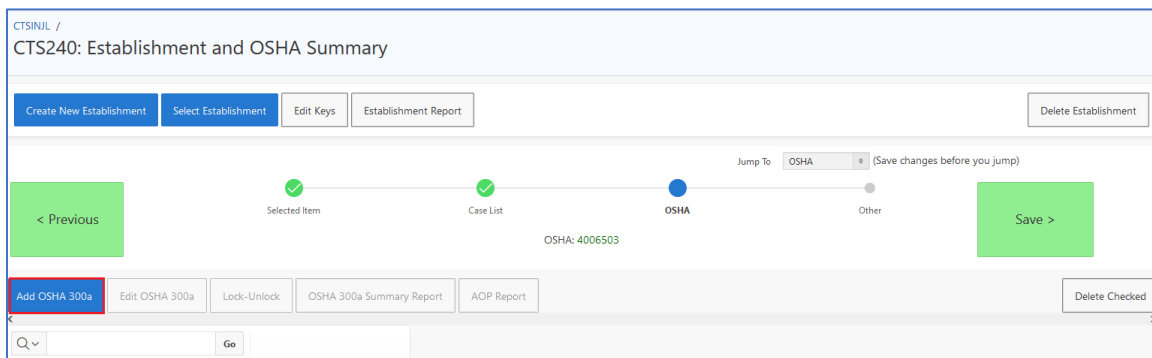
Click blue **Select** text to choose an establishment.



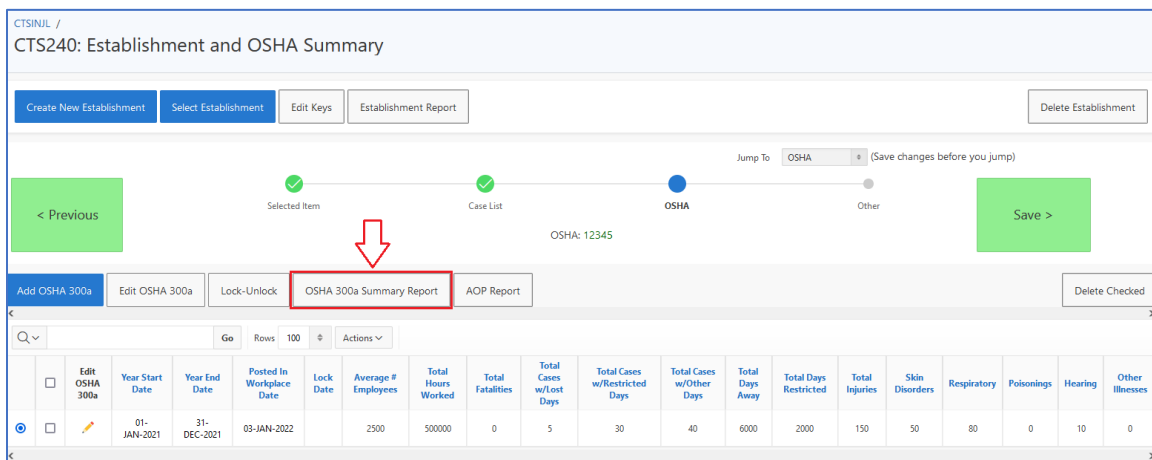
Use pulldown menu to select *Jump To OSHA* screen.



Click **Add OSHA 300a** button to add OSHA 300a details (see Chapter 2).



Select an OSHA 300a record. Click **OSHA 300a Summary Report** button.



Report is displayed in a new browser tab.

**OSHA Form 300A (Rev 01/2004)**  
*Summary of Work-Related Injuries and Illnesses*

**Year 2021**  
**Department of Labor**  
**Occupational Safety and Health Administration**

---

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during this 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 have added all entries on 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 and have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

If you need additional copies of this form, you may photocopy and use as many as you need.

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	5	30	40
(G)	(H)	(I)	(J)

Number of Days	
Total number of days away from work	Total number of days of job transfer or restriction
6000	2000
(K)	(L)

**Establishment Information**

Your Establishment Name: ESTABLISHMENT EXAMPLE

Street: 23 STREET ST

City: CROSVILLE State: TN ZIP: 38555

Industry description (e.g., manufacture of motor truck trailer)

description

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

SIC

North American Industrial Classification (NAICS), if known (e.g. 336212)

NAICS

**Employment Information** If you do not have these figures, see Worksheet on back of this page to estimate)

Annual average number of employees: 2500

Total hours worked by all employees last year: 500000

**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.

Close browser tab when finished viewing.

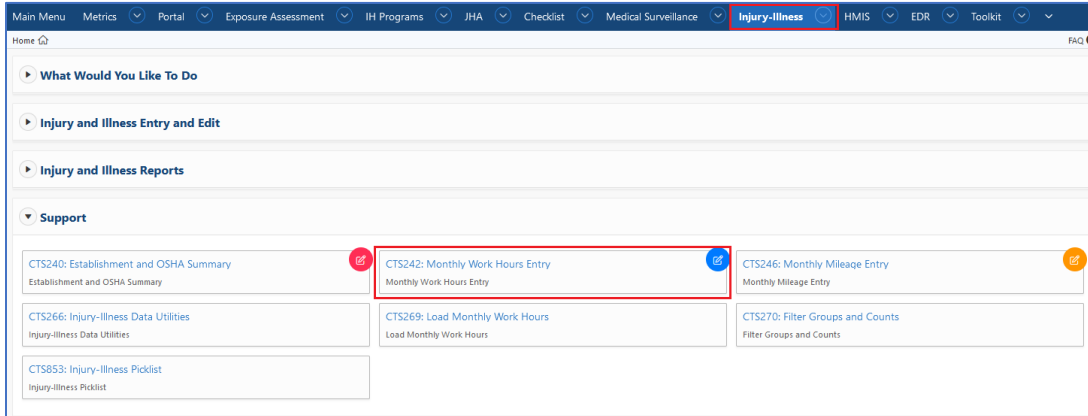
Click **CTSINJL** / breadcrumb to return to Injury Illness menu.

[CTSINJL /](#)

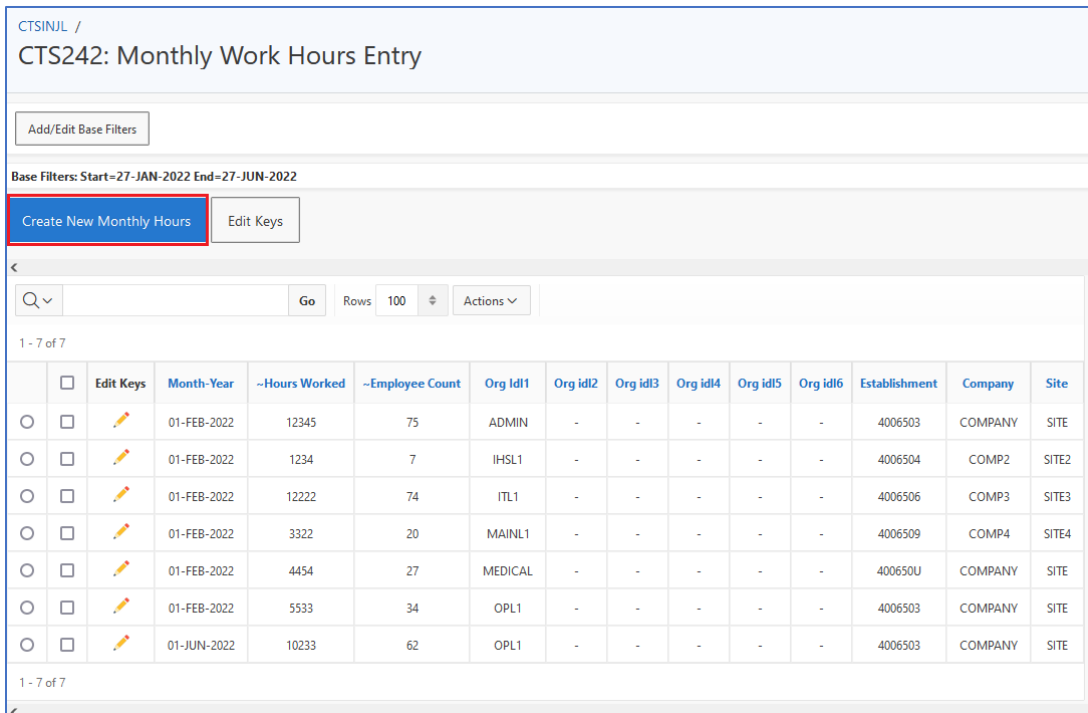
CTS240: Establishment and OSHA Summary

# Chapter 9 – Entering Monthly Work Hours (CTS242)

Under **Support** submenu, click **CTS242: Monthly Work Hours Entry** button.



Click **Create New Monthly Hours** button.



Click **Select Organization** button.

CTSINJL / CTS242: Monthly Work Hours Entry /  
CTS242 Monthly Work Hours Detail

Cancel Save and Continue

Organization  Select Organization

Month

Year 2022

~Hours Worked

~Employee Count

Establishment  Select Establishment

Click blue **Select** text to choose an organization.

	Org Description	Org IDL1	Org IDL2	Org IDL3	Org IDL4	Org IDL5	Org IDL6
Select	ADMIN	ADMIN	-	-	-	-	-
Select	IHSL1	IHSL1	-	-	-	-	-
Select	ITL1	ITL1	-	-	-	-	-
Select	MAINL1	MAINL1	-	-	-	-	-
Select	MEDICAL	MEDICAL	-	-	-	-	-
Select	OPL1	OPL1	-	-	-	-	-

Use pulldown menus to select *Month* and *Establishment*. Enter data into *Hours Worked* and *Employee Count* text fields. Click **Save and Continue** button.

CTSINJL / CTS242: Monthly Work Hours Entry /  
CTS242 Monthly Work Hours Detail

Cancel Save and Continue

Organization MAINL1 MAINL1 Select Organization

Month  ←

Year 2022

~Hours Worked

~Employee Count

Establishment  ← Select Establishment

FIELD	DESCRIPTION
Organization	Select an organization.
Month	Use pulldown menu to select month.
Hours Worked	Enter numeric value for total hours worked during tracking period.
Employee Count	Enter numeric value for total employees.
Establishment	Select an establishment.

Click **CTSINJL** / breadcrumb to return to Injury Illness menu.

CTSINJL /

CTS242: Monthly Work Hours Entry

[Add/Edit Base Filters](#)

Base Filters: Start=27-JAN-2022 End=27-JUN-2022

[Create New Monthly Hours](#) [Edit Keys](#)

Search:  Go Rows: 100 Actions: ▼

1 - 8 of 8

<input type="checkbox"/>	Edit Keys	Month-Year	--Hours Worked	--Employee Count	Org Id1	Org Id2	Org Id3	Org Id4	Org Id5	Org Id6	Establishment	Company	Site
<input type="radio"/>		01-FEB-2022	12345	75	ADMIN	-	-	-	-	-	4006503	COMPANY	SITE
<input type="radio"/>		01-FEB-2022	1234	7	IHSL1	-	-	-	-	-	4006504	COMP2	SITE2
<input type="radio"/>		01-FEB-2022	12222	74	ITL1	-	-	-	-	-	4006506	COMP3	SITE3
<input type="radio"/>		01-FEB-2022	3322	20	MAINL1	-	-	-	-	-	4006509	COMP4	SITE4
<input type="radio"/>		01-FEB-2022	4454	27	MEDICAL	-	-	-	-	-	400650U	COMPANY	SITE
<input type="radio"/>		01-FEB-2022	5533	34	OPL1	-	-	-	-	-	4006503	COMPANY	SITE
<input checked="" type="radio"/>		01-JUN-2022	4330	20	MAINL1	-	-	-	-	-	12345	COMP2	SITE2
<input type="radio"/>		01-JUN-2022	10233	62	OPL1	-	-	-	-	-	4006503	COMPANY	SITE

1 - 8 of 8

## Chapter 10 – Rate and Trend Reports

Trends are counts by category over a period of time. The system features two tools that are specifically helpful with tracking and recording trends.

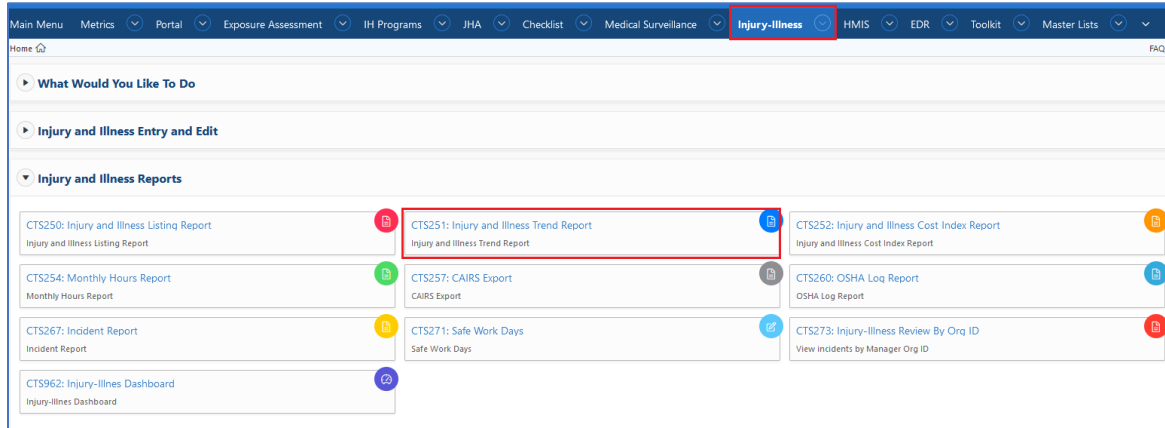
The counts, rates, and their calculations are listed in the table below.

FUNCTION	CALCULATION
TRC Count	sum of case_code in ('03','04','4A','4B','06','07','08') for each grouping (Establishment, Company, Site, Org1)
DART Count	sum of case_code in ('4A','4B','06','07','08') for each grouping (Establishment, Company, Site, Org1)
LWD Count	sum of case_code in ('4B','07') for each grouping (Establishment, Company, Site, Org1)
LWDR Count	sum of case_code in ('03','04','4A','06','08') for each grouping (Establishment, Company, Site, Org1)
TRC Rate	200000. * TRC Count / sum(emp_hours) for each grouping
DART Rate	200000. * DART Count/ sum(emp_hours) for each grouping
LWD Rate	200000. * LWD Count/s um(emp_hours) for each grouping
LWDR Rate	200000. * LWDR Count/ sum(emp_hours) for each grouping
*note – “emp_hours” represents employee hours for each grouping	

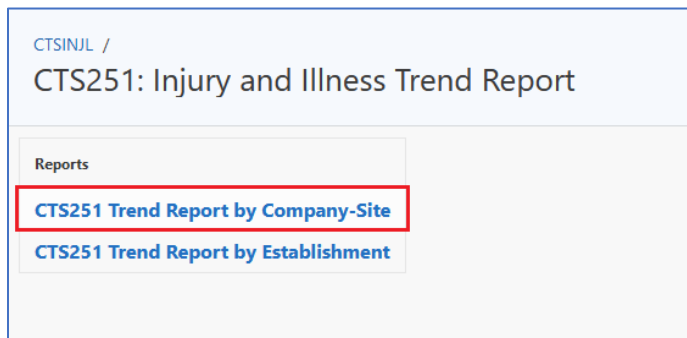


# CTS251: Trend Report

Under **Injury and Illness Reports** submenu, click **CTS251: Injury and Illness Trend Report** button.



Click blue **CTS251 Trend Report by Company-Site** text.



Incident data for each company site is displayed in a new browser tab.  
To filter data, click **Add/Edit Base Filters** button.

Use calendar buttons to select *Start Date* and *End Date*.

To filter by specific *Company* and *Site*, use pulldown menus to make selections.

CTS251 Trend Report by Company-Site

Add/Edit Base Filters

Base Filters: Start=01-OCT-2021 End=30-JUN-2022 Case Code=ALL CASES

Company: COMPANY Site: SITE

Type of accident	
FALL DIFFERENT LEVEL	4
ANIMALS, INSECTS, ETC.	102

Nature of Illness/Injury	
CONJUNCT./IRRITATED EYE	4
ABR., LAC., PUNCT., AVUL.	102

Agency	
MACHINE	4
ANIMALS, INSECTS, ETC.	102

UnSafe Act	
ADHERING TO RESTRICTIONS	102
IMPROPER LIFTING	4

Job Task	
DRUM HANDLING	4
CUTTING TORCH	102

Part of Body	
ELBOW	4
ANKLE	102

Activity	
DRIVING	4

Cancel Save And Continue

Start Date 10/01/2021 (mm/dd/yyyy)

End Date 06/30/2022

Company COMP2 Select Company

Site SITE Select Site

Note: If a Filter Group is used, all other filters will be ignored except the start and end dates

Filter Group

**Note:** Frequently used filter groups can be configured in **CTS270** and made available in the *Filter Group* pulldown menu.

Select *Start Date*, *End Date*, and *Filter Group* options.

Leave *Company* and *Site* blank if utilizing *Filter Group*.

Click **Save and Continue** button.

The screenshot shows a software interface with several input fields and a dropdown menu. At the top left, there are two buttons: "Cancel" and "Save And Continue". The "Save And Continue" button is highlighted with a red border. Below the buttons, there are two date pickers: "Start Date" (10/01/2021) and "End Date" (06/30/2022), both highlighted with red borders. Below the dates, there are two dropdown menus: "Company" and "Site", both highlighted with a yellow border. To the right of the "Company" dropdown is a "Select Company" button, and to the right of the "Site" dropdown is a "Select Site" button. Below these fields, there is a note: "Note: If a Filter Group is used, all other filters will be ignored except the start and end dates". Below the note, there is a "Filter Group" dropdown menu. The dropdown menu is open, showing a list of options. The first option, "DART Count for each Site", is highlighted with a dark background. A red arrow points to this option. Below the dropdown menu, there is a link: "Set Screen Reader Mode On".

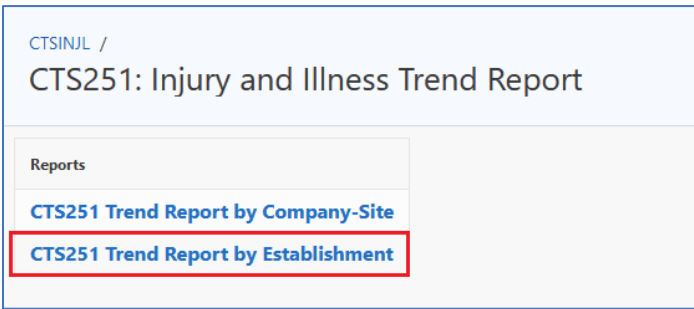
Data is displayed according to Filter Group selection.

The screenshot shows a data table with the following structure:

Company: COMP3 Site: SITE3	
<b>Type of accident</b>	
OVEREXERTION	2
<b>Nature of Illness/Injury</b>	
CONTUSION	2
<b>Agency</b>	
NAILS,WIRE,SCREWS,ETC.	2
<b>UnSafe Act</b>	
OVERLOAD BODY	2
<b>Job Task</b>	
MACHINE OPERATOR	2
<b>Part of Body</b>	

Close browser tab when finished viewing.

Click blue **CTS251 Trend Report by Establishment** text.



Click **Add/Edit Base Filters** button to filter data.

Establishment	Accident Analysis	Type	# Cases
Establishment name for 4006503	Activity	BENDING/STOOPING	102
Establishment name for 4006503	Agency	ANIMALS,INSECTS,ETC.	102
Establishment name for 4006503	Major cause	INCIDENTAL MOTION	102
Establishment name for 4006503	Nature of Illness/Injury	ABR,LAC,PUNCT,AVUL.	102
Establishment name for 4006503	Occupational Category	IH-SAFETY	38
Establishment name for 4006503	Occupational Category	MANAGER	18
Establishment name for 4006503	Occupational Category	PHYSICIAN	23
Establishment name for 4006503	Occupational Category	SUPERVISOR	6
Establishment name for 4006503	Occupational Category	WORKER	17
Establishment name for 4006503	Part of body	ANKLE	102
Establishment name for 4006503	Task Category	CUTTING TORCH	102
Establishment name for 4006503	Type of Accident	ANIMALS, INSECTS, ETC.	102
Establishment name for 4006503	Unsafe Act	ADHERING TO RESTRICTIONS	102
Establishment name for 4006503	Unsafe Conditions	DEFECTIVE AGENCIES	102
Establishment name for 4006503	Unsafe Personal Factor	AT RISK BEHAVIOR	102
Establishment name for 4006504	Activity	DRIVING	1

Use calendar buttons to select *Start Date* and *End Date*.

To filter by specific *Company* and *Site*, use pulldown menus to make selections.

Click **Save and Continue** button.

Cancel **Save And Continue**

Start Date 01/01/2021 (mm/dd/yyyy)

End Date 12/31/2022

Company COMP2

Site SITE

Select Company

Select Site

**Note: If a Filter Group is used, all other filters will be ignored except the start and end dates**

Filter Group

Filtered results are displayed on-screen.

CTS251 Trend Report by Establishment

Add/Edit Base Filters

Base Filters: Start=01-JAN-2021 End=31-DEC-2022 Company=COMP2 Site=SITE2 Case Code=ALL CASES

Q [ ] Go Rows 100 [ ] Actions [ ]

1 - 34

Establishment	Accident Analysis	Type	# Cases
Establishment name for 4006504	Activity	CLIMBING	2
Establishment name for 4006504	Activity	DRIVING	3
Establishment name for 4006504	Activity	FIRING WEAPON	3
Establishment name for 4006504	Agency	HAND TOOLS NOT POWERED	2
Establishment name for 4006504	Agency	MACHINE	3
Establishment name for 4006504	Agency	NAILS,WIRE,SCREWS,ETC.	3
Establishment name for 4006504	Major cause	MAJORCAUSE 1	3
Establishment name for 4006504	Major cause	MAJORCAUSE 2	3
Establishment name for 4006504	Major cause	UNSAFE CONDITION	2
Establishment name for 4006504	Nature of Illness/Injury	BURN,TEMP.	2
Establishment name for 4006504	Nature of Illness/Injury	CONJUCT./IRRITATED EYE	3

Close browser tab when finished viewing.

Click **CTSinJL** / breadcrumb to return to Injury Illness menu.

[CTSinJL /](#)

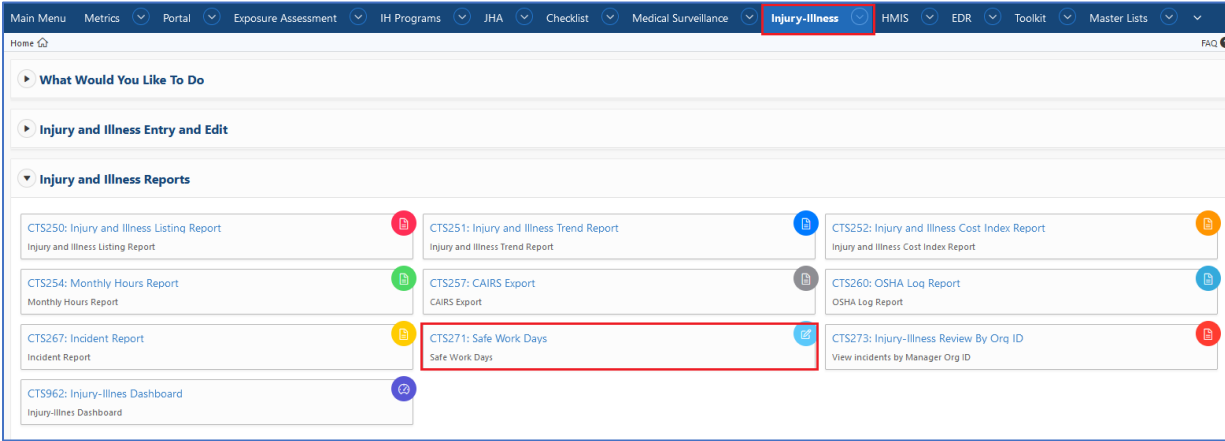
CTS251: Injury and Illness Trend Report

Reports

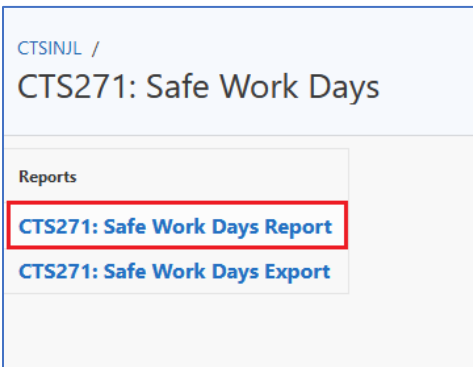
- [CTS251 Trend Report by Company-Site](#)
- [CTS251 Trend Report by Establishment](#)

# CTS271: Safe Work Days

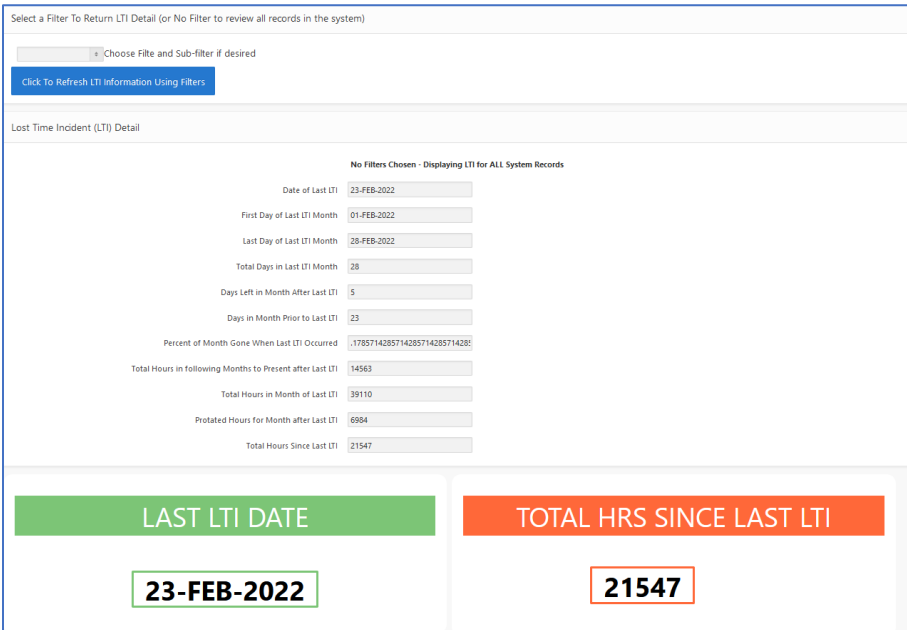
Under **Injury and Illness Reports** submenu, click **CTS271: Safe Work Days**.



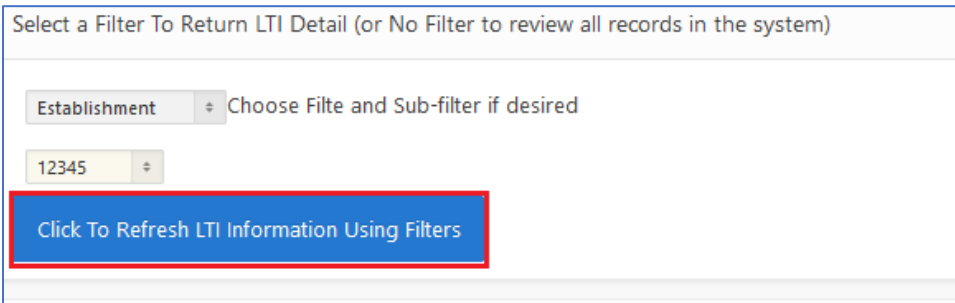
Click blue **CTS271: Safe Work Days Report** text.



Lost Time Incident data is displayed for all system records.



Use pulldown menu to choose *Filter* and *Sub-filter* options.  
Click the **Click To Refresh LTI Information Using Filters** button.  
Filtered data will be displayed.



Select a Filter To Return LTI Detail (or No Filter to review all records in the system)

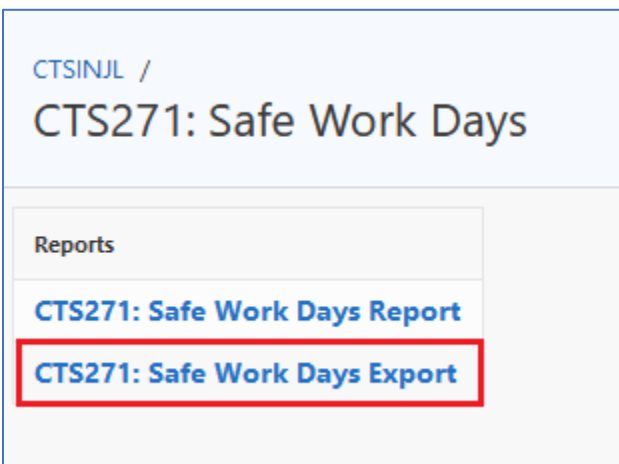
Establishment Choose Filte and Sub-filter if desired

12345

**Click To Refresh LTI Information Using Filters**

Close browser tab when finished viewing.

Click blue **CTS271: Safe Work Days Export** text.



CTSINJL /

## CTS271: Safe Work Days

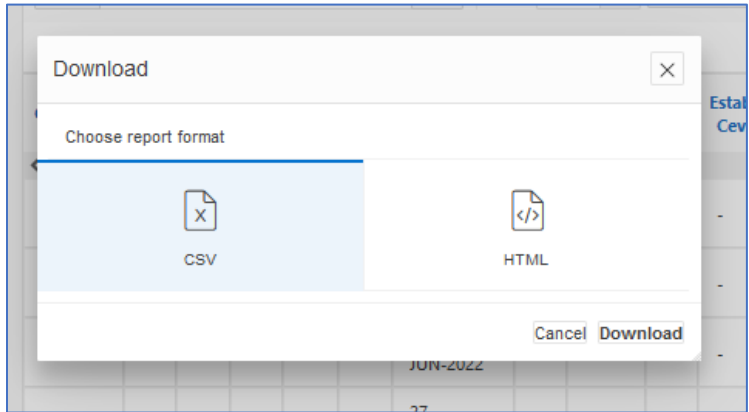
Reports

- CTS271: Safe Work Days Report
- CTS271: Safe Work Days Export**

Under the **Actions** dropdown, data can be filtered and/or exported.

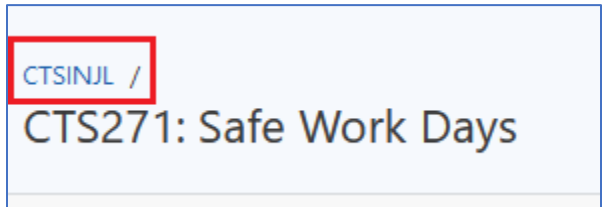
The screenshot shows a data table with columns for Company, Site, Au Cev, Cnc Cev, Clt Cev, Ctsionid, Ct At Cev, Doctat Cev, Filter, Rows Per Page, Job Cev, Keyer, Op Cev, Org Cev, Passvar Cev, Passvar Cev01, Passvar Cev02, Passvar Cev03, Passvar Cev04, Passvar Cev05, Passvar Code, Passvar Date, Passvar Date02, Passvar Date03, Passvar Date04, Passvar Date05, Passvar Flag01, Passvar Flag02, Passvar Flag03, Passvar Flag04, and Passvar Flag05. The 'Actions' dropdown menu is open, showing options: Filter, Rows Per Page, Format, Save Report, Reset, Help, and Download. The 'Download' option is highlighted with a red box.

Click **Download**. In popup box, choose CSV or HTML format.  
Click **DOWNLOAD** to begin download.



Click **Cancel** to close the popup box.  
Close the browser tab when finished viewing.

Click **CTSINJL** / breadcrumb to return to Injury Illness menu.



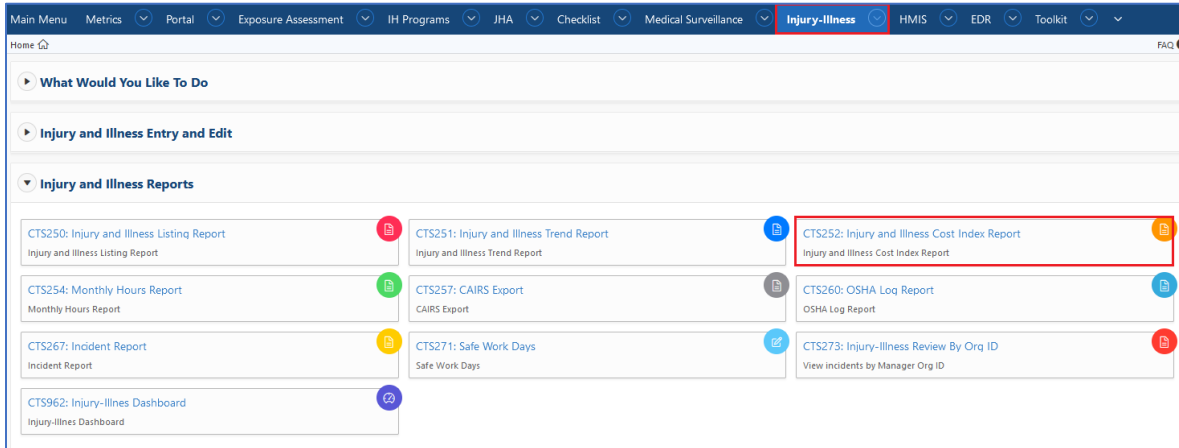
Rates are calculated values based on a standard formula for injury-illness. This formula compares a work group’s incidents to its total hours worked. Fortunately, CTS does all the complicated mathematics behind the scenes based on entered



data.

# CTS252: Injury and Illness Cost Index Report

Under **Injury-Illness** submenu, click **CTS252: Injury and Illness Cost Index Report** button.



Click blue **CTS252: Injury and Illness Cost Index Summary Report** text.



Report is displayed in new browser tab.

Use **Add/Edit Base Filters** button to filter data.

Use pulldown menu for more filter options.

Add/Edit Base Filters		COMPANY/SIT						
Base Filters: Start=01-OCT-2021 End=30-JUN-2022								
Company: COMP2 Site: SITE2		Employee Hours	TRC Cases	TRC Rate	DART Cases	DART Rate	Lost Workday Cases	Lost Workday Rate
Totals		10500	3	57.14	1	19.05	1	19.05
Company: COMP3 Site: SITE3		Employee Hours	TRC Cases	TRC Rate	DART Cases	DART Rate	Lost Workday Cases	Lost Workday Rate
Totals		61110	2	6.55	1	3.27	0	0
Company: COMP4 Site: SITE4		Employee Hours	TRC Cases	TRC Rate	DART Cases	DART Rate	Lost Workday Cases	Lost Workday Rate
Totals		16610	17	204.7	12	144.49	12	144.49

Close browser tab when finished viewing.

Click blue **CTS252: Injury and Illness Cost Index Detail Report** text.



Report is displayed in new browser tab.

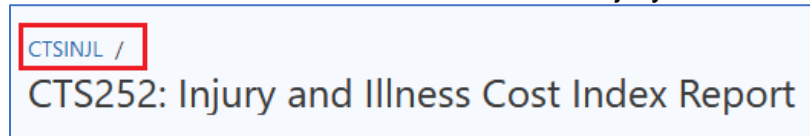
Use **Add/Edit Base Filters** button to filter data.

Use pulldown menu for more filter options.

Add/Edit Base Filters																			
COMPANY/SIT																			
Base Filters: Start=01-OCT-2021 End=30-JUN-2022																			
Company: COMP2										Site: SITE2									
	Employee Hours	First Aid No	Rate	TRC	Rate	LWDA	Rate	LWDR	Rate	DART	Rate	Tot Inj No	Rate	Total Days Away	Rate	Total Days Restricted	Rate	Total Days Rate	Death
012022	1234	0	0	1	162.07	0	0	0	0	0	0	1	162.07	0	0	0	0	0	0
022022	1234	0	0	2	324.15	1	162.07	0	0	1	162.07	2	324.15	0	0	0	0	0	0
2022	6798	0	0	3	88.26	1	29.42	0	0	1	29.42	3	88.26	0	0	0	0	0	0
Totals	10500	0	0	3	57.14	1	19.05	0	0	1	19.05	3	57.14	0	0	0	0	0	0
Company: COMP3										Site: SITE3									
	Employee Hours	First Aid No	Rate	TRC	Rate	LWDA	Rate	LWDR	Rate	DART	Rate	Tot Inj No	Rate	Total Days Away	Rate	Total Days Restricted	Rate	Total Days Rate	Death
102021	12222	0	0	1	16.36	0	0	1	16.36	1	16.36	1	16.36	0	0	0	0	0	0
112021	12222	0	0	1	16.36	0	0	0	0	0	0	1	16.36	0	0	0	0	0	0
2021	36666	0	0	2	10.91	0	0	1	5.45	1	5.45	2	10.91	0	0	0	0	0	0
Totals	61110	0	0	2	6.55	0	0	1	3.27	1	3.27	2	6.55	0	0	0	0	0	0
Company: COMP4										Site: SITE4									
	Employee Hours	First Aid No	Rate	TRC	Rate	LWDA	Rate	LWDR	Rate	DART	Rate	Tot Inj No	Rate	Total Days Away	Rate	Total Days Restricted	Rate	Total Days Rate	Death
012022	3322	1	60.2	0	0	0	0	0	0	0	0	1	60.2	0	0	0	0	0	0
2022	6644	1	30.1	0	0	0	0	0	0	0	0	1	30.1	0	0	0	0	0	0
Totals	3333	0	0	1	60.2	0	0	0	0	0	0	1	60.2	0	0	0	0	0	0

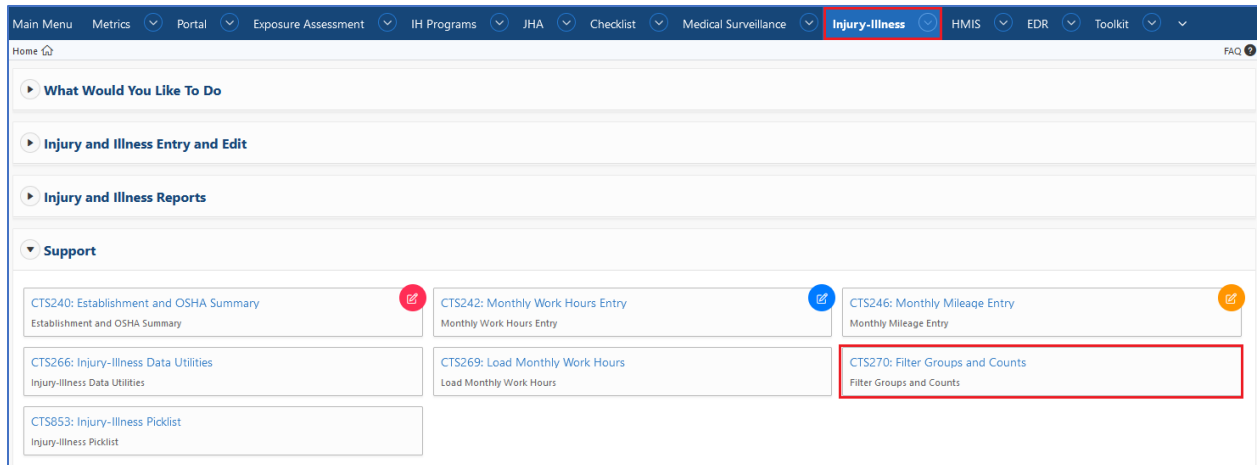
Close browser tab when finished viewing.

Click **CTSINJL /** breadcrumb to return to Injury Illness menu.

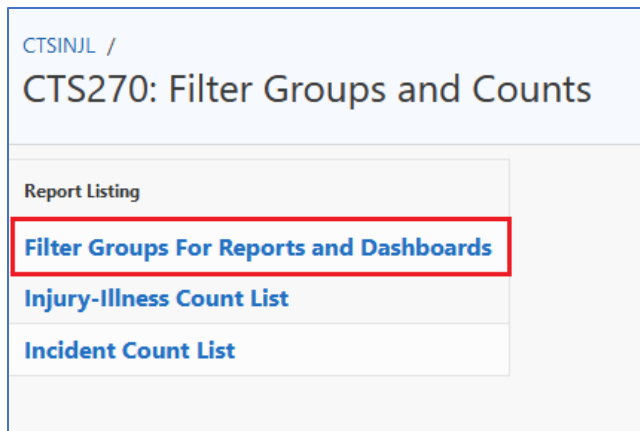


# Chapter 11 – Creating Filter Groups (CTS270)

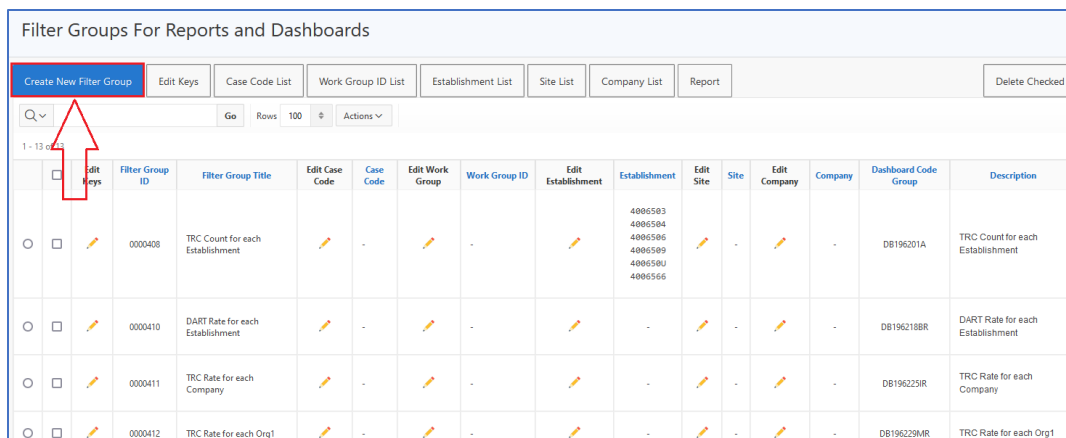
Under **Support** submenu, click **CTS270: Filter Groups and Counts**.



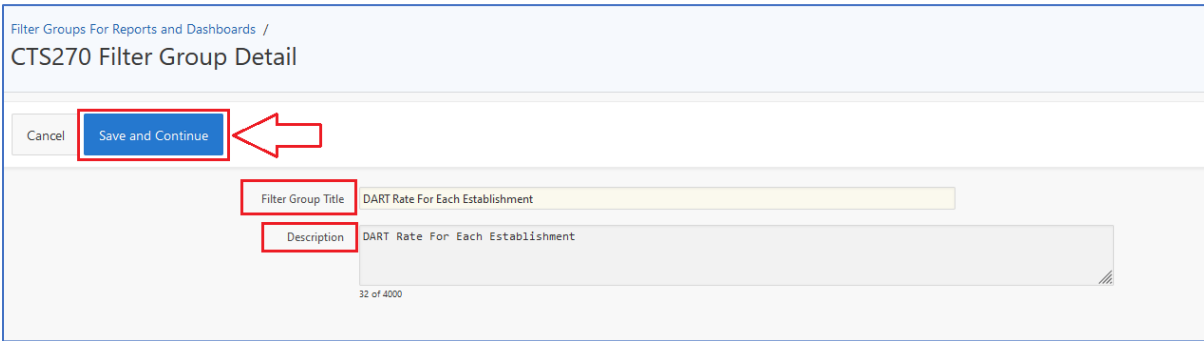
Click blue **Filter Groups For Reports and Dashboards** text.



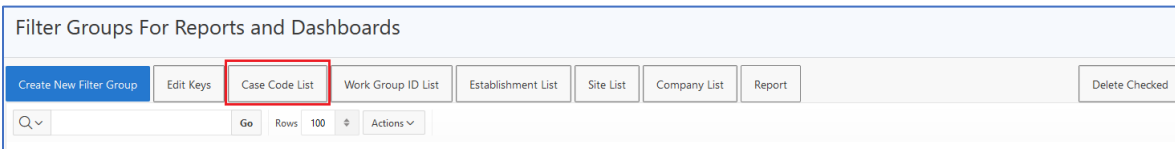
Click **Create New Filter Group** button.



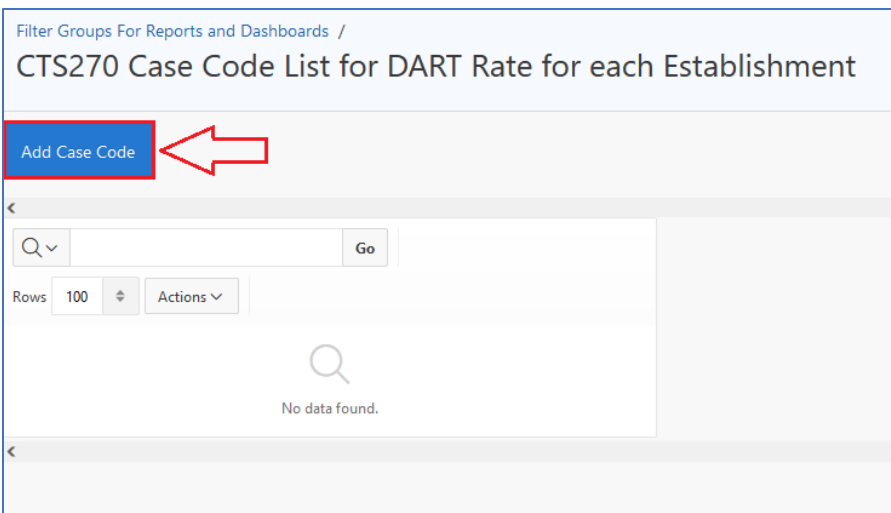
Enter text into *Filter Group Title* and *Description* text fields.  
Click **Save and Continue** button.



To add/edit a *Case Code List* for a filter group, click its radio button to select.  
Click **Case Code List** button.

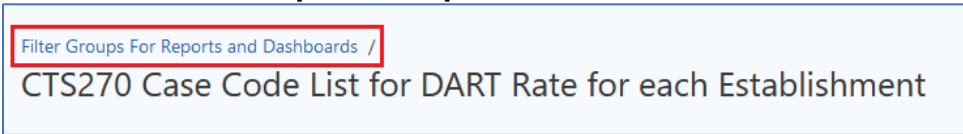


Click **Add Case Code** button.



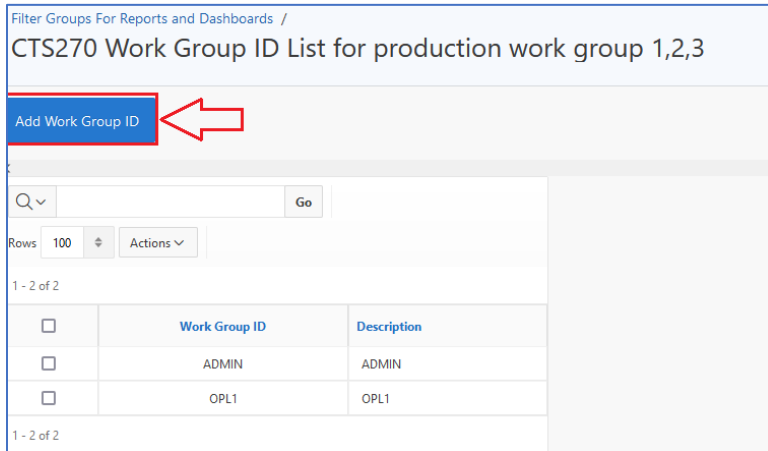
Click checkbox(es) to select *Case Codes*.  
Click the **Click Here To Save – After Checking** button.

Click the **Filter Groups For Reports and Dashboards /** breadcrumb.



Click **Work Group ID List** button.

Click **Add Work Group ID** button.

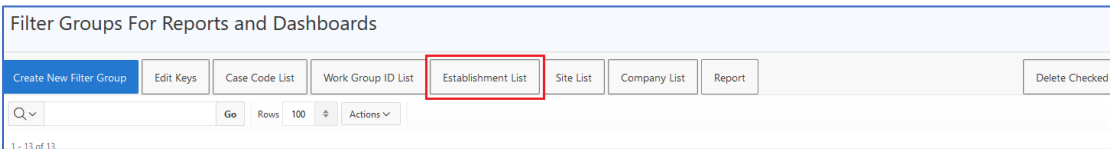


Click checkbox(es) to select *Work Groups*.

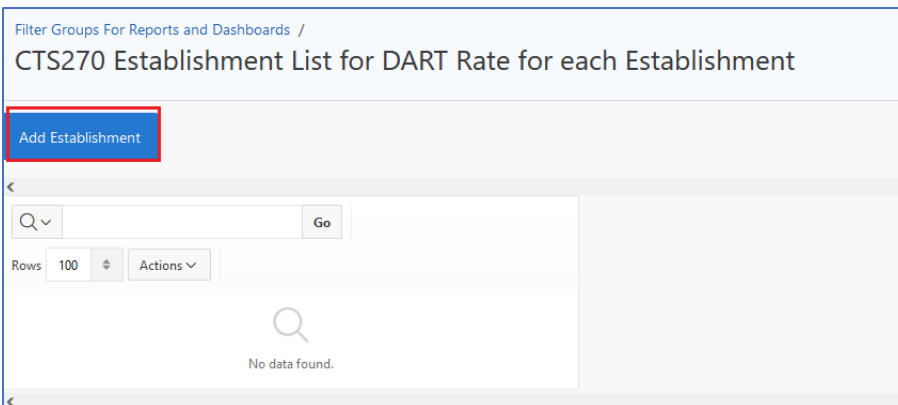
Click the **Click Here To Save – After Checking Work Groups** button.

Click **Filter Groups For Reports and Dashboards /** breadcrumb.

Click **Establishment List** button.

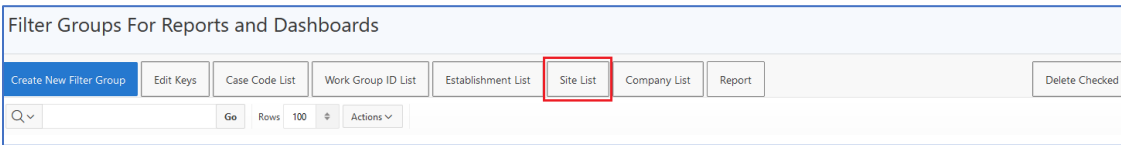


Click **Add Establishment** button.

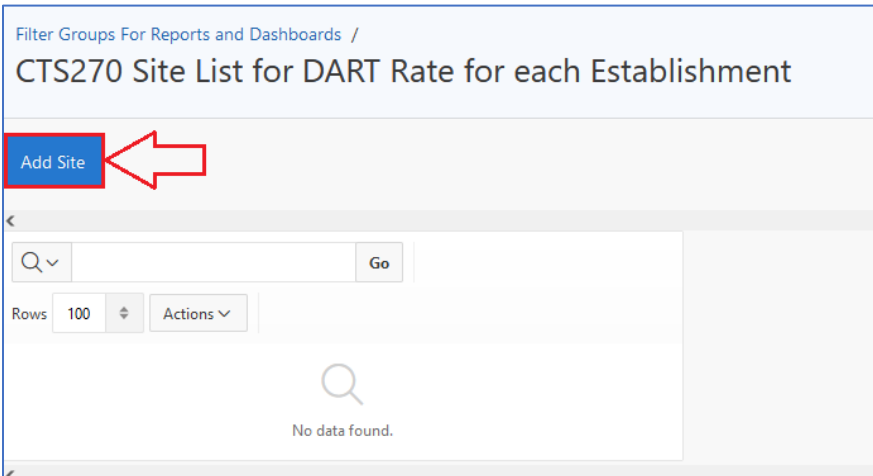


Click checkbox(es) to select *Establishments*.

Click the **Click Here To Save – After Checking** button.  
Click **Filter Groups For Reports and Dashboards** / breadcrumb.  
Click **Site List** button.

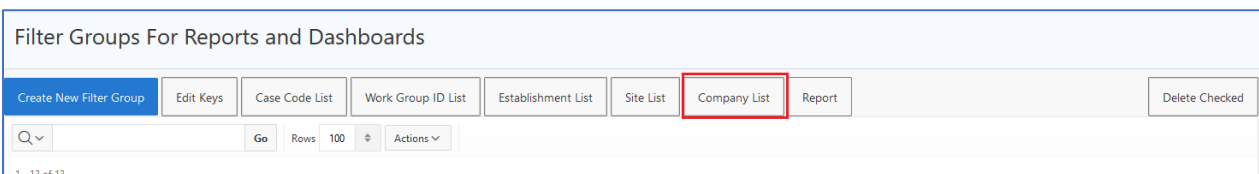


Click **Add Site** button.

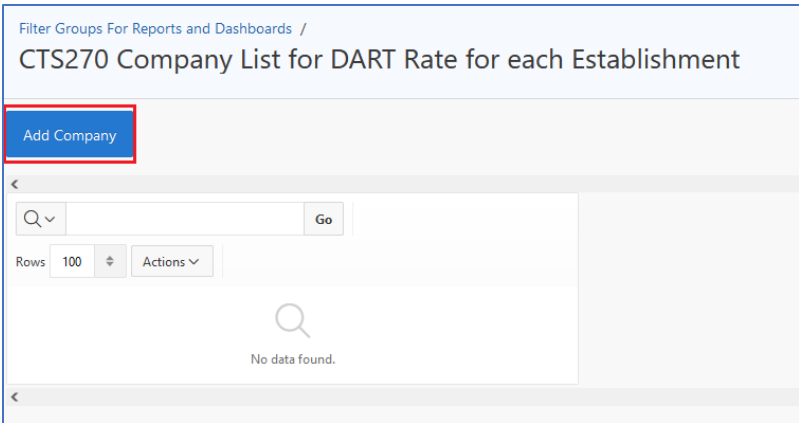


Click checkbox(es) to select *Sites*.  
Click the **Click Here To Save – After Checking Work Groups** button.  
Click **Filter Groups For Reports and Dashboards** / breadcrumb.

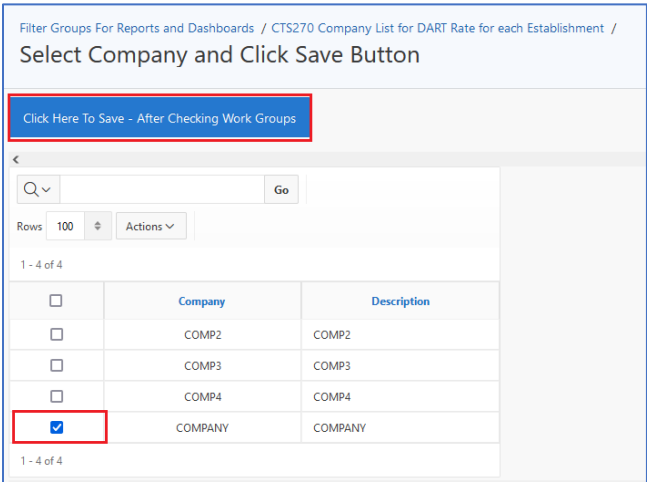
Click **Company List** button.



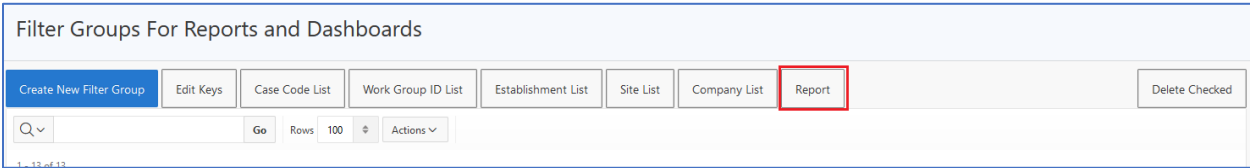
Click **Add Company** button.



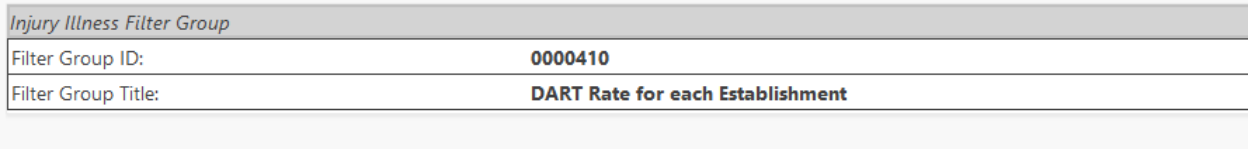
Click checkbox(es) to select *Companies*.  
 Click the **Click Here To Save – After Checking Work Groups** button.



Click **Filter Groups For Reports and Dashboards** / breadcrumb.  
 Click **Report** button.



Report opens in a new browser tab.



Close browser tab when finished viewing.  
 Close Filter Groups For Reports and Dashboards tab.

Click **CTSINJL** / breadcrumb to return to Injury Illness menu.

CTSINJL /

## CTS270: Filter Groups and Counts

Report Listing
<b>Filter Groups For Reports and Dashboards</b>
<b>Injury-Illness Count List</b>
<b>Incident Count List</b>



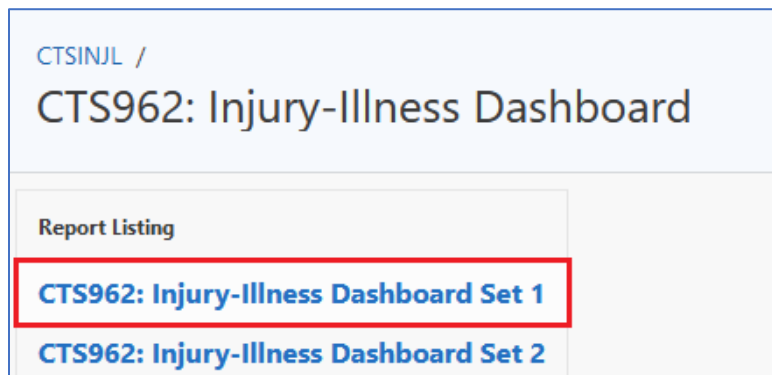
# Chapter 12 – Injury-Illness Dashboard (CTS962)

This software has many options for more aesthetically pleasing forms of displaying data. An example of this capability is demonstrated in CTS962. Different types of charts and graphs, along with custom layouts, colors, and fonts can help bring attention and understanding to basic information.

Under **Injury and Illness Reports** submenu, click **CTS962: Injury-Illness Dashboard** button.



Click blue **CTS962: Injury-Illness Dashboard Set 1** text.

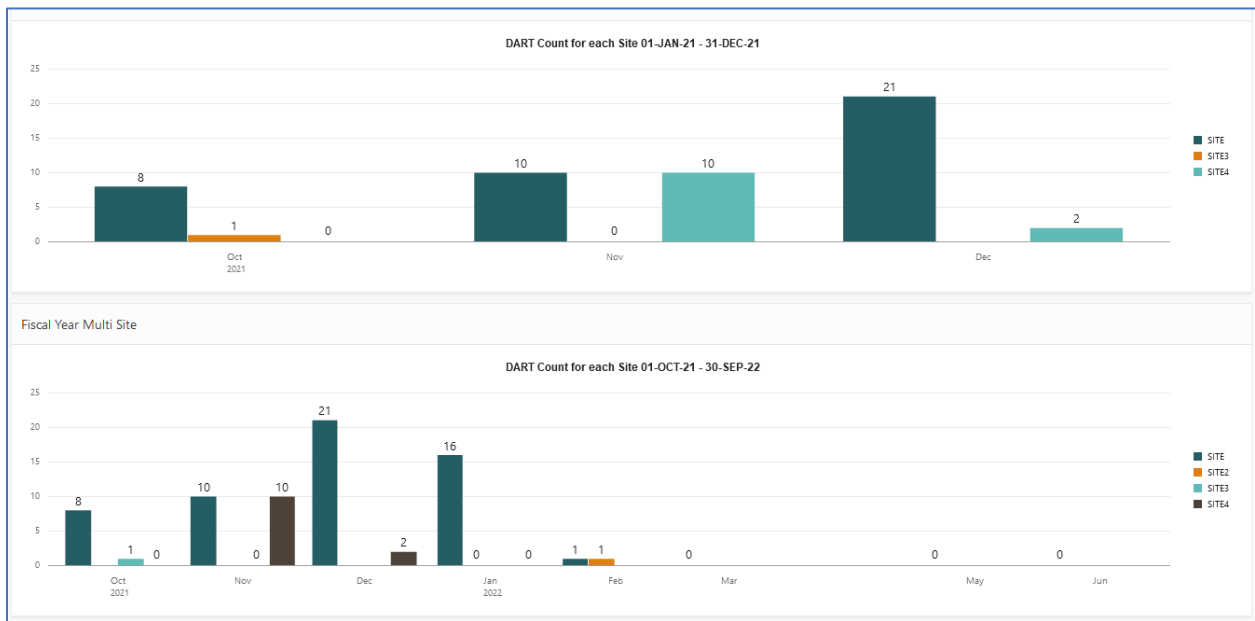


Page displays in a new browser tab.

Click any button to view its corresponding report.

TRC Counts by Establishment	DART Counts by Establishment	LWD Counts by Establishment	LWDR Counts by Establishment
TRC Counts by Site	<b>DART Counts by Site</b>	LWD Counts by Site	LWDR Counts by Sites
TRC Counts by Company	DART Counts by Company	LWD Counts by Company	LWDR Counts by Company
TRC Counts by Org1	DART Counts by Org1	LWD Counts by Org1	LWDR Counts by Org1

This data is displayed in full color, bar graph style.



Close browser tab when finished viewing.

Click blue **CTS962: Injury-Illness Dashboard Set 2** text.

CTSINJL /

## CTS962: Injury-Illness Dashboard

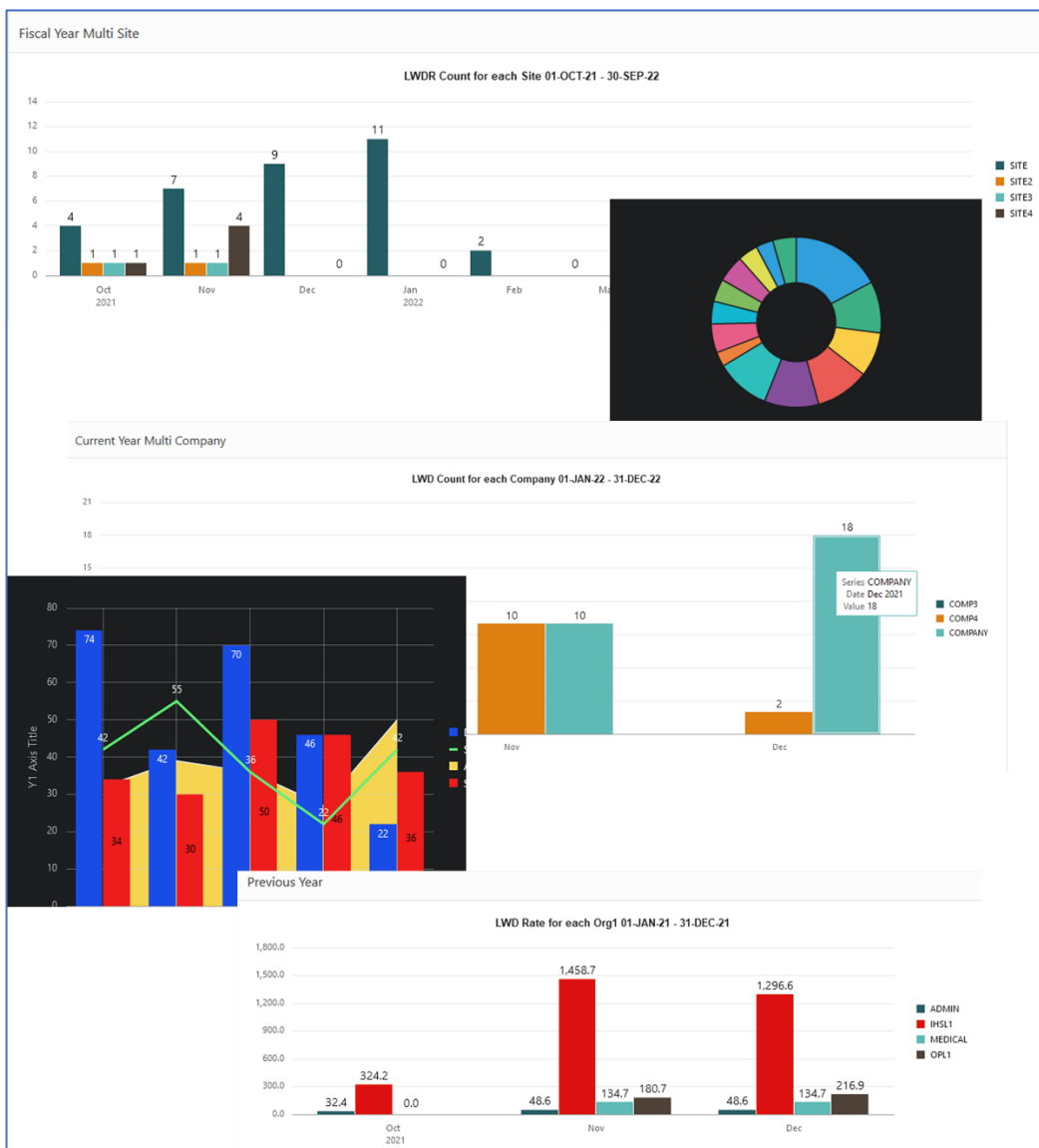
Report Listing

- CTS962: Injury-Illness Dashboard Set 1
- CTS962: Injury-Illness Dashboard Set 2**

This is an example of how buttons can be customized with color.



Close browser tab when finished viewing.



▼ Choose Records To Review

*Please Choose All or Group For The Records You Want To Review*

**Records For A Specific Group**

Show All Injury-Illness Records

*Please Choose If You Want To Review Injury-Illness Counts, or Rates*

**Counts**

Rates

*Please Choose The Classification Category*

**1 - Total Recordable (TRC)**

2 - Days Away, Restricted or Transferred (DART)

3 - Lost Workday (LWD)

4 - Lost Workday Restricted (LWDR)

*Please Choose a Reporting Group*

**Company**

Establishment

Organization

Site

▼ Choose a Reporting Group and Chart Type

*Choose a Company*

*Select which charts to display ( choose all that apply) ?*

Current Fiscal Year

Previous Fiscal Year

Current Calendar Year

Previous Calendar Year

Rolling 3 Month

Rolling 12 Month

**Click After You Choose A Reporting Group and Chart Type**

## References

U.S. Dept of Labor. "Standard Number 1960.2(h) Definitions." July 2022. *United States Dept of Labor*. <<https://www.osha.gov/laws-regs/regulations/standardnumber/1960/1960.2>>.