



SAMPLE OSHA Heat Complaint Language: OSHA ONLINE COMPLAINT FORM “HAZARD DESCRIPTION” FIELD

****INSTRUCTIONS FOR USE****

This is a *sample* description. Please take care to avoid including in your complaint any references that do not apply to the specific situation you are reporting to OSHA. **

August 2024 Update: The “Hazard Description Field” of OSHA’s online complaint form now has a 4000 character limit. Please adjust character counts accordingly.

OPENING PARAGRAPH IF FILED BY ORGANIZATION ON BEHALF OF WORKER(S)

Pursuant to 29 U.S.C. § 657(f)(1), our organization, **Name of Organization**, submits this complaint on behalf of **[insert number of employees you are assisting]** **[indicate whether they are current or former employees]** of the **[name of company]**, a **[type of industry] company/business**, who are experiencing and/or are at risk of experiencing heat related injuries and illnesses, including but not limited to heat stroke and heat exhaustion, in **[city]**, **[state]**. The workers who submit this complaint do not want their names revealed to the employer for fear of retaliation. They are willing to participate in any OSHA investigation arising out of this complaint, **but [if desired: all interviews shall occur offsite]** and any written and signed interview statements by the undersigned workers, shall be protected by the informer’s privilege, and not subject to disclosure to the employer.

ALTERNATIVE OPENING PARAGRAPH IF FILED BY WORKER

My name is **[insert name]** and I am a **[current/former]** employee **[name of company]**, a **[type of industry] company/business**. Pursuant to 29 U.S.C. § 657(f)(1), I am submitting this complaint because my coworkers and I are experiencing and/or are at risk of experiencing heat related injuries and illnesses, including but not limited to heat stroke and heat exhaustion, in **[city]**, **[state]**.

I ask that my name and any information that identifies who I am be redacted before this complaint is shared with my employer, as my identity is protected by the government informer’s privilege. I do not want my name revealed to the employer for fear of retaliation. I am willing to participate in any OSHA investigation arising out of this complaint, **but [if desired: all interviews shall occur offsite]** and any written and signed interview statement my coworkers and I provide shall be protected by the informer’s privilege, and not subject to disclosure to the employer

The hazards described below constitute a violation of the general duty clause under section 5(a)(1) of the Occupational Safety and Health Act (OSH Act) for failure to use



feasible means of abatement for the hazard of heat stress. *If applicable: Additionally, the hazards described below constitute violations of numerous general industry regulations for [choose all that apply: hazard assessment, training, personal protective equipment, potable water, recordkeeping, and reporting to OSHA for hospitalization and/or death.]*

There are a total of [insert number of employees] employees working for [name of employer], all of whom are exposed to heat. Employees work in a [type of industry - agriculture, construction, service] worksite completing the following tasks [list out type of work performed and exertion required (hard labor vs. sedentary work), work setting (indoor w/ heat exposure, outdoor - shade/direct sun)]. Employees (were/were not) informed of the heat hazard and (were/were not) trained on methods of recognizing and preventing heat illness. Employer (did/did not) provide access to cool potable water and cool down breaks in a cool shaded area. *If possible note if access to emergency medical care existed, or how far away it was from the worksite. Also note if this is a single or stationary worksite or if workers are mobile between numerous worksites.*

Employees, including those our organization represents on this complaint, have experienced symptoms including [insert applicable symptoms such as excessive sweating, nausea, vomiting, high temperatures], in the last [insert number of weeks or months – should be less than six months]. *If applicable: Additionally, [insert number of workers] have been hospitalized due to heat related illnesses in the last [insert number of weeks or months – ideally less than six months]. If applicable: Upon obtaining copies of the employer’s OSHA 300 Logs, the above listed heat related illnesses and hospitalizations were not included.*

On [date(s)&time(s)], one (or more) of the workers [we represent] on this complaint experienced [insert description of symptoms and/or illness]. At the time the worker(s) experienced these symptoms they were (again describe work conditions/exertion), and the heat index recorded for the location was (lookup heat index for location at time of symptoms experienced). *If applicable: The workers filing this complaint informed [name of manager/supervisor] of these symptoms on [date].* Because of the history of symptoms and illnesses listed above, OSHA will be able to establish the existence of the hazard of heat stress and the likelihood of serious injury or death. *If applicable: Additionally, the fact that these symptoms and illnesses have been reported to the employer, the employer has knowledge of the existence of the hazard.* Finally, the NIOSH publication *Criteria for a Recommended Standard: Occupational Exposure to Heat and Hot Environments* is publicly available and therefore imputes industry knowledge, particularly for the [construction/agriculture] industry.

Despite the existence of the hazard and the employer and industry knowledge of the hazard, the employer has failed to put into place feasible means of abatement including failure to [include all that apply but only those that apply]:

1. Provide training to employees about the hazards of heat related illness, prevention, recognition of symptoms, first aid procedures
2. Warn workers of increased risk for those on certain medications and with certain



- medical conditions
3. Provide Personal Protective Equipment (PPE) to protect against heat related illnesses such as [write all that apply: hats, loose clothing that deflects heat, water-cooled clothing, dermal patches, heart rate monitors]
 4. Provide engineering controls such as [select all that apply: air conditioning, cooling fans, shade for outdoor worksites, stop leaking steam, insulate hot surfaces, reflective shields, increase general ventilation]
 5. Allow new workers and workers returning from absences to adjust to working in a hot environment over 1-2 weeks.
 6. Provide cool drinking water
 7. Schedule frequent breaks for rest and drinking water

Implementing the above listed abatements are feasible for the employer, who earned over [insert annual income of employer if known] in [year]. Furthermore, implementation of these abatements will reduce the likelihood of heat related illnesses. [if applicable: Finally, on [date] OSHA issued a Hazard Alert Letter to the employer recommending the above listed abatements, which the employer failed to implement].

In addition, the above listed conditions illustrate that the employer has likely violated the following regulations: [if applicable, include:]

1. Failure to provide potable drinking water in violation of 29 CFR 1910.141(b)(1)
2. Failure to assess workplace hazards which require use of PPE and provide and train workers on PPE use in violation of 29 CFR 1910.132 (d)
3. For construction only: Failure to train employees on recognition and avoidance of heat related illnesses as well as other hazards common in the construction industry in violation of 29 CFR 1926.21
4. Failure to record heat related illnesses that resulted in [select all that apply: restricted work, transfer to another job, medical treatment beyond first aid, loss of consciousness, hospitalization, and/or death] in violation of 29 CFR 1904.7
5. Failure to report hospitalizations due to work related heat stress illnesses to OSHA within 24 hours in violation of 29 CFR 1904.39(a).
6. Failure to report workplace deaths related to heat stress illnesses to OSHA within 8 hours in violation of 1904.39(a)
7. Failure to train employees on administration of first aid as there is no infirmary or clinic nearby to the worksite, in violation of 29 CFR 1915.87(c)(1)
8. Failure to maintain and provide adequate first aid supplies in violation of 1910.151(b).

This complaint meets several criteria warranting an in person inspection pursuant to Chapter 9, Part I, Subpart C of the Field Operations Manual (FOM). [if applicable: First this complaint constitutes a formal complaint as defined by Chapter 9, Part I, Subpart A of the



FOM, as it was submitted in writing by an employee representative on behalf of current employees.

OR if not current employee: OSHA should prioritize this complaint for inspection pursuant to Chapter 9, Part I, Subpart C, of the Field Operations Manual (FOM), which states that an inspection is warranted if “[t]he information alleges that an imminent danger situation, a violation of the Act or of an OSHA standard exists, that exposes employees to a potential serious physical or health hazard in the workplace.” Though the employees for whom we are filing this complaint are former employees, the hazards contained in this complaint concern ongoing and present a risk of serious injury, harm and/or death to current employees of [Employer] in [City, State]

Further, Chapter 9, Part I, Subpart C of the FOM, prioritizes inspections that fall within a National Emphasis Program (NEP). Here, there is a National Emphasis Program for Outdoor and Indoor Heat-Related Hazard:

https://www.osha.gov/sites/default/files/enforcement/directives/CPL_03-00-024.pdf.