

HCPEP Worksheet

1 At what level (1,2,3,4 or 5) has the hearing program been initiated at this site?	
Instructions: See paragraphs 3.2, 3.3 and 3.4 of DA PAM 40-501. Program initiation is defined in terms of applicable program elements, e.g., noise hazard identification, engineering controls, hearing protectors, monitoring audiometry, health education, enforcement and program evaluation.	
Level 1	No program has been initiated at this site despite the presence of hazardous noise and/or ototoxins.
Level 2	Program initiation is based on the 5 dB exchange at 85-dB TWA for steady state noise levels only.
Level 3	Program initiation is based on the 3 dB exchange rate at 85 dBA TWA on 140 dBP or greater for impulse noise and one-third octave criteria for airborne high frequency and ultrasonic noise. Program waivers have only been done after a thorough noise hazard evaluation and a medical authority has considered all factors which may potentially cause hearing impairment.
Level 4	Program initiation is based on latest military noise exposure criteria and on any known or suspected ototoxins. Program waivers done IAW paragraph 3-4 DA Pam 40-501.
Level 5	Program initiation is based on the latest military exposure criteria and applicable health hazard assessments of individual weapon systems. Hearing protection is enforced regardless of duration of noise exposures.

Comments:

HCPEP Worksheet

2 At what level (1,2,3,4 or 5) is noise survey frequency conducted?	
Instructions: When other program elements are in place, survey frequency can be a strong management indicator of hearing conservation program compliance and of the essential involvement of industrial hygiene personnel. Use documentation in the Defense Occupational and Environmental Health Reporting System Industrial Hygiene (DOEHRS-IH) Application and/or DD Form 2214, Noise Survey to score this question. (paragraph 4-1, DA PAM 40-501).	
Level 1	No documentation exists that known or suspected noise hazards were ever evaluated under military exposure criteria. No system exists for noise hazard evaluations of planned/changed/new operations.
Level 2	Noise surveys are conducted only in response to complaints or requests.
Level 3	Trained personnel conduct noise surveys of all suspected noise hazardous areas at least once and within 30 days of any change in operations that could effect noise levels. The TWA has been determined for all DA civilian employees routinely working in hazardous noise operations and military working in non-military unique operations IAW USACHPPN TG 181. An industrial hygienist or technician visits potentially noise-hazardous areas at least once a year. Risk assessment codes (RAC) have been assigned IAW USACHPPM TG 181.
Level 4	Methodical noise surveys are conducted periodically and drive appropriate corrective actions. Noise hazard analyses are available and communicated to all the workforce. Locations of potential ototoxins are reported with noise hazards analyses.
Level 5	Regular noise surveys are conducted by certified industrial hygienist or professional engineers.

Comments:

HCPEP Worksheet

3	At what level (1,2,3,4 or 5) are noise survey and analysis equipment available?	
	Instructions: Verify existence of equipment and calibration records by first hand observations (paragraph 4-2 DA PAM 40-501, ANSI standards, S1.4-1983 R97, S1.4A-1985, and S1.25-1991 R97. See DA Form 3758 (Calibration and Repair Requirements Worksheet) for documentation.	
	Level 1	No noise measurement equipment is available to perform basic noise hazard identification.
	Level 2	An inadequate inventory of equipment is available to perform required noise hazard identification. Some equipment calibration discrepancies are evident.
	Level 3	Basic noise hazard identification equipment is present including noise dosimeters and hand-held type 2 sound level meter(s) required to evaluate most types of noise hazards at this site including audiometric test environments. All equipment used within the last year meets appropriate ANSI standards and is in calibration.
	Level 4	Noise measurement equipment exceeds ANSI standards and no calibration discrepancies can be found in records for at least 5 years. Employees are periodically instructed in noise hazard identification and reporting procedures.
	Level 5	State-of-the-art noise measurement equipment is used by certified industrial hygienist.

Comments:

HCPEP Worksheet

4	At what level (1,2,3,4 or 5) are post survey procedures implemented?	
	Instructions: Verify post survey procedures with first hand observations (paragraph 4-5, DA Pam 40-501).	
	Level 1	Post survey procedures are non-existent.
	Level 2	Non-approved forms or a non-approved automation system is used to document hazards. Reporting of data is untimely and not always to all appropriate parties.
	Level 3	The DOEHRS-IH and/or DD Form 2214, Noise Survey is used. Program Manager is provided noise survey results and at least twice a year an updated roster of individuals exposed to hazardous noise with names and complete social security number [identification numbers (IDN)]. Number of noise-exposed reported at least once per year. Noise survey results provided to unit Hearing Conservation Officer(s) and installation Safety Manager. Unit commanders and supervisors are provided TWA's on their noise exposed personnel.
	Level 4	Where most efficient, data are reported electronically.
	Level 5	Representative TWA's are available for soldiers exposed to hazardous noise in military unique operations, e.g., combat arms. Management responds to reports of noise hazards in writing within specified time frames.

Comments:

HCPEP Worksheet

5 At what level (1,2,3,4 or 5) are noise hazards posted?	
Instructions: Verify findings with onsite observations (paragraph 4-6, DA Pam 40-501)	
Level 1	Posting is almost non-existent especially at fixed-point firing ranges and other extremely hazardous areas.
Level 2	Some posting evident, but decals or signs faded and/obscured from view.
Level 3	All equipment and areas posted with caution or danger decals or signs that describe hazard and measures to be taken. Signs were highly-visible and positioned at entrances and on the periphery of noise-hazardous areas. DA Poster 40-50IA (Occupational Noise Exposure Standard and Hearing Conservation Ammendment) posted in all industrial areas. Applicable 85 dBA and 140 dBP contours established.
Level 4	All decals and signs conform to Safety Color Code Markings, Signs and Tags Information Guide. Noise contours include double and single hearing protection demarcations. Signs inspected periodically and routinely updated.
Level 5	The Global Information System (GIS) or equivalent tool is used to develop color-code noise maps. Employees are provided noise maps of their areas.

Comments:

HCPEP Worksheet

6 At what level (1,2,3, 4 or 5) are engineering controls implemented for existing equipment and facilities?	
Instructions: Use of hearing protection is not to be considered in the evaluation of this element (paraggraphs 4-4, 5-2 and 5-4 DA Pam 40-501). See USACHPPM TG 181 for assignment of RAC's and AR 385-10 and DA Pam 40-503 for installation noise abatement-plans.	
Level 1	Engineering noise controls are limited to routine maintenance procedures.
Level 2	Some noise controls are in place, but their effectiveness varies.
Level 3	Appropriate noise controls are in place for noise hazards that exceed 100 dBA TWA. The Industrial Hygiene Manager evaluates the results of engineering controls. Risk Assessment Codes (RAC) have been assigned and are used as part of the installation hazard abatement plan. The overall program tolerates occasional deviations.
Level 4	Feasible noise controls are in place for noise exposures that exceed 85 dBA TWA or impulse noise that exceeds 140 dBp and are supported by the workforce. Few serious hazards exist. All deviations are identified and causes determined.
Level 5	Feasible noise controls are fully in place and continually improved upon. Documented reviews of needs are conducted by acoustical engineers or certified industrial hygienists. Noise hazard abatement is an element in performance standards of pertinent military and civilian personnel.

Comments:

HCPEP Worksheet

7	At what level (1,2,3,4 or 5) are engineering controls implemented for new equipment and facilities?	
	Instructions: Use of hearing protection is not to be considered in the evaluation of this element (paragraph 5-3 and 5-4 DA Pam 40-501)	
	Level 1	Engineering controls are limited to plans for routine maintenance of new equipment and facilities.
	Level 2	Some specifications for new equipment and facilities have considered noise performance requirements, but the language is vague and generally ineffective.
	Level 3	Specific, noise performance criteria, e.g., 80 dBA or less at the operator's head position, are included in specifications for new equipment and facilities. The overall program tolerates occasional deviations. The Industrial Hygiene Manager evaluates all new equipment and facilities after purchase.
	Level 4	Safe noise limits are inserted in both the mission needs statement (MNS) and into equipment specifications. Few hazards exist among new purchases and facilities.
	Level 5	An aggressive buy quiet program is in effect. Management provides financial incentives (e.g., budgets are increased up to 10 percent for purchases of quieter equipment). Noise hazard abatement is an element in the performance standards of military and civilian Logistics/Procurement personnel.

Comments:

HCPEP Worksheet

8 At what level (1,2,3,4 or 5) are exposure requirements implemented?	
Instructions: See paragraph 6-2, DA Pam 40-501.	
Level 1	No consideration is given to level of noise exposure and type(s) of hearing protection used.
Level 2	Some consideration is given to level of noise exposure and type of hearing protection used. This practice, however, is inconsistent and not well documented or enforced.
Level 3	Single-hearing protection is used for steady-state noise exposures between 85 dBA and 103 dBA. From 103 dBA to 108 dBA double protection (earplugs and noise muffs or noise-attenuating helmet) are used. Over 108 dBA exposure time limits are enforced as well. Single hearing protection is used for impulse noise exposures from 140 dBP to 165 dBP. Double protection is used over 165 dBP or weapon specific guidance from health hazard assessments is followed. Ear canal caps are limited to exposures under 95 dBA. Requirements for use of single protection with Kevlar infantryman's helmet are followed.
Level 4	Hearing protection exposure requirements are well documented and widely known among command as well as among soldier and affected civilian employees. Consideration is given to communication requirements.
Level 5	No instances of overprotection exist where vital communications are impaired. Tools such as Correct Hearing Protection Selection Software (CHIPS) or an equivalent is used to evaluate communication requirements.

Comments:

HCPEP Worksheet

9 At what level (1,2,3,4 or 5) is hearing protection available?		
Instructions: See paragraphs 6-3 and 6-4 and Table 6-1, DA Pam 40-501.		
Level 1		Hearing protection availability is limited or non-existent in noise-hazardous areas. Instances of personnel being charged for hearing protectors or of individuals having to purchase personal protectors is evident. Hearing aids in either vented or the "on mode" and noise muffs with built-in radios designed for recreational listening are used in place of, or with approved hearing protectors.
Level 2		Approved hearing protectors are available; however preformed (sized) earplugs are primarily maintained in noise hazardous areas or are maintained at medical locations but not all sizes are available. Choices from approved hearing protectors are limited by incomplete inventories.
Level 3		All sizes of preformed earplugs (triple-flange) are available in sufficient inventories at medical fitting locations and are issued with military earplug carrying cases. Approved hand-formed earplugs or noise muffs are available in noise hazardous areas. Custom molded musicians earplugs are available for band members. Use of ear canal caps is limited. All Aviator and Armored Vehicle Crewman helmets are items of individual issue to permanent party and active duty personnel. Freedom of choice from among approved hearing protectors, unless medically or environmentally contraindicated, is instituted. Personnel working in or visiting noise-hazardous areas have hearing protection with them at all times.
Level 4		Earplugs with case are required on Battle Dress Uniform (BDUs).
Level 5		Communication earplugs (CEP) are available for Aviators. Combat Arms non-linear earplugs are in use by soldiers exposed to impulse noise, for example, in dismounted infantry-operations. Noise muffs with compression amplification or phone cancellation technology are available to facilitate communications.

Comments:

HCPEP Worksheet

10	At what level (1,2,3,4 or 5) are hearing protectors fitted and maintained?	
	Instructions: See paragraphs 6-3, 6-5 and Tables 6-4 and 6-5, DA Pam 40-501; DA Poster, 40-501B-H and M, AEHA TG 41, Hearing Protection; Fitting Care and Use.	
	Level 1	Procedures range from non-existent to poorly implemented with limited follow-up on observed discrepancies. Discrepancies may include, but are not limited to: alterations of earplugs or noise-muffs which degrade their noise reduction characteristics; storage practices which compromise hearing protector integrity and/or availability; or a lack of cleaning procedures which compromise hearing protection use, integrity and/or increase the risk of infection.
	Level 2	Fitting and maintenance procedures are in place but not consistently followed or monitored.
	Level 3	Preformed earplugs (triple-flange) are fitted under medical supervision. Triple-flange are fitting initially with emphasis on the use of the seating device. Flight Surgeons supervise the fitting of Aviator helmets. Armored Vehicle Crewman's helmets are individually fitted. Medical personnel make impressions for any custom molded earplugs including musician earplugs. Earplugs are checked at least annually for proper fit and any signs of deterioration and replaced if necessary. Noise muffs are checked semi-annually for condition of earcup seals and foam lining and replaced/required as necessary. Earplugs are cleaned with soap and water and returned to the case dry.
	Level 4	Noise-hazardous areas are posted with DA instructional posters on hearing protection care and use. An earplug fitting kit is used to fit personnel in noise-hazardous areas and/or is used for follow-up. Earplug fitting distribution and demographic trends from the DOEHRS-HC are used to carefully monitor earplug fitting procedures by site/audiometric technician.
	Level 5	The Fit Check or an equivalent tool is used to ensure the proper fit of earplugs. DoseBusters or an equivalent system is used to monitor the effectiveness of hearing protectors. Cadre and other supervisory personnel have been trained to fit earplugs (under medical supervision). Supervisors, Safety and/or Medical personnel make frequent checks of proper hearing protection use at job site.

Comments:

HCPEP Worksheet

11	At what level (1,2,3,4 or 5) are testing, referral and diagnostic requirements in place?	
	Instructions: See paragraphs 7-2, 7-4, 7-5 DA Pam 50-501. Monitoring audiometry detects changes in an individual's hearing sensitivity. This information identifies individuals who are highly susceptible to noise-induced hearing loss and evaluates effectiveness of the hearing conservation program. A trained technician is certified by the Council for Accreditation in Occupational Bearing Conservation or has received equivalent military training.	
Level 1		Personnel are tested on a walk-in basis or part of Physical Exams only. No trained personnel are available to administer testing. Conducting repeat (multiple) reference audiograms is not an uncommon practice.
Level 2		Trained personnel are available to administer tests but untrained personnel are also used. Supervision of audiometric technicians (corpsmen) is limited or non-existent. Reference audiograms are routinely conducted after months, even years of hazardous noise exposure in the Army or as a DA civilian employee. Periodic testing is conducted, but annual compliance seldom exceeds 40 percent. Likewise, follow-up audiometry for significant threshold shift (STS) and re-establishment of reference audiograms for permanent STS do not exceed 40 percent compliance. Referrals for diagnosis are backlogged and/or not fully funded. Termination testing is inconsistent.
Level 3		Noise-exposed military and civilian personnel receive timely reference, annual and termination audiograms administered by trained personnel under the supervision of a physician or audiologist. Deaf civilians working in noise hazardous areas receive reference and termination audiograms. Physicians diagnose hearing loss etiology using all reasonable methods of differential diagnosis. Funding for referrals is available.
Level 4		Ototoxicity-exposed personnel receive monitoring audiometry with specific notation of type(s) of ototoxic exposures in audiogram remarks section. If a Basic Training Center, soldiers receive reference audiograms before entering basic training, e.g., at Reception Battalions. Workshops are conducted to maintain sufficient numbers of audiometric technicians. Annual program compliance routinely exceeds 80 percent.
Level 5		Otoscopy is used with telemedicine technology to expedite cost effective diagnosis and referral. Annual program compliance routinely exceeds 90 percent.

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HCPEP Worksheet

12	At what level (1,2,3,4 or 5) is audiometric testing equipment maintained and in place?	
	Instructions: See paragraph 7-3 DA Pam 40-501 and the latest version of DOEHRS-HC software and Instruction Manual.	
Level 1		DOEHRS-HC audiometers are either not available or not operational. In addition, no effort has been made to replace or repair audiometers in an expeditious manner. Audiometric test booths are either not available or in such a state of disrepair that they are unserviceable for accurate audiometric testing, e.g., ventilation fan is inoperable, no lighting, missing or worn door seals, etc. No records are available on biological calibrations or noise measurements of audiometric test environments.
Level 2		DOEHRS-HC audiometers and audiometric test booths are available, but in insufficient numbers to properly service this population. Latest version of DOEHRS-HC not installed. Biological calibration records (DD 2217) are incomplete and/or there was no follow-up on discrepancies noted. Listening checks are not always performed before testing began for that day. Records of noise evaluations of audiometric test booth are incomplete.
Level 3		Sufficient numbers of DOEHRS-HC and audiometric test booths are available with latest DOEHRS-HC version installed. Audiometer electroacoustic and biological calibrations records are up-to-date and complete. Audiometer calibration problems or other malfunctions are expeditiously resolved or repaired. Listening checks are routinely performed before testing is initiated for the day.
Level 4		Mobile Audiometric Test Vehicles are maximally utilized and/or fixed audiometric testing sites are located proximal to personnel concentrations. Double-walled booths are in use for sites requiring additional noise reduction capabilities.
Level 5		Backup DOEHRS-HC audiometers have been purchased locally for workshops and/or to meet demands of heavy volume testing schedules. Audiometric booths are constantly monitored for allowable noise levels. Calibration monitors are available for each station at multi-station test sites.

Comments:

HCPEP Worksheet

13 At what level (1,2,3,4 or 5) is audiometric recordkeeping in place?	
Instructions: See paragraph 7-4, 7-6, 7-7 and 7-8 DA Pam 40-501 and latest version of DOEHRS-HC software and Instruction Manual.	
Level 1	Audiogram forms (DD 2215 and DD 2216) are not used or are entered in health records missing key data fields and/or showing evidence of widespread data fabrication or inaccurate data entries. OSHA reportable hearing loss is not reported. Appropriate personnel are not notified of positive (permanent) significant threshold shifts. Either no data are available or audiometric records are not forwarded to the corporate DOEHRS-HC Data Repository. Denominator data (number of personnel exposed to hazardous noise) have not been updated in 4 years or more.
Level 2	DD Form 2215 and DD Form 2216 are used and are generally complete, but sometimes are not entered in individual health records. OSHA reportable hearing loss is reported to the individual, but thereafter there is a breakdown in the process. For example: CA-1's or CA-2's are not forwarded to the Safety Office; OSHA logs or equivalents are not updated; DA Form 285 is not used to report military personnel, etc. Notification of STS is not always timely (within 21 days of the audiogram) or not all required parties are notified. Denominator data have not been updated in 3 years and/or are based on estimates only. Audiometric data are forwarded to the corporate database but only after prompting from USACHPPM and months of data or one type of audiometric records could be missing.
Level 3	DD Form 2215 and 2216 are used, data are generally accurately entered and DD Forms are stored in personal health records. Notification procedures for permanent (positive) STS are timely (with 21 days of the audiogram) and all required parties are notified including the individual, supervisor, Unit Hearing Conservation Officer (if any), Occupational Health Nurse if applicable) and the Safety and Occupational Health Advisory Council. OSHA reportable hearing loss (RHL) is documented at all appropriate levels. Denominator data are updated every 2 years and based on personnel rosters or actual strength data. Noise exposure data are included in health-records. Audiometric and noise exposure data are retained for the duration of an individual's employment and an additional 30 years. Employees/ Soldiers are provided copies of their audiograms and noise exposure data upon request. Data are forwarded to the corporate data base without prompting and without gaps for months or types of records that should have been included.
Level 4	Denominator data are updated annually. Manual tracking systems are in place for notification of permanent (positive) STS and OSHA RHL. Subject history files in the DOEHRS-HC are routinely screened, corrected and updated.
Level 5	Denominator data are updated more than annually. Automated tracking systems are in place for notification of STS and OSHA RHL. Individual health records are inspected and periodically updated.

Comments:

HCPEP Worksheet

14 At what level (1,2,3,4 or 5)- is health education implemented?	
<p>Instructions: See Chapter DA PAM 40-501. Because of the nature of noise- induced hearing (i.e., a relatively bloodless, slow, insidious process) an effective health education program is essential. The most effective approaches are individualized for groups or persons and integrate hearing conservation measures into the mission.</p>	
Level 1	involvement in hearing conservation health education.
Level 2	Some orientation is given to new hires. Informal, unstructured, individual counseling is occasionally conducted after the annual audiometric evaluation. Some hearing conservation training materials (e.g., pamphlets, posters, videotapes) are occasionally used but no documentation of training or assessment of worker's knowledge is conducted. Command/supervisors generally demonstrate awareness of hearing conservation responsibilities, but have limited training themselves or involvement in the health education program.
Level 3	Annual training includes effects of noise on hearing; purpose, advantages, disadvantages and attenuation of various types of hearing protectors, selection, fit, care and use of hearing protectors, purpose and procedures of audiometric evaluations; structure and elements of a hearing conservation program; mandatory requirement to wear hearing protection and consequences for failure to do so; and use of hearing protection during noise-hazardous, off-duty activities. Training is documented. Medical authority provides DA posters, films, pamphlets, recordings and slides. Training is evaluated to ensure it is effective. Command/supervisors are supportive and cooperative in the scheduling of hearing conservation health education briefings.
Level 4	Knowledgeable professionals conduct hearing conservation training. Command/supervisors attend hearing conservation training provided to their soldiers/employees. Soldiers/ employees are trained to recognize and report program deficiencies, e.g., unserviceable noise muffs or earplugs, compromised engineering noise control measures, etc. Local training programs have been developed unique to this site using photos (slides) of installation locations and/or personnel. Individualized personal approaches used, e.g., individual's audiometric results entered in pamphlet, "Prevention of Hearing Loss", next to graph, "How Old Are Your Ears?" The importance of hearing and hearing conservation measures have been incorporated into the mission, e.g., good hearing is a 360 degree warning sense, there is less of a tendency to flinch at the discharge of a weapon with hearing protection and you shoot more accurately, etc.
Level 5	Guest speakers (national experts) are imported to supplement training. Employee focus groups are used to develop training materials/programs. Training programs are built around communication/health belief models. Automated recordkeeping system provides for appropriate re-training, makeup training and modifications to training as a result of evaluations. Corporate marketing strategies include cost savings and cost avoidance outcomes.

Comments:

HCPEP Worksheet

15 At what level (1,2,3,4 or 5) are hearing conservation measures enforced?	
Instructions: See Chapter 9, DA Pam 40-501	
Level 1	Enforcement of hearing protection is non-existent. Commanders/supervisors do not ensure personnel report for scheduled audiometric testing or required health education briefings. Command concerns generally reflect cultural biases rather than medical concerns for troops and employees, e.g., hearing conservation is limited to lowering rock and rap music levels. Command displays or condones blatant disregard for hearing conservation measures and creates a culture that views such measures as an impediment to the mission.
Level 2	Command sets and communicates hearing conservation policy and goals but remains detached from program implementation efforts. Few commanders/supervisors enforce use of personal protective equipment (hearing protectors), require that their soldiers/employees report for scheduled medical surveillance (hearing tests) or comply with annual health education requirements. As a general rule, requirements to meet hearing conservation program objectives are not placed in military or civilian performance standards (performance appraisal, OER, EER) and the command does not support their inclusion. Safety and/or Industrial Hygiene conduct announced annual inspections of noise-hazardous areas but submit ineffective or no after-action reports on non-compliance.
Level 3	Current Commander has issued command emphasis letter for hearing conservation and supports hearing conservation program initiatives. Command/supervisors actively promote hearing conservation measures and Commanders and supervisors set consistent example for use of hearing protection and medical surveillance testing. Noise-exposed personnel (military and civilian) consistently use personal protective equipment, report for scheduled medical surveillance testing and attend health education training. There are instances of hearing conservation program performance statements being placed in military or civilian performance standards (Performance Appraisal, OER, EER). Safety and Industrial Hygiene conduct unannounced and announced annual inspections of noise-hazardous areas and there is a well established process for submitting reports through appropriate channel to facilitate improved compliance.
Level 4	Performance standards for civilian and military personnel routinely include performance statements regarding the enforcement of hearing protection use, compliance with scheduled medical surveillance testing (hearing tests), required health education training and the command supports recommends their inclusion. Inspection results are made available to employees and soldiers. Incentive programs encourage the reporting of undetected noise hazards, inadequate engineering controls or hearing protection and or suspected hearing loss.
Level 5	The command supports the use of disciplinary action being taken against personnel who do not use hearing protection when required. Commander's/Civilian supervisors are held accountable for their compliance with hearing conservation program objectives. Officers and/NCO's could have or have had performance evaluations (OER's/EER's) downgraded because of failure to enforce hearing conservation program objectives that may or may not be directly connected to a specific injury. The command has issued a decree, such as, "range officers will be relieved (on the spot) for failure to enforce the use of hearing protection." Noise hazard abatement is an element in senior civilian and military personnel standards. Command emphasis is consistent and sustained or has improved over time.

Comments:

HCPEP Worksheet

16 At what level (1,2,3,4 or 5) is this program being evaluated?	
Instructions: See Chapter 10 DA Pam 40-501 and latest version of DOEHRs-HC Reports.	
Level 1	Little or no collection of data or analysis of program outcomes is conducted. Audiometric data base is so corrupted by poor recordkeeping practices that reports only yield quality assurance short comings.
Level 2	Poor program participation limits value of program effectiveness reports. Reports are not forwarded to Command and Medical leadership on required schedules.
Level 3	Program participation reports are staffed through the installation medical authority to the installation commander quarterly for "no shows" and annually for overall monitoring audiometry compliance. Quality assurance reports are forwarded to the medical authority at least twice a year including earplug fitting distributions, types of hearing protection issued and negative STS. Program effectiveness measures are reported through channels at least annually and include prevalence of positive STS, military hearing profiles and potential civilian hearing loss compensation.
Level 4	Reports are forwarded with uncluttered, color graphs when appropriate and written with concise, non-technical language for the "uninformed reader." The most severe problems areas, high risks areas and high risk job classifications are readily identified. Program participation is reported at the unit and shop level.
Level 5	Epidemiological studies, e.g., relative risk-assessments with matched group, are conducted. All levels of command and the workforce are aware of monitoring audiometry compliance and prevalence of positive STS.

Comments: