



Workplace Safety and Loss Prevention
Program Harriman State Office Campus,
Building 12, Room 167 Albany, NY 12240
(518) 485-9766

**Mandatory Workplace Safety and Loss Prevention Program
Industrial Code Rule 59
Consultant Report**

This report deals with the program’s required elements. It assesses the employer’s compliance. It also makes recommendations for implementing the program.

Consultation Date: January 12, 2023

Report Date: February 9, 2023

Section A: Employer Information

Company Name A-M Electric Inc (AME) MBE/DBE			Contact Person Joseph Herbert	
Company Address 1117 West Fayette Street			Title Owner/President	E-mail address sherbert@amelectric95.com
City Syracuse			Phone Number (315) 295-2203	
State New York	Zip Code 13217	NAICS 238210	Number of employees 10	FEIN 161579073

Section B: Workers’ Compensation Insurance Information

Which insurer provides Workers’ Compensation insurance to this employer?

Insurer NYSIF		Contact person Gregg Schreider		
Address PO Box 66699		Title ICR 59 Program Director		
City Albany		Phone number (646) 729-4334		
State New York	Zip code 12206	E-mail address gschr@nysif.com		
Experience Rating for 10/03/22 – 10/03/23 policy year- 1.60		Board file number (NYCIRB combinable group number) 000043990		

Section C: Company Location(s) Information

Give the physical address for all locations covered by the Workers' Compensation policy listed in Section B. Use Appendix A (SH 933) to list more locations.

Company Location #1 1117 West Fayette Street Syracuse, NY 13217	Management Contact Name Joseph Herbert	Management Contact Phone 315-295-2203	No. of Employees 10	Union <input checked="" type="checkbox"/>	Safety Committee <input checked="" type="checkbox"/>
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Section D: Synopsis of Employer

AME is a commercial and residential electrical and communications contractor. They belong to IBEW Local 43 in Syracuse. Employees use their own personal vehicles to drive to each worksite to complete their tasks. Jobsites are supervised by **AME** foreman. The owner frequently visits jobsites to ensure proper operational and safety measures are being followed.

Tools and equipment are maintained by a warehouse manager. Field electricians complete their work consistent with the job specs and under the direction of the General Contractor and **AME** foreman.

Section E: Review of Company's Loss History

AME had three claims reported to the Worker's Compensation system from 10/03/2018 – 10/03/2021. Total Incurred Losses for those claims was \$375,118. There were no specific trends or patterns identified. The claims were consistent with an electrical contractor. The largest claim involved an electrical installer stepping off a ramp and fracturing her/his right ankle. Total Incurred Losses of \$359,216.

The three claims are listed below:

Electrical Installer- Employee was walking and stepped off a ramp and fractured her/his right ankle. **Total Incurred Losses- \$359,216.**

Electrical Installer- Employee was using a stud punch while on a ladder and felt shoulder pop. **Total Incurred Losses- \$8,230.**

Electrical Installer- Curbing gave way and the employee fell about 6' and injured the right side of her/his body. **Total Incurred Losses- \$7,672.**

Section F: Review of Employer Safety Program

A Safety Program tries to thwart occupational illnesses and injuries. It does this by identifying, preventing, evaluating, and controlling workplace hazards. A Safety Program must be documented in writing. The employer must supply it to all employees in languages and methods they understand clearly. They must give the plan to the recognized employee organization(s) and to all employees if asked.

Program Element #1

Policies, procedures, and practices that protect employees from occupational safety and workplace health hazards.

Does this program element meet the Department's requirements? Yes No

Did you make any recommendations to implement program element #1? Yes No

No Recommendation

Overall assessment of the employer's compliance with this program element:

AME has a comprehensive written safety manual with several policies to protect their staff from their day-to-day exposures. The manual also has company goals and objectives, assignments of responsibilities, safety rules, incident/accident section, communication and training, disciplinary policy, site inspections, and safety committee guidelines.

Program Element #2

Communicating the goals of the workplace safety and loss prevention program and action to be taken to achieve these goals.

Does this program element meet the Department's requirements? Yes No

Did you make any recommendations to implement program element #2? Yes No

No Recommendation

Overall assessment of the employer's compliance with this program element:

AME has stated their goals of their safety program in the company safety manual. Goals are frequently discussed by the owner, jobsite foreman, and general contractor during jobsite meetings and training sessions.

Program Element #3

Have top management visibly lead in enacting the program. Ensure that all workers at the site receive safety protection of the same high quality.

Does this program element meet the Department's requirements? Yes No

Did you make any recommendations to implement program element #3? Yes No

No Recommendation

Overall assessment of the employer's compliance with this program element:

During the opening conference, the owner, Joseph Herbert was fully engaged and open to the consultant's recommendations. He agreed to make any necessary changes to improve their safety program and satisfy the ICR59 Program. He has the knowledge, authority, and resources to make changes and improvements to the **AME** safety program.

Program Element #4

Allow and encourage employees to be involved in the creation and operation of the workplace safety and prevention program. This develops their commitment to achieving its goals and objectives. Use recognized employee organization(s), if any, to create this involvement.

Does this program element meet the Department's requirements? Yes No

Did you make any recommendations to implement program element #4? Yes No

No Recommendation

Overall assessment of the employer's compliance with this program element:

The **AME** safety program is proactive and includes a high level of communication between management and staff. Employees attend safety training, the foreman oversee the front-line staff and completes jobsite meetings, inspections and training, and employees identify broken and unsafe tools and equipment.

Program Element #5

(i) Assign responsibilities for all aspects of the workplace safety and loss prevention program to managers, supervisors, and employees. Make sure all know their responsibilities; all must know and understand what is expected of them in implementing the program.

(ii) Set up a system that holds managers and supervisors accountable for their responsibilities under the program.

Does this program element meet the Department's requirements? Yes No

Did you make any recommendations to implement program element #5? Yes No

No Recommendation

Overall assessment of the employer's compliance with this program element:

The **AME** safety manual includes an assignment of responsibilities which are shared with staff when hired, during safety meeting and trainings. The owner and foreman (Greg Cofey) are very vocal and oversee the staff onsite to ensure they are acting in a safe manner.

Program Element #6

Managers, supervisors, and employees must be trained to:

(i) Recognize potential hazards

(ii) Maintain safety protection in the work area and

(iii) Reinforce employee safe work practices and the use of required protective measures

Does this program element meet the Department's requirements? Yes No

Did you make any recommendations to implement program element #6? Yes No

No Recommendation

Overall assessment of the employer's compliance with this program element:

AME utilizes safety training programs from National Electrical Contractors Association (NECA) and Local 43. Most electrical contractors use the same resources and are able to ensure employees are properly trained before they enter the jobsite. Training topics include but are not limited to Lockout/Tagout, Fall Protection, Ladders, Electrical, Confined Spaces, COVID-19, Fire Protection, Blood-borne Pathogens, etc.

Program Element #7

Set up a reliable procedure that lets employees notify management of conditions that appear hazardous or do not comply with the policies of the workplace safety and loss prevention program. There must be no fear of reprisal. There must be a system that ensures timely and appropriate responses.

Does this program element meet the Department's requirements? Yes No

Did you make any recommendations to implement program element #7? Yes No

No Recommendation

Overall assessment of the employer's compliance with this program element:

AME is proactive in ensuring that ladders, tools, and equipment are in safe working order before they are sent to jobsites. They have a warehouse manager tasked with repairing and replacing all defective equipment. He destroys faulty ladders, extension cords, and equipment to ensure they are out of service. Field staff send defective tools and equipment back to the warehouse with repair notes/tags to be assessed for repair or replacement.

Program Element #8

Set up a system to investigate accidents that identifies the root cause(s) and a means to prevent the accident from recurring.

Does this program element meet the Department's requirements? Yes No

Did you make any recommendations to implement program element #8? Yes No

No Recommendation

Overall assessment of the employer's compliance with this program element:

The employee fills out an accident report which is forwarded to Dawn Herbert to complete a c-2 on the NYSIF eFROI system. All injury reports are reviewed by Joseph Herbert for appropriate action; and consideration to identify root causes.

Program Element #9

Create a system to review injuries and illness trends over time. Use it to identify and eliminate common causes.

Does this program element meet the Department's requirements? Yes No

Did you make any recommendations to implement program element #9? Yes No

No Recommendation

Overall assessment of the employer's compliance with this program element:

The employee fills out an accident report which is forwarded to Dawn Herbert to complete a c-2 on the NYSIF eFROI system. All injury reports are reviewed by Joseph Herbert for appropriate action, and consideration for trends and patterns.

Program Element #10

Create a system to conduct ongoing, periodic in-house safety inspections. Look for new or previously missed hazards or failures in controls. Schedule these inspections often enough to be effective.

Does this program element meet the Department's requirements? Yes No

Did you make any recommendations to implement program element #10? Yes No

No Recommendation

Overall assessment of the employer's compliance with this program element:

AME utilizes several opportunities to conduct safety surveys at their jobsites. The general contractor is responsible for providing a safe workplace and conducting inspections. In addition, the **AME** foreman inspects each jobsite for hazards, PPE, and to ensure that safety protocols are in place. The owner, Joseph Herbert makes regular visits to the jobsites to ensure his staff is working in a safe environment.

Program Element #11

Address emergency situations. Create written plans and procedures to ensure employee safety during such emergencies.

Does this program element meet the Department's requirements? Yes No

Did you make any recommendations to implement program element #11? Yes No

No Recommendation

Overall assessment of the employer's compliance with this program element:

AME has a written Emergency Action Plan (EAP) in their safety manual. Field staff receive EAP instructions from the General Contractor at each individual jobsite. The two employees in the office have been instructed on several occasions on how to evacuate the office areas.

Program Element #12

Create procedures for sharing and enforcing safe work practices in the workplace. Use training, positive reinforcement, and correction of unsafe performance.

Does this program element meet the Department's requirements? Yes No

Did you make any recommendations to implement program element #12? Yes No

No Recommendation

Overall assessment of the employer's compliance with this program element:

AME has comprehensive procedures for sharing and enforcing safe work practices in the workplace. They use a robust safety training program, constant communications encouraging employee feedback, positive reinforcement, and a written disciplinary policy to correct unsafe performance.

Section G: Additional Elements- List your recommendations for the program element.

N/A

Section H: Additional Evaluation Services

Did you provide other services, training, or materials to this employer? Yes No

Section I: Opening and Closing

The Consultant must conduct an opening conference with the employer and employee representatives. This includes the recognized representative of each collective bargaining unit, where this applies. You will discuss:

- (i) How you will conduct the consultation(s)
- (ii) What records and information you need to perform the consultation?
- (iii) The involvement of employees or employee representatives in the consultation
- (iv) Sampling that might be required as part of the consultation, as well as the sampling protocols you will use.

The Consultant must hold a closing conference with the employer and employee representatives. This includes the recognized representative of each collective bargaining unit, where this applies. You will discuss the findings and recommendations for implementation of the workplace safety and loss prevention program.

Date of Opening Conference: January 12, 2023

Mark Gallo, NYSIF

Joseph Herbert, Owner of **AME**

Date of Closing Conference: February 9, 2023

Mark Gallo, NYSIF

Joseph Herbert, Owner of **AME**

Michael Grau, NYSIF

Section J: Review of Company Records

- AME** Safety Program- 2022
- NYSIF Injury/Illness Pie Chart Report
- NECA Safety Training Portal

Section K: Site Visits- The consultant conducted a site survey at the only location for this company at 1117 West Fayette Street, Syracuse, NY 13217. The office area and warehouse were clean, neat, and organized. The **AME** warehouse manager, James Austin provided a tour of the warehouse which included updated SDS sheets and a faulty cord and equipment disposal area. **No hazards were identified during the survey.**

Describe all monitoring performed on your site visit(s).

- (i) Include the methodology used
- (ii) Identify the laboratory that processed the sample
- (iii) List the monitoring results

N/A

Section L: Timeline of Compliance

Company Name: A-M Electric Inc		Employer Compliance dates are in RED
Combinable Group Number: 000043990		Insurance Carrier Compliance dates in BLUE
	October 3, 2022	
Date of NYCIRB Notice:	October 3, 2022	
30 Days to Arrange:	November 2, 2022	
10 Days to Notify DOL & Carrier:	November 12, 2022	
Within 75 Days Report & Consultation:	December 17, 2022	
Within 30 Days Report to DOL & Carrier:	January 16, 2023	
Within 6 Months to Complete Recommendations:	June 15, 2023	
Within 60 Days Re-Inspection By Carrier:	August 14, 2023	
Within 45 Days Inspection Report to DOL:	September 28, 2023	
Within 30 Days Appeal to DOL:	October 28, 2023	

Section M: Consultant Information

Name Mark Gallo	Certification Number WS-39	Expiration date December 2025
Company: NYSIF	Phone number: 607-206-2226	
Address: PO Box 66699	Total number of hours for evaluation (on site): 2.25	
City: Albany	Total number of hours for report writing: 4	
State: New York	Zip code: 12206	Total number of hours for travel: 3

I certify that the information contained in this report is accurate and true. The consultation conducted as indicated in this report meets the requirements of the Workplace Safety and Loss Prevention Program as required by ICR 59.

Mark Gallo

February 9, 2023

Consultant's signature

Date

I fully understand the responsibilities associated with providing my signature as a Certified Consultant.

Send this report to the employer.

The employer must submit this report to the New York State Department of Labor along with a letter describing the:

- (i) Means by which any remedial action is to be accomplished
- (ii) Expected starting and completion dates for any remedial action
- (iii) Names of the individual(s) and/or organization that will be providing any remediation service

Reports must be filed using the following address:

New York State Department of Labor
Workplace Safety and Loss Prevention Program
State Office Campus, Building 12, Room 167
Albany, NY 12240

You also can e-mail all questions, correspondence and/or this report to WSLPIP@labor.ny.gov

