



# Job Safety and Health IT'S THE LAW!

## All workers have the right to:

- A safe workplace.
- Raise a safety or health concern with your employer or OSHA, or report a work-related injury or illness, without being retaliated against.
- Receive information and training on job hazards, including all hazardous substances in your workplace.
- Request a confidential OSHA inspection of your workplace if you believe there are unsafe or unhealthy conditions. You have the right to have a representative contact OSHA on your behalf.
- Participate (or have your representative participate) in an OSHA inspection and speak in private to the inspector.
- File a complaint with OSHA within 30 days (by phone, online or by mail) if you have been retaliated against for using your rights.
- See any OSHA citations issued to your employer.
- Request copies of your medical records, tests that measure hazards in the workplace, and the workplace injury and illness log.

*This poster is available free from OSHA.*

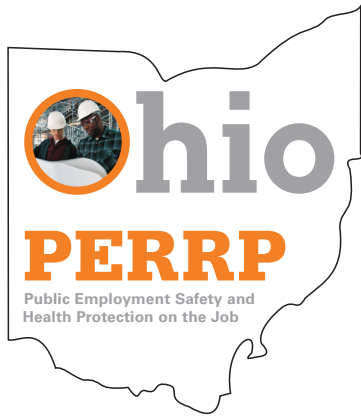
**Contact OSHA. We can help.**

## Employers must:

- Provide employees a workplace free from recognized hazards. It is illegal to retaliate against an employee for using any of their rights under the law, including raising a health and safety concern with you or with OSHA, or reporting a work-related injury or illness.
- Comply with all applicable OSHA standards.
- Notify OSHA within 8 hours of a workplace fatality or within 24 hours of any work-related inpatient hospitalization, amputation, or loss of an eye.
- Provide required training to all workers in a language and vocabulary they can understand.
- Prominently display this poster in the workplace.
- Post OSHA citations at or near the place of the alleged violations.

On-Site Consultation services are available to small and medium-sized employers, without citation or penalty, through OSHA-supported consultation programs in every state.





# Job Safety and Health It's the Law!

## All Ohio public employees have the right to:

- A safe workplace.
- Raise a safety or health concern with your employer or the Public Employment Risk Reduction Program (PERRP), or report a work-related injury or illness, without fear of retaliation.
- File a complaint with PERRP about any safety or health concerns you may have about your workplace. You may have a representative file a complaint with PERRP on your behalf.
- Receive information and training about job hazards, including all hazardous substances in your workplace.
- Refuse a work assignment if you believe it presents an imminent (life-threatening) danger to you or your co-workers. You may have a representative contact PERRP on your behalf.
- Participate (or have your representative participate) in a PERRP inspection and speak in private to the compliance officer.
- File a union grievance or file a complaint with the State Personnel Board of Review within 60 days (by phone, online or by mail) if you have suffered retaliation for using your rights.
- See any citations PERRP issues to your employer.
- Request copies of your medical records, tests that measure hazards in the workplace, and the workplace injury and illness log.

## All Ohio public employers must:

- Provide employees a workplace free from recognized hazards. It is illegal to retaliate against employees for using any of their rights under the law, including raising a health and safety concern with you or with PERRP, or reporting a work-related injury or illness.
- Comply with all adopted PERRP standards.
- Report to PERRP all work-related fatalities within eight hours, and all incidents resulting in a hospitalization, amputation or loss of an eye within 24 hours.
- Provide required training to workers in a manner they can understand.
- Prominently display this poster in the workplace.
- Post PERRP citations at or near the place of the alleged violations.
- Maintain, post and submit injury and illness statistics to PERRP.

**Free compliance assistance** to identify and correct hazards is available to all public employers, without citation or penalty.

To request compliance assistance visit our website, or send an email to:  
[PERRPRequest@bwc.state.oh.us](mailto:PERRPRequest@bwc.state.oh.us)



**Contact PERRP at 1-800-671-6858. We can help!**

Fax 614-621-5754 • TTY 1-800-750-0750 • [www.bwc.ohio.gov](http://www.bwc.ohio.gov)

This poster is available free from PERRP. Minimum reproduction size is 8 1/2 x 14 inches.



**Bureau of Workers' Compensation**

30 W. Spring St.  
Columbus, OH 43215

### Certificate of Ohio Workers' Compensation

This certifies that the employer listed below participates in the Ohio State Insurance Fund as required by law. Therefore, the employer is entitled to the rights and benefits of the fund for the period specified. This certificate is only valid if premiums and assessments, including installments, are paid by the applicable due date. To verify coverage, visit [www.bwc.ohio.gov](http://www.bwc.ohio.gov), or call 1-800-644-6292.

This certificate must be conspicuously posted.

Policy number and employer  
80110770

Period Specified Below  
01/01/2024 to 01/01/2025

State of Oregon, Department of Admin  
State of Oregon, Department of Administr  
PO BOX 12009  
SALEM OR 97309-0009



Administrator/CEO

[www.bwc.ohio.gov](http://www.bwc.ohio.gov)  
Issued by: BWC

You can reproduce this certificate as needed.

### Ohio Bureau of Workers' Compensation

#### Required Posting

Section 4123.54 of the Ohio Revised Code requires notice of rebuttable presumption. Rebuttable presumption means an employee may dispute or prove untrue the presumption (or belief) that alcohol, marihuana or a controlled substance not prescribed by the employee's physician is the proximate cause (main reason) of the work-related injury.

The burden of proof is on the employee to prove the presence of alcohol, marihuana or a controlled substance was not the proximate cause of the work-related injury. An employee who tests positive or refuses to submit to chemical testing may be disqualified for compensation and benefits under the Workers' Compensation Act.



**Bureau of Workers' Compensation**

You must post this language with the Certificate of Ohio Workers' Compensation.