

FY2010 EFAME Follow-up Report

STATE OF CONNECTICUT 23(G) PUBLIC SECTOR ONLY ENFORCEMENT PROGRAM (CONN-OSHA)

Federal Fiscal Year 2010
(October 1, 2009 to September 30, 2010)



OSHA REGION I
MARTHE B. KENT, REGIONAL ADMINISTRATOR

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I. EXECUTIVE SUMMARY

A. Introduction

Connecticut State Plan Background

State Designee: **Glenn Marshall, Commissioner of Labor¹**
Connecticut Department of Labor
200 Folly Brook Boulevard
Wethersfield, Connecticut 06109
 Program Manager: **Kenneth Tucker**

Plan approved: **January 1, 1975**

Plan converted to Public Employee Only: **October 2, 1978**

Plan Certified (**completion of developmental steps**): **August 1, 1986**

Final Approval/18(e) Determination: **Not applicable for a Public Employee Only (PEO) State Plan**

<i>FY 2007-2011 Funding History</i>						
	Federal Award (\$)	State Match (\$)	100% State Funds (\$)	Total Funding (\$)	% of State Contribution (\$)	Unmatched / Deobligation/One-Time Only (\$)
2011	650,400	650,400	881,069	2,181,869	70	
2010	650,400	650,400	986,049	2,286,849	72	+\$18,200
2009	603,300	603,300	1,170,783	2,377,383	75	NA
2008	603,300	603,300	1,004,595	2,211,195	73	NA
2007	614,000	614,000	926,240	2,154,240	71	NA

<i>FY2010 Covered Workers</i>					
State Gov Employees	Local Gov Employees	Volunteer Firefighters	Total Public Sector Employees	Private Sector Employees	Total Employees Covered
69,400	136,100	10,000	215,500	NA	215,500

¹ Governor Murphy appointed Glenn Marshall Commissioner of Labor effective March 1, 2011.

FY 2010 Staffing (Full-Time Equivalents [FTEs] as of September 30, 2010)		
23(g) Compliance and Consultation	Safety	Health
Allocated Compliance Staff	3	2
On-Board Compliance Staff	2	2
Compliance Staffing Benchmarks	Not applicable to a PEO State Plan	
Allocated Consultation Staff	1	2
On-Board Consultation Staff	1	2
Total Allocated 23g Staff	13.35	

SIGNIFICANT PROGRAM HISTORY

The Connecticut State Plan as approved in 1975 was a comprehensive State plan covering both the private and public sectors. The plan was converted to a public employee only program in 1978 as a result of legislative action initiated by the State AFL-CIO. Although not specifically contemplated by the OSH Act, OSHA agreed to approve such a limited State Plan and developed implementing regulations.

Staffing shortages, which began mid-way through FY2009, continued to affect CONN-OSHA’s performance throughout FY2010. For most of the fiscal year, the Plan operated with two vacant compliance safety and health officer (CSHO) positions (one safety and one health). This left the program operating with only two of three safety CSHOs and only one of two health CSHOs.

On top of this, the one remaining health CSHO had to take medical leave for the fourth quarter of FY2010 and the first quarter of FY2011. This vacancy was temporarily filled by one of the program’s public sector consultants until the CSHO returned in December 2010.

As of October 2010, CONN-OSHA had filled both vacant CSHO positions, as well as a vacant consultant’s position. Although CONN-OSHA is currently fully staffed in terms of compliance officers and consultants, the three new hires (two CSHOs and one consultant) face a “learning curve,” and it will take at least a few more months before they are able to perform many of their duties independently.

B. Report Summary

OVERVIEW OF THE STATUS OF CORRECTIVE ACTION IN RESPONSE TO THE FY2009 ENHANCED FAME RECOMMENDATIONS

CONN-OSHA's Corrective Action Plan (CAP) addresses each of the 22 findings cited in the state's FY2009 Enhanced Federal Annual Monitoring and Evaluation (EFAME) report. Region I and the Connecticut State Plan (CONN-OSHA) reached agreement on all corrective actions to remedy these findings. For most of the findings, Region I prescribed *more than one* corrective action. For corrective actions that have not been completed, Region I has recommended completion due dates in Section III of this report.

Through analysis of CONN-OSHA's progress in complying with its CAP, Region I has determined that the state has corrected 13 findings. The remaining nine findings are pending correction. Each of the findings that pertained to penalty reductions, informal conferences, CSHO training, establishment of debt collection procedures, and the consultation measure for verifying serious hazards abated in a timely manner, have been corrected. Three out of the four findings for abatement verification have also been met.

CONN-OSHA has also corrected two of the three findings that pertain to its Whistleblower cases. These include ensuring that the Whistleblower case files are properly organized in accordance with OSHA's Discrimination Manual and notifying employers in a timely manner of discrimination complaints. However, CONN-OSHA has advised the Region that it cannot realistically comply with the third recommendation, which states that the program should work harder to ensure that cases are completed within the 90-day guideline set by the State Activities Mandated Measure (SAMM) report.

CONN-OSHA's contention that it cannot meet this deadline has prompted the Region to revise its corrective action plan for this particular finding to address the core issue of the state's complex and lengthy 11(c) process. For example, a full, formal hearing is a part of this process and under current regulations, the time lapse from the date of complaint filing to the formal hearing is *minimally* 90 days. Region I now recommends that CONN-OSHA explore simplifying the state's 12-step 11(c) process so that Whistleblower cases can be resolved within this 90-day period.

In addition, corrections are pending for the following findings: meeting SAMM measures #1 (Complaint and Referral Response Time) and #8 (Percent of Programmed Inspections with S/W/R Violations); organizing case files in accordance with OSHA's guidelines; ensuring that diary sheets contain all required entries; lapse time from consultation closing conference to issuance of the written report to the employer; completion of the procedures that state plans are required to follow when adopting Federal Program Changes (FPCs) in a form that differs from that of the Federal; and aligning its percentages for violations classified as serious and other-than-serious more closely with Federal OSHA's percentages.

In this report, the Region has prescribed recommendations that the program must follow in order to correct each of these FY2009 findings that has persisted in FY2010. However, the Region's chief concern is over the program's percentages for violations classified as serious relative to those classified as other-than-serious, and its failure to complete its adoption of OSHA's Filed Operations Manual (FOM). Despite the fact that CONN-OSHA has followed through on implementing its corrective actions for re-aligning violation classification percentages with those of Federal OSHA's percentages, no significant improvement has occurred since FY2009.

As for completing its adoption of the FOM, CONN-OSHA has agreed to do so by no later than June 1, 2011. However, this process has gone far beyond the six months allotted by the FOM directive for completing the adoption.² Unfortunately, as discussed later in this report, the program is also several months overdue for completing adoption of the Severe Violator Enforcement Program (SVEP), which was issued in June 2010.³

NEW AREAS OF CONCERN

CONN-OSHA has not issued any willful citations since at least 2005. As is the case with classifying a percentage of violations as serious that is comparable to that of Federal OSHA, CONN-OSHA must also align its percentage for willful violations more closely with Federal OSHA's percentage. Region I is also concerned that the plan has no process safety management (PSM) trained personnel, although the state has several municipally owned and operated wastewater treatment plants that are covered by OSHA's PSM standard. Therefore, Region I recommends that the program send at least one of its CSHOs to all three segments of the OSHA Training Institute's (OTI) PSM courses. And finally, Region I has recommended that CONN-OSHA develop a site specific targeting system. CONN-OSHA currently "targets" inspections within high hazard industries by randomly selecting employers from a stack of index cards.

Section IV of this report contains a detailed discussion of these new findings, along with their accompanying recommendations. On the other hand, we found that CONN-OSHA continues to perform satisfactorily in terms of meeting its annual performance goals; identifying a relatively high number of violations per initial inspection; and concluding the fiscal year no with no Complaints Against State Program Administration (CASPs).

² According to OSHA Instruction (CPL 02-00-148), OSHA's Field Operations Manual, "States must notify OSHA within 60 days whether their enforcement policies will be identical to or different from those in this Instruction. State policies and procedures must be adopted within 6 months of issuance of this Instruction." See page 1-8.

³ Similar to OSHA's Instruction for the FOM, CPL 02-00-149, Severe Violator Enforcement Program, states must complete adoption within 6 months of issuance of this Instruction.

C. Monitoring Methodology

This FY2010 EFAME Follow-up Report focuses on CONN-OSHA's responses to the recommendations in the FY2009 EFAME report and its progress in achieving the actions specified in its CAP. For FY2009 EFAME findings that remain uncorrected, Region I has reiterated the original recommendation.

In addition to a detailed review of each of the steps (or corrective measures) the state has taken to accomplish its CAP (see Section III), this report also includes: a review of state plan data for FY2010, including a comparison of State and Federal data; a review of the SAMM report; and a review of the state's achievement of its annual performance goals as detailed in the program's FY2010 State OSHA Annual Report (SOAR).

From January 17-18, 2011, Region I conducted an onsite review of 10 of the program's FY2010 case files that were opened during the second two quarters of FY2010. Nine of these case files were selected from an IMIS scan report of all cases that were opened from April 1-December 31, 2010. In choosing these nine particular case files, Region I selected those that had elements that related to the findings identified in the FY2009 EFAME. In addition to these nine case files, Region I also reviewed the one Whistleblower case that was opened since the last onsite review that was conducted for the FY2009 EFAME.

The results of this case file review were used to help evaluate the plan's progress in successfully completing its FY2009 EFAME corrective actions. The table below lists the case files that were reviewed.

	Case Opened Date	Case Closed Date	Type of Inspection	Type of Employer/Workforce
1	7/20/2010	11/17/2010	Safety; Programmed planned	Municipality/Union work force
2	5/24/2010	9/1/2010	Safety; Referral	Municipality/Non-union work force
3	7/20/2010	1/13/2011	Safety; Programmed planned	Municipality/Union work force
4	7/20/2010	1/10/2011	Safety; Programmed planned	Municipality/Union work force
5	9/8/2010	12/15/2010	Health; Complaint	Municipality/Union work force
6	6/9/2010	10/1/2010	Health; Complaint	Municipality/Non-union work force
7	9/8/2010	11/2/2010	Safety; Fatality/Catastrophe	Municipality/Union work force
8	7/20/2010	11/17/2010	Safety; Programmed planned	Municipality/Union work force
9	8/4/2010	12/20/2010	Health; Complaint	Municipality/Union

	Case Opened Date	Case Closed Date	Type of Inspection	Type of Employer/Workforce
				work force
10	9/3/2010	_____	11(c) Whistleblower Complaint	Municipality/Union work force

II. Major New Issues

In FY2010 the Connecticut Department of Labor continued to face state budget cuts and travel restrictions. In addition, all staff members were forced to take three furlough days, as they were in FY2009. Glenn Marshall was appointed Commissioner of Labor effective March 1, 2011. He replaced Linda Agnew who was the acting Commissioner of Labor and State Plan Designee. Throughout all of FY2010 and into FY2011, the 23(g) program manager continued to perform many of the responsibilities of the CONN-OSHA Director, who died in May 2009. During the first quarter of FY2011, the state finally began the hiring process for this position, but to date, no candidate has been chosen.

III. Assessment of State Actions and Performance Improvements in Response to Recommendations from the FY 2009 EFAME

This section of the report assesses CONN-OSHA’s progress in responding to each of the recommendations from the FY2009 EFAME Report and in meeting the steps outlined in the state’s approved Corrective Action Plan. Region I has used both Integrated Management Information System (IMIS) data and/or the results of the onsite case file review to determine the status of the FY2009 EFAME findings. This section also contains recommendations for findings that have not been corrected and/or corrective measures that have not been completed or implemented.

- **Finding 1 of 22**

Finding 09-#1: Complaint & Referral Response (SAMM#1)—CONN-OSHA’s FY2009 average of 7.24 days did not meet the five-day standard for average number of days to complete a complaint inspection.

Recommendation 09-#1: CONN-OSHA must meet the five-day standard for complaint and referral response time.

Corrective Action	Status of Corrective Action	Status of Finding
CONN-OSHA will run the SAMM monthly to monitor its performance.	Ongoing. On the 15 th of each month, CONN-OSHA runs the SAMM for the previous month	Pending. The SAMM for April 2011 will show that this standard has been met.

IMIS Data:

FY2010 SAMM #1: 8.92 average days

FY2011 1st Qtr. SAMM #1: 14.83 average days

Additional Information: Until the two new CSHOs gain enough experience to conduct inspections independently, the three veteran CSHOs must handle all complaint inspections themselves. This has made it difficult for CONN-OSHA to meet the five-day standard.

Finding 10-#1: Complaint and Referral Response (SAMM #1)—CONN-OSHA’s FY2010 average of 8.92 days did not meet the five-day standard for average number of days to initiate a complaint inspection.

Recommendation 10-#1: CONN-OSHA must continue to strive to meet the five-day standard for average number of days to initiate a complaint inspection. The SAMM for April 2011 will show that this standard has been met.

- **Finding 2 of 22**

Finding 09-#2: Fatality Case Files/Diary Sheets—Case diary sheets on fatality investigations did not contain notes on important discussions that occurred between the compliance officers and the supervisors.

Recommendation 09-#2: (A) CONN-OSHA must ensure that important discussions between compliance officers and supervisors regarding fatality inspections are documented in the case file diary sheet. (B) In addition to the above, all information relevant to the fatality investigation must be documented in the case file diary sheet. CONN-OSHA is directed to the FOM, Chapter 5, Section X, which states that all case files must contain a diary sheet “that contains a ready record and summary of all actions relating to a case. It will be used to document important events or actions related to the case....”

Corrective Action	Status of Corrective Action	Status of Finding
CONN-OSHA will develop a case file review check list to help managers and CSHOs ensure that diary sheets contain all required entries.	Pending. In the fall of 2010, Region I provided CONN-OSHA with a sample case file check list. CONN-OSHA intended to modify this check list for its own use, but has not yet done so.	Pending. Case file diary sheets do not contain required documentation.
During the first week of each quarter, the manager will review 10% of each CSHO’s case files to ensure compliance with the FOM requirements for case file diary sheets.	Completed (ongoing). The manager reviews <i>all</i> of the CSHOs’ open case files on a quarterly basis and also reviews a small percentage of each CSHO’s closed case files.	

Results of Onsite Case File Review: The Region reviewed one fatality incident that did not fall under CONN-OSHA’s jurisdiction. Along with an OSHA Form 170⁴ and a newspaper article on the fatality, the file did contain a diary sheet, which simply indicated that no inspection was necessary. Diary sheets for non-fatality inspections were found to lack one or more of the following: evidence of

⁴ The OSHA-170 (Investigation Summary Report) is used to summarize the results of investigations of all events that involve fatalities. The information on this form enables OSHA to track fatalities and summarizes the circumstances surrounding the event.

supervisory approval to issue the citations; dates of citation issuance; supervisory approval to issue citations; and information regarding the mailing of Petitions for Modification of Abatement (PMAs).

Finding 10-#2: Diary Sheets—Case file diary sheets do not sufficiently document important events and actions related to the case.

Recommendation 10-#2: CONN-OSHA must ensure that *all* case diary sheets contain all entries and information required by the FOM, Chapter 5.

Finding 10-#3: Case File Review Check List—CONN-OSHA has not implemented the case file review check list, as required by its Corrective action Plan (CAP).

Recommendation 10-#3: CONN-OSHA must implement the case file review check list by May 1, 2011.

- **Finding 3 of 22**

Finding 09-#3: Case File Organization—Some of the case files' documents were not in the order established by Appendix C of ADM 03-01-005. Since the current file folders do not have paper fasteners, documents have a tendency to become shuffled out of order.

Recommendation 09-#3: (A) CONN-OSHA should use files with paper fasteners to help maintain paperwork in chronological order. (B) All CONN-OSHA staff members should review Appendix C of ADM 03-01-005, which provides detailed information on inspection case file organization.

Corrective Actions	Status of Corrective Actions	Status of Finding
All CSHOs will have completed a review of Appendix C of ADM 03-01-005 by 1/31/2011.	Completed. All CSHOs have reviewed the guidance.	Pending. Documents in case files remain disorganized.
CSHOs will use the case file review check list to ensure that case file documents are properly organized.	Pending.	
The manager will randomly select a small percentage (10%) of each CSHO's case files to evaluate case file organization.	Completed (ongoing). As of February 2011, the manager has also designated a staff member to review each case file before it is finally closed to ensure that documents are in proper order.	

Results of Onsite Case File Review: Overall, the case files were not organized in accordance with Appendix C of ADM 03-01-005. Since CONN-OSHA does not use case files with fasteners, documents are loose and shuffled out of order.

- **Finding 4 of 22**

Finding 09-#4: SAMM #8—CONN-OSHA did not meet the standard of 51.2 for percent of programmed inspections with S/W/R violations, with a percentage in FY2009 of 48.39 for health-related inspections.

Recommendation 09-#4: CONN-OSHA must strive to meet the standard for health-related inspections, and ensure that its percentage for safety-related inspections remains at or above the standard as well.

Corrective Actions	Status of Corrective Actions	Status of Finding
By 1/31/2011, all CSHOs will receive internal training on Chapter 4 of the FOM which discusses the proper procedures for citing and classifying violations.	Completed. All CSHOs completed this training on the FOM, Chapter 4, on December 21, 2010.	Pending.
CONN-OSHA will run quarterly SAMM reports to monitor its progress toward meeting this standard. If the performance measure is not met, the manager will meet with CSHOs to analyze the data and take corrective action. The SAMM reports will be discussed with the Region during quarterly meetings.	Ongoing.	
REVISION: The SAMM report for the 4 th quarter of FY2011 should reflect that the program has met the standard. <i>(This action was added to the original corrective action plan submitted by CONN-OSHA.)</i>	Pending.	

Additional Information: Due to the long standing vacancy in one of the health CSHO positions that was not filled until the end of the fiscal year, CONN-OSHA conducted only one programmed inspection related to health during the entire fiscal year (FY2010). In addition, the health CSHO who remained on staff was on medical leave for the fourth quarter of FY2010 and the first quarter of FY2011.

IMIS Data:

FY2010 SAMM #8:

Safety—69.44% (Standard-58.4%)

Health—100% (Standard-50.9%; CONN-OSHA's percentage is based on only one programmed health inspection for the entire fiscal year)

FY2011 1st Qtr. SAMM #8:

Safety—55.56% (Standard-58.3%)

Health—CONN-OSHA conducted no programmed inspections related to health during the first quarter.

Finding 10-#5: SAMM#8—CONN-OSHA did not meet the standard for safety during the first quarter of FY2011 (but did exceed the standard for safety in FY2010). For health, CONN-OSHA has only conducted one programmed inspection in the past several months so the program’s performance will have to be monitored in subsequent quarters of FY2011.

Recommendation 10-#5: CONN-OSHA must meet the standards for SAMM#8 for both safety and health inspections. The SAMM report for the 4th quarter of FY2010 will reflect that CONN-OSHA has met the standards.

- **Finding 5 of 22**

Finding 09-#5: Classifying/Grouping Violations—CONN-OSHA’s FY2009 percentage for serious violations was too low compared to its percentage for other-than-serious violations. While CONN-OSHA’s percentages were 28 for serious and 70 for other, Federal OSHA’s percentages were 77 for serious and 19 for other.

Recommendation 09-#5: (A) Review Chapter 4 of the FOM, which discusses the factors that determine whether a violation should be classified as serious, or other-than-serious. (B) Adhere to the FOM guidelines for grouping violations.

Corrective Actions	Status of Corrective Actions	Status of Finding
All CSHOs will complete training on Chapter 4 of the FOM, which discusses the proper procedures for classifying and grouping violations.	Completed.	Pending. The Inspection Summary report for the 3 rd quarter will reflect that the program’s percentages are comparable to Federal OSHA’s percentages.
CONN-OSHA will run quarterly Inspection Summary reports to monitor its violation classification percentages.	Ongoing.	
CONN-OSHA will make these reports available to the Region and the results will be discussed during quarterly meetings.	Ongoing.	
The manger will continue to review all probability and severity assessments to verify compliance with the FOM.	Ongoing.	

Results of Onsite Case File Review: In some of the case files, violations were misclassified as other-than-serious, when they should have been classified as serious.

In the FY2009 EFAME, Region I found that CONN-OSHA was improperly grouping some violations that should stand alone. This ultimately results in fewer violations cited, which in turn results in penalty reductions for employers.

During the Region's most recent case file review, conducted in January 2011, the Region did find some violations that were improperly grouped, but the program manager insisted that the program's CSHOs were not grouping violations for the purpose of reducing penalties for employers.

Region I will closely monitor CONN-OSHA's practice of grouping violations during subsequent case file reviews.

IMIS Data:

FY2010 Enforcement Data:

CONN-OSHA's percent *serious*—45; percent *other*—55; Federal OSHA's percent *serious*—77; percent *other*—18.

FY2011 First Qtr. Enforcement Data:

CONN-OSHA's percent *serious*—26; percent *other*—74; Federal OSHA's percent *serious*—77; percent *other*—18.

Finding 10-#6: Classifying/Grouping Violations—CONN-OSHA's percentage for all violations classified as serious continue to be too low (in comparison to Federal OSHA's percentage) and its percentage for all violations classified as other-than-serious continues to be too high.

Recommendation 10-#6: CONN-OSHA must align more closely with Federal OSHA's percentages for violations classified as serious and those violations classified as other-than-serious. The Inspection Summary report for the 3rd quarter of FY2011 will show that CONN-OSHA's percentages for serious and other-than-serious violations are within a few percentage points of Federal OSHA's.

- **Finding 6 of 22**

Finding 09-#6: Penalty Reduction—Most of CONN-OSHA's informal settlement agreements resulted in a penalty reduction of approximately 60 %. According to the IMIS Enforcement Report of 11/19/2009, CONN-OSHA had an average penalty reduction of 57.1%.

Recommendation 09-#6: (A) CONN-OSHA should reserve penalty reductions in the 60 percent range only for those employers who provide adequate proof that abatement is complete for each cited violation, and that this abatement verification is provided within the dates indicated on the citation. This certification must meet the requirements of OSHA's abatement verification regulation, §1903.19, as discussed in Chapter 7 of the FOM. Employers who request later abatement dates and present valid grounds for making such a request may also be considered for the 60 percent reduction. (B) The supervisor who conducts the informal conference must be sure to document reasons for granting penalty reductions (and extended abatement dates) on the case file diary sheet.

Corrective Actions	Status of Corrective Actions	Status of Finding
CONN-OSHA is now adhering to the guidelines established by OSHA for penalty reductions given as part of the informal settlement.	Completed as of 10/1/2010.	Corrected. The IMIS Enforcement Report for January 2011 reflects that CONN-OSHA's average penalty reduction is more in keeping with Federal OSHA's.
Region I will use monthly IMIS reports to track CONN-OSHA's success in adhering to these guidelines.	Ongoing.	

Additional Information: As of 10/1/2010, CONN-OSHA began adhering to the guidelines in Federal OSHA's memorandum of April 22, 2010, entitled "Administrative Enhancements to OSHA's Penalty Policy." In accordance with this policy, CONN-OSHA will offer no more than a 30% penalty reduction to employers at informal conferences. For employers with 250 employees or fewer, CONN-OSHA will be authorized to offer an additional 20 percent reduction if that employer agrees to retain CONN-OSHA's 23(g) consultation program.

Results of Onsite Case File Review: A review of the cases for which informal conferences were held showed that CONN-OSHA was meeting the guidelines set by Federal OSHA.

IMIS Data:

FY2010: CONN-OSHA's percent penalty reduced—50.6
 FY2011 First Quarter: CONN-OSHA's percent penalty reduced—0.00
 January 2011: CONN-OSHA's percent penalty reduced—0.00

- **Findings 7-11 of 22**

Finding 09- #7: SAMM#6, Abatement Verification—CONN-OSHA's FY2009 percentage of 97.86 for S/W/R violations verified timely did not meet the standard of 100 percent.

Recommendation 09-#7: CONN-OSHA must meet this standard.

Finding 09-#8: Abatement Verification—In some of the municipalities where multiple departments were inspected, just one of the case files contained all of the other departments' documentation of abatement.

Recommendation 09-#8: CONN-OSHA must follow ADM 03-01-005, Appendix C, Section II, which states that: "An inspection case file shall be composed of all essential documents relating to a single inspection of an establishment."

Finding 09-#9: Abatement Verification—Some of the case files had been closed without adequate documentation of abatement.

Recommendation 09-#9: (A) CONN-OSHA must follow Chapter 7 of the FOM which requires that the case file must remain open until the agency is satisfied that abatement has occurred. Also, if abatement was not completed, the case file should have notes indicating the circumstances or reasons. (B) CONN-OSHA must also follow the section of Chapter 7 of the FOM which requires that the closing of a case file without abatement certification(s) must be justified through a statement in the case file by the Area Director (or a designee).

Finding 09-#10: Abatement Verification—Some of the cases lacked written certification of abatement while others contained abatement letters that did not document abatement for all citations issued. In addition, some case files lacked written hazard communication programs, evidence of training and an emergency action plan.

Recommendation 09-#10: CONN-OSHA should thoroughly review Chapter 7 of the FOM on Abatement Documentation, particularly Section B, which relates to Adequacy of Abatement Documentation.

Finding 09-#11: Abatement Verification—Some of the case files did not contain Petitions for Modification of Abatement (PMAs).

Recommendation 09-#11: CONN-OSHA must ensure that all documentation related to PMAs is contained in the relevant case files, such as copies of the petition itself, as well as CONN-OSHA's approval (or denial) of the PMA, and any written objections by employees to the PMA. Refer to Chapter 7 of the FOM, Section III, for more information on PMAs.

Corrective Actions	Status of Corrective Actions	Status of Findings
The SAMM for March 2011 should reflect that CONN-OSHA has met the 100 percent standard.	Pending.	09-#7: Abatement Verification (SAMM #6)— Pending.
CONN-OSHA will run monthly SAMM reports to monitor its progress toward meeting the 100 percent standard for SAMM #6. If the performance measure is not met, the manager will meet with CSHOs to analyze the data and take corrective action.	Ongoing.	09-#8: Finding 09-#8: Abatement Verification (use of just one case file for documents relating to inspections of multiple departments)— Corrected.
All CSHOs will complete internal training on Chapter 7 of the FOM, Post Citation Procedures and Abatement Verification, by 1/31/2011.	Completed on 1/5/2011.	09-#9: Abatement Verification (case files closed without adequate documentation of abatement)— Corrected
By 1/31/2011, CONN-OSHA will develop a system for tracking abatement due dates.	Completed (ongoing). CONN-OSHA has developed a system for tracking abatements that varies somewhat from the procedure described in the corrective action	09-#10: Abatement Verification (case files lacked written certification of abatement)— Corrected.

Corrective Actions	Status of Corrective Actions	Status of Findings
	<p>plan, but which is acceptable to the Region.</p> <p>On a weekly basis, CONN-OSHA runs two reports to monitor its progress in obtaining timely verification of abatements (including PMAs): One report lists abatements that are due for completion within the next 3-10 days. This report is distributed to all CSHOs, who then follow up with the employers. The other report lists citations with abatements overdue, and this report is also distributed to all CSHOs for follow-up with the employer.</p>	<p>09-#11: Abatement Verification (case files lacked PMA documentation)— Corrected.</p>
<p>CONN-OSHA will cite employers who do not provide adequate documentation of abatement under §1903.19(c).</p>	<p>Pending. CONN-OSHA has not had to cite an employer under this provision.</p>	
<p>On a quarterly basis, the manager will randomly review a small percentage (10%) of each CSHO's inspection case files.</p>	<p>Completed (ongoing).</p>	
<p>CSHOs will use the case file review check list to ensure that abatement has occurred and is properly documented before the case file is closed.</p>	<p>Pending. CONN-OSHA will modify and implement by May 1, 2010.</p>	
<p>CSHOs will immediately begin using a PMA tracking sheet (a sample of which has been provided by Region I) that ensures that employers follow all procedures when filing and abating violations under PMAs.</p>	<p>Pending. CONN-OSHA will modify and implement by June 1, 2011.</p>	

Results of Onsite Case File Review: A review of case files shows that CONN-OSHA is:

- properly tracking abatements and obtaining abatement verification timely (**Finding 09-#7**);
- enclosing copies of abatement letters in all appropriate case files (**Finding 09-#8**);
- properly closing cases after obtaining required abatement information (**Finding 09-#9**);
- obtaining proper abatement certifications where required (**Finding 09-#10**);

- adequately reviewing PMA requests and properly tracking those requests and ensuring that abatement information is received from the employer and recorded in the IMIS system (**Finding 09-#11**).

IMIS Data:

SAMM#6—CONN-OSHA met the standard of 100 % for FY2010 and during the first quarter of FY2011 (**Finding 09-#7**).

Finding 10-#7: PMA Tracking Sheet—CONN-OSHA has not yet implemented the sample tracking sheet developed by Region I for ensuring that abatement information is received from the employer by the required due dates.

Recommendation 10-#7 (for 09-#11): CONN-OSHA must implement use of the PMA tracking sheet by June 1, 2011.

- **Findings 12-14 of 22**

Finding 09-#12: Informal Conferences—Several of the case files that had informal conferences did not contain documentation that labor organizations were ever notified of the informal conference.

Recommendation 09-#12: (A) CONN-OSHA must ensure that labor organizations receive adequate and timely notification of informal conferences, and that each case file contains adequate documentation of labor organization notification. (B) In addition, in accordance with Chapter 5 of the FOM, Section II, (B), CSHOs must complete the sections of the OSHA 1A that relate to labor organizations, such as:

- ◆ the names and addresses of all organized labor groups;
- ◆ the names, addresses and phone numbers of authorized representatives of employees; and
- ◆ the employer representatives contacted and the extent of their participation in the inspection.

Finding 09-#13: Informal Conferences—Some of the case files did not contain notes or other documentation related to informal conferences and/or informal settlement agreements.

Recommendation 09-#13: CONN-OSHA must ensure that documentation of informal conferences and informal settlement agreements is included in all case files where appropriate. If an informal conference was held that pertains to more than one municipal department, then each department's case file should contain notes, diary sheet entries and other documentation related to the informal conference and the informal settlement agreement (see Chapter 7, Section II (F), of the FOM).

Finding 09- #14: Informal Conferences—Some of the case files’ diary sheets did not contain entries with regard to the dates, and location etc. of the informal conference.

Recommendation 09-#14: CONN-OSHA must ensure that diary sheets record the scheduling information for informal conferences (see Chapter 7, Section II (D), of the FOM).

Corrective Actions	Status of Corrective Actions	Status of Findings
All CSHOs will have completed informal training on Chapter 7 of the FOM, Post Citation Procedures and Abatement Verification, by January 31, 2011, and will initial a checklist verifying that they have completed this training.	Completed.	Finding 09-#12: Informal Conferences (some of the case files did not contain documentation of labor union notification of the informal conference)— Corrected.
CSHOs will use the case file review check list to ensure that union notification is contained in the case files.	Pending.	Finding 09-#13: Informal Conferences (some of the case files did not contain notes or other documentation related to informal conferences and/or informal settlement agreements)— Corrected.
The manager will review a small percentage (10%) of each CSHO’s inspection case files to ensure that they contain documentation of union notification.	Completed (ongoing).	Finding 09-#14: Informal Conferences (some of the case files’ diary sheets did not contain entries with regard to the dates and location, etc. of the informal conference)— Corrected.
The manager will review each case file.	Completed (ongoing).	Finding 09-#14: Informal Conferences (some of the case files’ diary sheets did not contain entries with regard to the dates and location, etc. of the informal conference)— Corrected.

Results of Onsite Case File Review: Prior to holding the informal conference, the program manager verifies that the Notice of Informal Conference is posted at the employer’s work site. A copy of the Notice was included in each case file where an informal conference was conducted (**Finding 09-#12**). Copies of informal conference notes were present in the case files, along with sign-in sheets for those who participated. The supervisor who conducted the informal conference made notes on copies of the citations (**Finding 09-#13**). Entries were made on the diary sheets regarding the dates, time and location of the informal conferences (**Finding 09-#14**).

- **Finding 15-17 of 22**

Finding 09-#15: Whistleblower Program—In two of the cases that were reviewed, the lapse time between the date the case was filed and notification of the employer was up to five weeks.

Recommendation 09-#15: The employer must be notified in a timely manner to accelerate the mediation process.

Finding 09-#16: Whistleblower Program—None of the case files that were examined were assembled in accordance with OSHA's Discrimination Manual. The case files had some paperwork contained loosely in the files.

Recommendation 09-#16: The state's Office of Program Policy (OPP) should assemble the discrimination case files in accordance with OSHA's Discrimination Manual, which requires the inclusion of a case activity worksheet (OSHA 87). In addition, an activity/telephone log must be accurately documented with telephone calls and significant events that occur with respect to the case.

Finding 09-#17: Whistleblower Program—Only one-third of CONN-OSHA's discrimination cases are completed within 90 days. The SAMM standard is 100 percent.

Recommendation 09-#17: The plan should work harder to ensure that cases are completed within the 90-day guideline.

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OSHA REGION I

Corrective Actions	Status of Corrective Actions	Status of Findings
By 12/1/2010, the manager will formally notify the Office of Program Policy (OPP) that it should reduce the length of time between the date the case was filed and when the employer is notified.	Completed.	Finding 09-#15: Whistleblower program (the lapse time between the date the case was filed and notification of the employer was up to five weeks)— Corrected.
All Whistleblower case files will be monitored by the manager to monitor lapse time. If lapse time is found to be excessive, the CONN-OSHA program manager will discuss this finding with OPP and also notify Region I.	Completed (ongoing).	Finding 09-#16: Whistleblower program (case files were not organized in accordance with OSHA's Discrimination Manual)— Corrected.
The CONN-OSHA program manager will document his findings with respect to lapse time and discuss them with the Region during quarterly meetings.	Completed (ongoing).	Finding 09-#17: Whistleblower program (Only one-third of CONN-OSHA's discrimination cases are completed within 90 days. The SAMM standard is 100 percent.)— Pending.
The principal attorney will ensure that all Whistleblower case files will conform to the Discrimination Manual's requirements for format by 12/31/2010. Region I will review all Whistleblower case files quarterly to ensure compliance.	Ongoing.	
REVISION: Realizing that the 90-day deadline is not realistic under the lengthy process prescribed by Connecticut's Uniform Administrative Procedure Act, CONN-OSHA will explore procedural, regulatory, and statutory changes to its system for handling discrimination cases to reduce its complexity and resolve issues more expeditiously. <i>(This action was added to the original corrective action plan submitted by CONN-OSHA.)</i>	Pending.	

Results of Onsite Case File Review: Since Region I conducted the case file review for the FY2009 EFAME, only one Whistleblower case has been filed. The filing date was September 9, 2010 and the employer was notified on September 20, 2010. This lapse time was less than two weeks, and is acceptable (**Finding 09-#15**). The file was properly organized; a complete diary sheet was present and the contents of the file were properly secured (**Finding 09-#16**). The one Whistleblower case that was opened in FY2010 and was filed on September 9, 2010, has not yet been closed (**Finding 09-#17**).

Finding 10-#8: Whistleblower Program—Due to its complex regulatory system for handling Whistleblower cases, CONN-OSHA has advised that it cannot realistically meet the 90-day deadline for completing Whistleblower cases.

Recommendation 10-#8: CONN-OSHA should explore the possibility of simplifying the state’s procedures for handling Whistleblower complaints. CONN-OSHA should discuss any results of its inquiry into this matter during the fourth quarterly meeting with Region I.

- **Finding 18 of 22**

Finding 09-#18: Standards/Program Change Adoptions—CONN-OSHA did not complete a review of the FOM to determine which provisions, if any, the program would need to modify, since the FOM pertains chiefly to Federal OSHA private sector enforcement, and CONN-OSHA is a public sector employee only state plan.

Recommendation 09-#18: CONN-OSHA should complete its review of the FOM. This includes identifying any provisions that may require change, drafting the proposed changes, and forwarding the entire package to Region I for review and approval. Once the process has been completed, implementation of the FOM should begin immediately.

Corrective Actions	Status of Corrective Actions	Status of Finding
<p>REVISION: CONN-OSHA will complete adoption of the FOM by June 1, 2011 in accordance with the following requirements, as stated in OSHA Instruction CPL 02-00-148, OSHA’s Field Operations Manual: Each State must submit a copy of its revised Field Operations Manual as a plan change supplement to OSHA, preferably in electronic format, with a comparison document clearly identifying any differences from the revised FOM, within 60 days of adoption” <i>(emphasis added) (This action, which requires CONN-OSHA to meet a target date of June 1, 2011 for completing its implementation of the FOM, was added to the original CAP submitted by CONN-OSHA.)</i></p>	<p>Ongoing.</p>	<p>Pending.</p>
<p>On a quarterly basis, the Region will review CONN-OSHA’s timeliness and performance with regard to following all federally mandated procedures for</p>	<p>Ongoing. Region I discussed CONN-OSHA’s actions with regard to FPCs and standard actions during its first quarterly</p>	

Corrective Actions	Status of Corrective Actions	Status of Finding
responding to, and adopting, Federal Program Changes (FPCs) and Federal Standard Actions. Region I will discuss its review with CONN-OSHA during the quarterly meetings.	meeting with the program, and will continue to do so each quarter.	

Finding 10-#9: Standards/Program Change Adoptions—CONN-OSHA has not fully implemented the FOM.

Recommendation 10-#9: CONN-OSHA must complete a review of the FOM and submit a comparison document (which describes the changes it has made to the Federal FOM) to the Region by June 1, 2011. Once the Region approves this comparison document, CONN-OSHA may fully implement the FOM.

- **Finding 19 of 22**

Finding 09-#19: Consultation—CONN-OSHA did not meet the 100 percent standard for verifying hazards corrected in a timely manner (within 14 days of the latest correction due date).

Recommendation 09-#19: CONN-OSHA must meet the standard of 100 percent to ensure that workers are protected from identified hazards.

Corrective Action	Status of Corrective Action	Status of Finding
CONN-OSHA will run a Mandated Activities Report for Consultation (MARC) quarterly, as well as a local report for Uncorrected Hazards, to monitor the program's performance with regard to this measure. If the performance measure is not being met, the manager will meet with consultants to analyze and correct problems that are causing deficiencies. CONN-OSHA anticipates that the MARC for the second quarter of FY 2011 will reflect that this standard has been met.	Completed (ongoing).	Corrected.

IMIS Data: The 100 % standard has been met for FY2010 as well as the first quarter of FY2011.

- **Finding 20 of 22**

Finding 09-#20: Debt Collection Procedures—CONN-OSHA has not established formal debt collection procedures.

Recommendation 09-#20: CONN-OSHA should adopt formal debt collection procedures based on those set forth in Chapter 6 of the FOM.

Corrective Action	Status of Corrective Action	Status of Finding
CONN-OSHA will have implemented a formal debt collection procedure by 1/31/2011, which Region I will review during the second quarterly meeting.	Completed.	Corrected.

- **Finding 21 of 22**

Finding 09-#21: CSHO Training—In accordance with Training and Education Directive (TED) 01-00-018, the program’s compliance officers still need to complete Course #2450 (Evaluation of Safety and Health Management Systems) and course #1310 (Investigative Interviewing Techniques).

Recommendation 09-#21: All compliance officers must complete this training as soon as possible.

Corrective Action	Status of Corrective Action	Status of Finding
CONN-OSHA will register the identified CSHOs in these courses in FY2011.	Completed. The three compliance officers identified as requiring completion of the Evaluation of Safety and Health Management Systems and Investigative Interviewing Techniques have been scheduled to take the course through the Office of Training and Education. These employees have been waitlisted for these courses.	Corrected. The three CSHOs have been registered for the training courses but are currently on a waiting list to attend.

Additional Information: The table below shows the courses in which the three CSHOs are enrolled.

	Course #1310 Investigating Interviewing Techniques	Course #2450 Evaluation of Safety and Health Management Systems
CSHO I	March 22-25, 2011	September 20-23, 2011
CSHO II	May 10-13, 2011	April 19-22, 2011
CSHO III	May 17-20, 2011	June 21-24, 2011
<i>All courses are scheduled to be conducted at the OSHA Training Institute in Arlington Heights, IL</i>		

- **Finding 22 of 22**

Finding 09- #22: Average Number of Days between Consultation Closing Conference and Issuance of Written Report—CONN-OSHA’s FY2009 year-end average of 22.33 days was just a bit higher than the standard of 20 days.

Recommendation 09-#22: CONN-OSHA must meet the 20-day standard for average number of days between consultation closing conference and issuance of the written report to the employer.

Corrective Action	Status of Corrective Action	Status of Finding
On a quarterly basis, CONN-OSHA will run an ACE report to monitor the program’s performance with regard to this measure. If the performance measure is not being met, the manager will meet with consultants to analyze and correct problems that are causing deficiencies. CONN-OSHA anticipates that the ACE report for the second quarter of FY2011 will reflect that this standard has been met.	Completed. CONN-OSHA ran the ACE report for the first quarter on 12/31/2010; Region I will evaluate CONN-OSHA’s performance on this measure quarterly.	Pending. Status to be determined by the results of the second quarter ACE report.

Additional Information: CONN-OSHA’s ACE reports provide the following information.
 FY2010: CONN-OSHA met the 20-day standard for safety visits (16.71 days) but slightly exceeded the standard for health visits (21.19 days).
 FY2011 1st Quarter results: CONN-OSHA met the 20-day standard for safety visits (9.4 days) but far exceeded the standard for health visits (40 days).

Finding 10-#10: Average Number of Days between Consultation Closing Conference and Issuance of the Written Report—CONN-OSHA did not meet the 20-day standard for health visits.

Recommendation 10-#10 (for 09-#22): CONN-OSHA should meet the 20-day standard for safety and health visits.

IV. FY2010 State Enforcement

This section provides an assessment of the State’s enforcement related functions, and focuses on inspections, violations, abatement verification, penalties and citation issuance. Information sources include the CONN-OSHA FY2010 SOAR (**Appendix E**); Federal/State IMIS comparison data for FY 2010 and the first quarter of FY2011 (**Appendix C**); and the SAMM report for FY 2010 and the first quarter of FY2011 (**Appendix D**). FY2010 year-end data (and in some cases FY2011 first quarter data) is compared to data from previous years in order to show trends in performance. This data was provided by OSHA’s Directorate of Cooperative and State Programs (DCSP), Office of State Programs (OSP), and the dates that these reports were run are shown in the table below.

	<i>FY2010 Federal/State IMIS Data</i>	<i>FY2010 SAMM</i>	<i>FY2011 First Quarter Federal/State IMIS Data</i>	<i>FY2011 First Quarter SAMM</i>
Report Run Dates	11/9/2010	11/12/2010	1/3/2011	1/28/2011

Where relevant, Region I also used information gained from the onsite case file review to help evaluate some of the enforcement related functions discussed below. In addition to new findings and recommendations that have been made as a result of this evaluation, the Region references some of the continuing recommendations made in Section III (when discussing deficiencies that were cited in the FY2009 EFAME and that persisted in FY2010).

INSPECTIONS

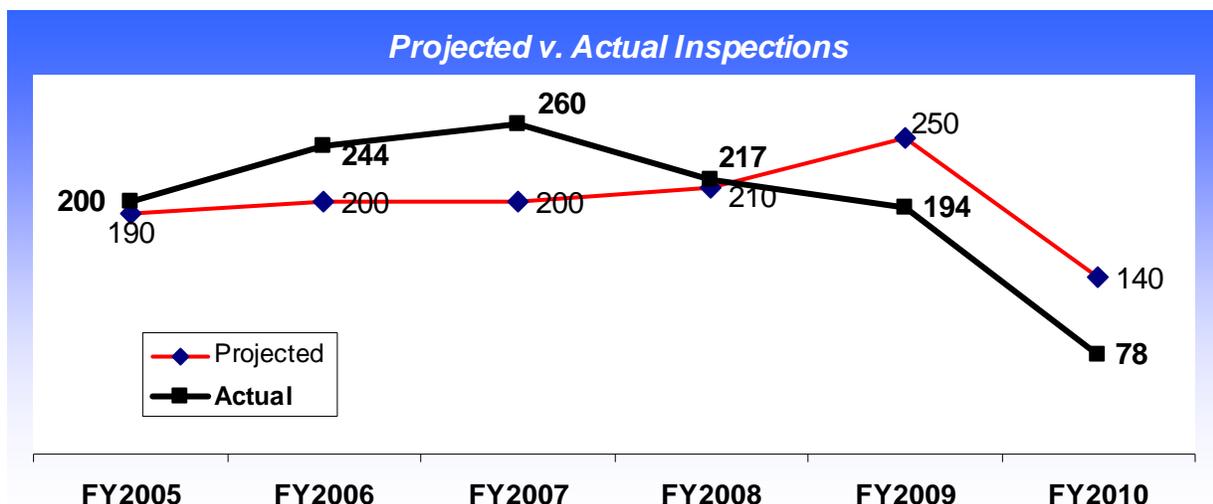
PROJECTED V. ACTUAL

During the reporting period, CONN-OSHA completed a total of 78 inspections out of 140 projected. The table below breaks out of the number of inspections projected and completed by safety and health.

FY2010 Inspections			
	Projected	Actual	Actual as Percent of Number Projected
Safety	100	51	51
Health	40	27	68
TOTAL	140	78	56

The fact that CONN-OSHA operated for most of the fiscal year with two vacant CHSO positions was the major factor in the program falling short of its inspection goals. In addition to these two vacancies, another CSO (health) was on medical leave for several months during the fiscal year.

In past years, CONN-OSHA's annual inspection goals and actual results steadily increased, as shown in the chart below. Unfortunately, this scenario started to change in FY2009, when the plan began experiencing staffing vacancies.



During the first quarter of FY2011, CONN-OSHA completed 14 inspections, or only seven percent of its total of 200 inspections projected for the year. Although the plan began the fiscal year with a full slate of CSOs, the two new hires did not have sufficient experience to conduct inspections independently during the first quarter, which contributed to such a low first quarter total.

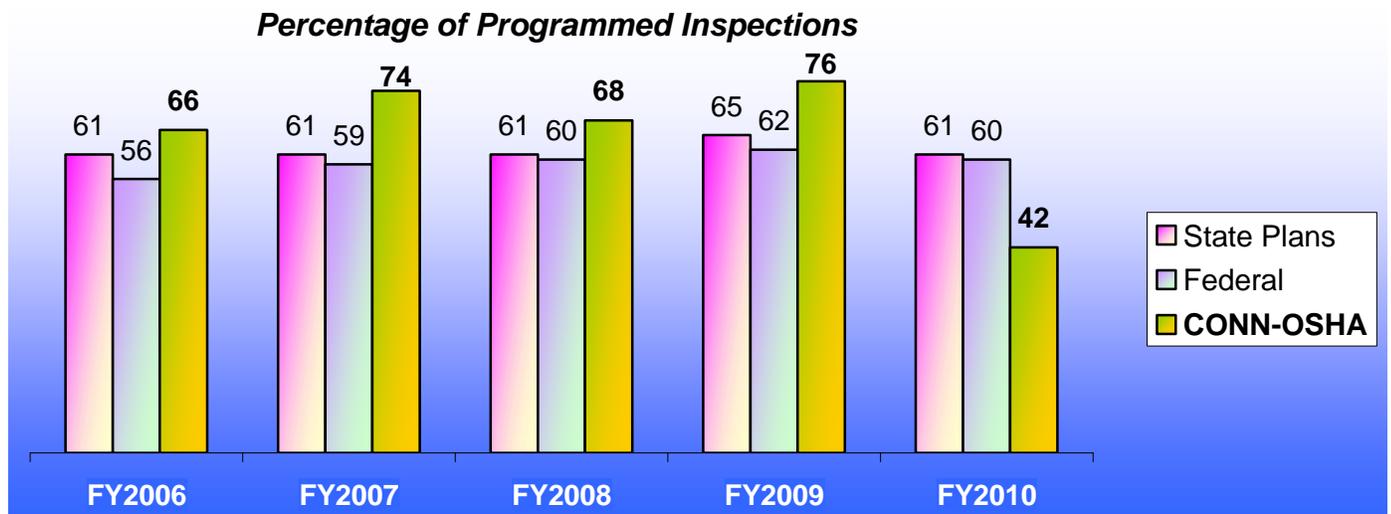
INSPECTIONS BY TYPE

The table below compares the number of programmed inspections to unprogrammed inspections (which include accidents, complaints, referrals, follow-up, unprogrammed related, and other) conducted by CONN-OSHA over the past five fiscal years. In FY2010, CONN-OSHA's percentage of programmed inspections dropped significantly compared to previous years. In FY2009, 76 percent of CONN-OSHA's inspections were programmed, which was the program's highest percentage for this category of inspection between

FY2005 and FY2009. In FY2010, only 33 out of 78 inspections, or 42 percent, were programmed.

<i>Inspections</i>	<i>FY2006</i>	<i>FY2007</i>	<i>FY2008</i>	<i>FY2009</i>	<i>FY2010</i>	<i>5-year Average</i>
<i>Programmed</i>	162	196	148	148	33	137
<i>Unprogrammed</i>	82	70	69	46	45	62
TOTAL	244	266	217	194	78	200
<i>Percent Programmed</i>	66	74	68	76	42	65
<i>Percent Unprogrammed</i>	34	26	32	24	58	35

From FY2006 to FY2009, the program’s percentage for programmed inspections exceeded both the Federal and combined state plan percentages. However, in FY2010, CONN-OSHA fell far below both the Federal and combined state plan percentages, as shown in the chart below.



As shown in the next table, 36 percent of CONN-OSHA’s total number of inspections consisted of complaints. This percentage for complaint inspections exceeded Federal OSHA’s percentage (20 percent). In FY2009, CONN-OSHA conducted five more complaint inspections than in FY2010, but its *percentage* for complaint inspections (17 percent) was much lower than in FY2010.

<i>FY2010 Inspection Types</i>		
Inspection Type	Number	Percent of Total
<i>Fatality/Catastrophe</i>	3	4
<i>Complaint</i>	28	36
<i>Referral</i>	13	17
<i>Unprogrammed Related</i>	1	1

In FY2010, CONN-OSHA was severely limited by the fact that it had two CSHO vacancies for most of the fiscal year and another CSHO was on medical leave for several months. As a result, CONN-OSHA had to devote most its manpower to responding to complaints, and in FY2010, the plan’s ratio of complaint inspections to programmed inspections was much higher than in previous years.

Finding 10-#11: Percentage of Programmed Inspections—CONN-OSHA’s percentage for programmed inspections was far below Federal OSHA’s percentage in FY2010.

Recommendation 10-#11: CONN-OSHA must align its percentages for programmed (and unprogrammed) inspections with Federal OSHA’s.

COMPLAINT ACTIVITY MEASURES

SAMM measures 1-4 provide an assessment of the program’s efficiency in handling complaint inspections.

SAMM#1 measures the average number of days it takes the program to initiate complaint inspections. The standard for this measure is five-days. As shown in the table below, CONN-OSHA’s average number of days has decreased considerably (by more than 58 percent) since FY2006. However, the State did not meet the standard in FY2010. FY2011 first quarter results show that the program’s performance declined even further, with an average of 14.83 days.

<i>Average Number of Days to Initiate Complaint Inspections (SAMM #1)</i>					
	FY 2006	FY 2007	FY 2008	FY2009	FY2010
<i>Avg. No. of Days</i>	21.40	9.47	9.94	7.24	8.92

Since CONN-OSHA did not meet the standard in FY2009, this deficiency was a finding in the FY2009 EFAME, and continues as a finding for FY2010 (Refer to **Recommendation 10-#1** for **09-#1** in Section III of this report.)

SAMM #2 measures the average number of days to initiate complaint investigations; SAMM#3 measures the percent of complaints where complainants were notified on time. In

FY2010, CONN-OSHA did not meet the standard of one day for responding to complaint investigations, with an average of 5.50 days. For SAMM #3, CONN-OSHA notified 100 percent of all 26 complainants in a timely manner, and initiated inspections in all of the complaints filed. In FY2009, CONN-OSHA met the standard for both measures.

Finding 10-#12: Average Number of Days to Initiate Complaint Investigations—With an average of 5.50 days, CONN-OSHA did not meet the one-day standard for SAMM#2.

Recommendation 10-#12: CONN-OSHA must meet the one-day standard for average number of days to initiate complaint investigations (SAMM #2).

SAMM #4 measures the percent of imminent danger complaints and referrals responded to in one day. The standard is 100 percent. In FY2010, CONN-OSHA had no imminent danger complaints or referrals.

FATALITIES

In FY2010, CONN-OSHA conducted three fatality investigations, the highest number since at least FY2006, as shown in the chart below.

Annual Number of Fatality Investigations	
FY2004	2
FY2005	2
FY2006	2
FY2007	1
FY2008	0
FY2009	0
FY2010	3

As shown in the table below, out of six fatality events reported, CONN-OSHA determined that only three fell under the program's jurisdiction. In one of the three fatality events, two fire fighters perished while responding to a house fire. The other two fatality events involved a police officer who was struck and killed by a vehicle while he was performing crowd control duties and an animal control officer who collapsed while responding to a report concerning an aggressive dog.

Fatality/Catastrophe Tracking Report (FY2010)	
NUMBER OF:	
• Events Reported	6
• Inspections Conducted	3
AVERAGE LAPSE TIME FOR:	
• Date Reported to Inspection	1.67

Each investigation was initiated as soon as possible after the fatality occurred to determine whether or not a workplace condition caused the event. However, CONN-OSHA experienced a delay in investigating the death of the two firefighters until the state fire marshal concluded its investigation. As a result, CONN-OSHA did not meet its goal of investigating fatalities within one work day of notification. The plan also did not meet its strategic plan baseline of 0.34 days (which is based on a three-year average of lapse time from date reported to inspection).

FATALITY INVESTIGATIONS/DIARY SHEETS

In the FY2009 EFAME, Region I found that case diary sheets for fatalities did not contain notes on important discussions related to the case that occurred between the CSHO and the supervisor, and recommended that all information relevant to the fatality investigation must be contained in the diary sheet.⁵ The Region also recommended that CONN-OSHA review Chapter 5 of the FOM, which discussed the type of information that is to be recorded on all case diary sheets.

During the Region’s recent onsite case file review, one fatality case file was reviewed, but this particular fatality was determined by the program to be outside of its jurisdiction. The file did contain a diary sheet, which simply indicated that no inspection was necessary. In more than a few of the non-fatality case files reviewed by the Region, in many instances, diary sheets were found to be deficient in terms of containing a record of all actions related to the case. (Refer to **Recommendation 10-#2** for **09-#2** in Section III).

In order to help ensure that case diary sheets contain all required entries, CONN-OSHA intended to modify a sample case file review check list provided by the Region several months ago. However, CONN-OSHA has not yet modified this checklist for its own use. (Refer to **Recommendation 10-#3** for **09-#2** in Section III).

INSPECTION TARGETING

As discussed earlier in this report, CONN-OSHA targeted six public operations (three state and three municipal) for enforcement, consultation and training and education activities in each year of its five-year strategic plan. CONN-OSHA selected these six operations based

⁵ In FY2009, CONN-OSHA did not conduct any fatality investigations. The information that fatality diary sheets typically do not contain notes on important discussions between the CSHO and the supervisor was learned from interviews with the program’s CSHOs.

on the fact that their average DART rates for fiscal years 2004 through 2006 were higher than those of other public sector operations.

The injury/illness incidence rates for Connecticut’s public sector employees continue to be higher than those experienced by the state’s private sector employees, as has been the case over the past few fiscal years (see table below).

<i>Injury and Illness Rates (Connecticut Public and Private Sectors)⁶</i>				
<i>Three-year comparison</i>				
<i>Year</i>	<i>State and Local Government</i>		<i>Private Sector</i>	
	<i>TRC</i>	<i>DART</i>	<i>TRC</i>	<i>DART</i>
<i>2007</i>	8.7	4.4	4.8	2.6
<i>2008</i>	8.4	4.3	4.6	2.5
<i>2009</i>	7.8	4.3	4.2	2.3

As in previous fiscal years, CONN-OSHA exceeded its annual goal of conducting at least 25 percent of all of its inspections in the six public sector industries that the program has identified in its strategic plan as being the most hazardous. Out of a total of 78 inspections that the program completed in FY2010, 26 (or 33 percent) were conducted in the targeted state and municipal government industries. Although CONN-OSHA consistently reaches its annual performance plan goal of conducting at least 25 percent of its total number of inspections in the targeted industries, the program has no system in place for targeting individual employers *within* those industries.

Currently, CONN-OSHA uses an outmoded index card filing system to assign programmed inspections to CSHOs. The contact information for each municipality is hand-written on a 5” x 8” index card. The program manager sifts through the cards and arbitrarily selects one or two, and then assigns them to a CSHO for inspection. This current “system” for assigning programmed inspections was used by the previous CONN-OSHA program manager. When he retired, he passed the index cards to his successor, the current program manager.

CONN-OSHA uses this card filing system in place of a site specific targeting list. Federal OSHA does not require State Plans to adopt its Site Specific Targeting (SST) Directive and CONN-OSHA has not done so. This is due to the fact that OSHA’s SST directive pertains to private sector, rather than public sector, employers. Nonetheless, CONN-OSHA is required by this directive to have its own *site specific* inspection targeting system, and submit documentation to the Region that it is *at least as effective as* the Federal program.

⁶ Source: Bureau of Labor Statistics Incidence Rates of Nonfatal Occupational Injuries and Illnesses by Industry and Case Types (CT State Data)

Finding 10- #13: Site Specific Inspection Targeting—CONN-OSHA has not developed a site specific inspection targeting system in accordance with OSHA’s SST Directive 10-06 (CPL 02).

Recommendation 10-#13: CONN-OSHA must develop its own site specific inspection targeting system and provide documentation to the Region showing that it is as least effective as the Federal program by June 1, 2011.

INSPECTIONS WITH VIOLATIONS CITED

CONN-OSHA fell below Federal OSHA’s percentage for inspections with violations cited in the time periods listed below, with the exception of FY2009. CONN-OSHA had an especially weak performance in the first quarter of FY2011, with only 14 percent of its total number of inspections having violations cited. CONN-OSHA also fell significantly below Federal OSHA in FY2009 and FY2010 in terms of percent of inspections not in-compliance with serious violations.

Fiscal Year	% INSPECTIONS W/ VIOLATIONS CITED			% NOT IN COMPLIANCE W/ SERIOUS VIOLATIONS		
	09	10	11 (Q1)	09	10	11 (Q1)
CONN-OSHA	70%	65%	14%	63%	73%	0%
Federal OSHA	70%	71%	42%	87%	88%	88%

Finding 10-#14: Percentage of Inspections with Violations Cited/Percentage of Inspections Not In-Compliance with Serious Violations—CONN-OSHA is not in line with Federal OSHA’s percentages for inspections with violations cited and inspections not in-compliance with serious violations cited.

Recommendation 10-#14: CONN-OSHA must align its percentages more closely with Federal OSHA for these two indicators by citing more serious violations per inspection.

SAMM #8 measures the percent of *programmed* inspections with Serious/Willful/Repeat (S/W/R) violations. The table below shows CONN-OSHA’s results for SAMM #8 over the past three fiscal years.

SAMM #8								
	FY2008		FY2009		FY2010		FY2011 (1st Qtr.)	
	CONN-OSHA	National Data	CONN-OSHA	National Data	CONN-OSHA	National Data	CONN-OSHA	National Data
Safety	56.68	59	61.95	58.6	69.44	58.4	55.6	58.3
Health	37.5	51.4	48.39	51.2	100	50.0	0	50.9

In FY2009 and FY2010 CONN-OSHA met the national data standard for the percent of programmed inspections with S/W/R violations. In FY2010, 25 out of 36 programmed safety inspections (or 69.44 percent) had S/W/R violations. For health, CONN-OSHA's FY2010 percentage was 100, but the program only performed one programmed health inspection during FY2010. This was due to the fact that the veteran health CSHO was on medical leave and the other health CSHO was only recently hired. During the first quarter of FY2011, CONN-OSHA dropped below the national data standard for safety by a few percentage points. Unfortunately, the program did not conduct any health-related programmed inspections during the first quarter; therefore, the percentage is zero.

As discussed in the CAP, the fact that CONN-OSHA has conducted so few programmed inspections related to health over the past several months is due to the long standing vacancy in one of the health CSHO positions (that was not filled until the end of FY2010). In addition, the existing health CSHO was on medical leave for the last quarter of FY2010 and the first quarter of FY2011. As the newly hired health CSHO completes more training and becomes more experienced, the number of health programmed inspections conducted by the program should begin to increase.

Nonetheless, Region I continues to recommend that CONN-OSHA meet the national standards for both safety and health inspections. The SAMM for the fourth quarter of FY 2011 should reflect that CONN-OSHA has satisfied this recommendation. (Refer to **Recommendation 10-#5** for **09-#4** in Section III.)

SAMM #9 measures the average number of Serious/Willful/Repeat (S/W/R) and other-than-serious violations per inspection with violations. As it did in FY2009, CONN-OSHA's performance with respect to SAMM #9 continues to indicate that the program is classifying too many violations in the category of other-than-serious, and not enough as S/W/R.

According to SAMM #9, the program completed FY2010 with 56 inspections that had violations cited. These 56 inspections yielded 104 S/W/R violations, or an average of 1.85 S/W/R violations per inspection with violations cited. This average is lower than the national average of 2.1, although it is an improvement over the program's FY2009 average of 1.34. For other-than-serious violations, CONN-OSHA averaged 2.23 in FY2010, which was above the national average of 1.2. This is an improvement over its FY2009 average of 3.33 for other-than-serious violations. CONN-OSHA's averages for the first quarter of FY2011

showed that the program is continuing to have difficulty meeting the national data standards.

SAMM #9						
	FY2009		FY2010		FY2011 (1st Qtr.)	
	CONN-OSHA	National Data	CONN-OSHA	National Data	CONN-OSHA	National Data
S/W/R	1.34	2.1	1.85	2.1	1.11	2.1
Other	3.33	1.2	2.23	1.2	3.11	1.2

The fact that CONN-OSHA is classifying far too few violations as S/W/R is discussed in more detail in the following section on Violations, as well as the Region’s recommendation that the program continue to work to correct this problem, so that its percentages for violations classified as serious (or S/W/R), and those classified as other-than serious, mirror Federal OSHA’s percentages.

VIOLATIONS

CLASSIFICATION OF VIOLATIONS

As shown in the table below, CONN-OSHA’s total number of violations cited in FY2010 dropped precipitously from its FY2009 total. However, the program showed some improvement in terms of its percent of violations classified as serious, which increased from 28 percent in FY2009 to 45 percent in FY2010. Unfortunately, this percentage dropped back down to 26 in the first quarter of FY2011, while the percentage for violations classified as other-than-serious rose from 55 in FY2010 to 74 in the first quarter of FY 2011.

Fiscal year	Total Violations	Number of Serious	Percent Serious	Number of Other-than-serious	Percent Other-than-serious
FY2006	762	204	27	558	73
FY2007	843	262	31	581	69
FY2008	703	198	28	505	72
FY2009	696	195	28	484	70
FY2010	229	103	45	125	55
FY2011 (1st Qtr.)	38	10	26	28	74

Since CONN-OSHA still has far to go in terms of aligning its percentages for violations classified as serious and other-than-serious more closely with Federal OSHA’s percentages (shown in the table below), Region I continues to recommend that CONN-OSHA show improvement in this area, and properly classify violations. (Refer to **Recommendation 10-#6** for **09-#05** in Section III).

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	CONN-OSHA	Federal OSHA
TOTAL	696	87,663
<i>Percent Serious</i>	28	77
Willful	---	401
Repeat	---	2,762
Serious/Willful/Repeat (S/W/R)	195	70,831
<i>Percent Serious/Willful Repeat (S/W/R)</i>	28	81
<i>Percent Other</i>	70	19
Avg. Number of Violations/Initial Inspection	4.8	3.1

The most current Bureau of Labor Statistics (BLS) data show that each of CONN-OSHA's state and local government targeted operations had Days Away, Restricted, or Transferred (DART) rates that far exceeded the average DART rates for all Connecticut State Operations and for all Local Government operations (see table below).

DART Rates (2009)⁷		
State Targeted Operations		All CT State Government Operations
Hospitals	10.0	3.7
Nursing & Residential Care Facilities	9.9	
State Highway Maint. & Repair Operations	15.8	
Local Government Targeted Operations		All CT Local Government Operations
Public Works	15.8	4.6
Water, Sewage & Other Systems	6.9	
Waste Mgt. & Remediation	31.3	

⁷ [Source: Bureau of Labor Statistics Incidence Rates of Nonfatal Occupational Injuries and Illnesses by Industry and Case Types \(CT State Data\)](#)

Given the high hazard nature of Connecticut’s public sector worksites, as demonstrated by the DART rates in this table, it is surprising that CONN-OSHA classified only one quarter of all violations cited as serious. In addition to the IMIS Enforcement and BLS data discussed above, the Region’s case file review indicated that the state is misclassifying some violations as other when they should have been classified as serious (see below).

Violations Misclassified as Other-than-Serious	
Case File Number	Finding
4	Citation 2 Item 1 was cited as other. Since the potential injury was electric shock, this citation should have been classified as serious.
5	Citation 2 Item 1—The injury listed by the CSHO was burns. These citations should have been classified as serious.
6	In one set of citations, specifically 2-1, 2-2, and 2-3, the injury the CSHO listed was burns as the possible injury. These citations should have been classified as serious. In citations 2-6 and 2-7, the resulting injuries were listed as lacerations in the event that a car would fall from a jack. These citations should have been classified as serious.
8	A serious citation for 1910.133(a) should have been issued based on information contained in the OSHA Form 1B, which states that the Material Safety Data Sheets call for the use of gloves and eye protection. However, the worker stated that while gloves were provided by the employer, he was not provided with eye protection.

GROUPING VIOLATIONS

In December 2010, CONN-OSHA completed internal training on the FOM, Chapter 4, which discusses the proper procedures for classifying and grouping violations. The Region’s case file review found some violations that were grouped improperly; however, these cases were opened before the program completed the FOM training.

As discussed in Section III of this report (under Finding #5, Classifying/Grouping Violations), Region I found in the FY2009 EFAME that CONN-OSHA was grouping some violations that should rightfully stand alone in order to reduce the number of serious violations cited, which in turn results in penalty reductions for employers. According to the program manager, CONN-OSHA is not purposely grouping violations to purposely reduce penalties.

However, in light of the fact that CONN-OSHA classifies so few violations as serious, CONN-OSHA’s practice of grouping violations remains a concern for the Region, and will be closely monitored in the next case file review (for the FY2011 FAME).

Violations that were Improperly Grouped	
Case File Number	Finding
5	One hazard communication violation was cited on its own as Repeat. The rest were grouped together as a single serious citation. This should not have occurred. The remaining violations should have been cited separately.
6	Citation 1A Item 1A could have been cited separately from 1B through 1F. Lack of posting of the

Violations that were Improperly Grouped	
	spaces (for purposes of their own employees) should have been cited separately from not notifying a subcontractor of the existence of the space, and hazards posed, etc.
9	1-2a (not removing contaminated clothing) should have been cited separately from 1-2b (Personal Protective Equipment (PPE) not available) and 1-2c (appropriate clothing not available). 1-2d (not cleaning contaminated surfaces) should have been cited separately, as well as 1-2e (not providing a "sharps" container).

WILLFUL (AND REPEAT) VIOLATIONS

IMIS data from past years shows that CONN-OSHA has not classified any violations as willful since at least FY2005. The CONN-OSHA program manager could not recall the program citing any employer for a willful violation in at least the last 10 years. FY2010 was the first time since at least FY2005 that the plan classified a violation as repeat.

The table below compares CONN-OSHA’s percentages for serious, willful, repeat and other violations for FY2009, FY2010 and the first quarter of FY2011.

	Serious		Repeat		Willful		Other	
	CONN-OSHA	Federal OSHA						
FY2009	28	77	--	3.1	--	.47	70	19
FY2010	45	77	.43	2.8	--	1.6	55	18
FY2011 (1st Qtr.)	26	77	--	3.9	--	.82	74	18

Region I believes that CONN-OSHA’s long-standing record of rarely classifying any violations as willful (and very few as repeat) conveys the wrong message to employers. In other words, it appears as if the program has an unwritten policy that employers (under the program’s jurisdiction) will never be cited for willfully violating an OSHA standard and therefore will not be required to pay the increased penalties associated with having these types of violations.

In recent months, CONN-OSHA has had refresher training on violation classifications. For example, the staff completed internal training on Chapter 4 of the FOM on Violations in December 2010, and three CSHOs attended a seminar provided by Region I on Occupational Safety and Health Hazard Investigations in September 2010. Both of these trainings reviewed and discussed the elements of willful violations. Therefore, CONN-OSHA should have no problem classifying violations appropriately and achieving classification percentages more in line with Federal OSHA’s for S/W/R violations.

Finding 10-#15: Willful Violations—CONN-OSHA has not classified any violations as willful since at least FY2005. FY2010 was the first time since at least FY2005 that the plan classified a violation as repeat.

Recommendation 10-#15: As of the end of FY2011, CONN-OSHA’s percentages for serious, willful, repeat and S/W/R violations should be comparable to Federal OSHA’s.

ABATEMENT VERIFICATION

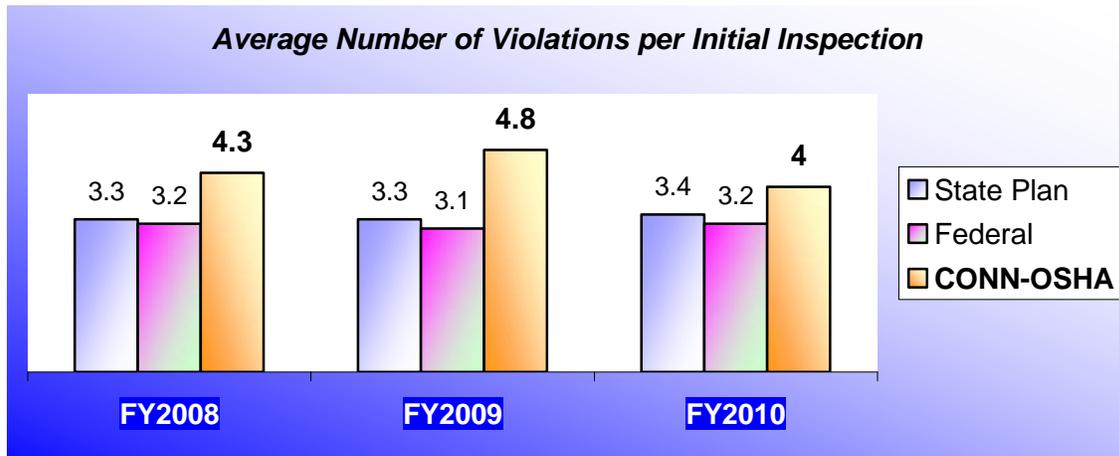
In FY2010, CONN-OSHA met the standard of 100 percent in SAMM#6 for verifying S/W/R violations abated in a timely manner. Looking back to FY2006, CONN-OSHA has a fairly good track record of meeting the 100 percent standard. As of the end of the first quarter of FY2011, CONN-OSHA’s percentage was also 100 percent, verifying all 42 of its first quarter S/W/R violations in a timely manner.

SAMM#6					
	FY2006	FY2007	FY2008	FY2009	FY2010
Percent S/W/R Violations Verified Timely	99.5	100	100	97.96	100

AVERAGE NUMBER OF VIOLATIONS PER INITIAL INSPECTION

This is one measurement in which CONN-OSHA continues to fare better than Federal OSHA. CONN-OSHA’s FY2010 year-end average was 4.0 compared to Federal OSHA’s average of 3.2.

As shown in the chart below, CONN-OSHA has consistently exceeded the Federal average as well as the average for all state plan programs over the past three fiscal years. As of the end of the first quarter of FY2011, CONN-OSHA’s average of 1.0 for number of violations per initial inspection slipped below the Federal average of 3.2.



PENALTIES

AVERAGE CURRENT PENALTY PER SERIOUS VIOLATION

CONN-OSHA's average penalty per serious violation increased from \$82.30 in FY2009 to \$134.10 in FY2010. As of the end of the first quarter of FY2011, CONN-OSHA's average penalty per serious violation increased to \$202.

PERCENT PENALTY REDUCED

In the FY2009 EFAME, Region I expressed concern over CONN-OSHA's fiscal year end percentage, which was 57.1, compared to Federal OSHA's percentage of 43.7. In FY2010, the program showed some improvement, with a percentage of 50.6; however, this was more than 10 points higher than Federal OSHA's percentage of 40.9.

In order to correct the finding in the FY2009 EFAME that most of CONN-OSHA's informal settlement agreements resulted in a penalty reduction of approximately 60 percent, the program began adhering to the guidelines in Federal OSHA's memorandum of April 22, 2010, entitled "Administrative Enhancements to OSHA's Penalty Policy." In accordance with this policy, CONN-OSHA will offer no more than a 30 percent penalty reduction to employers at informal conferences. For employers with 250 employees or less, CONN-OSHA will offer an additional 20 percent reduction if that employer agrees to retain CONN-OSHA's 23(g) consultation program.

CITATION ISSUANCE

LAPSE TIME FROM OPENING CONFERENCE TO CITATION ISSUANCE

SAMM #7 measures the average number of calendar days from the opening conference to citation issuance.

In FY2010, CONN-OSHA’s average of 138.65 days for safety inspections far exceeded the national average of 47.3 days. The same is true for health inspections, with CONN-OSHA averaging 84.95 days, compared to the national average of 61.9 days. In fiscal years 2008 and 2009, CONN-OSHA performed better than the national averages for both safety and health.

CONN-OSHA has closely monitored its performance with regard to this measure over the past several years, because the average number of days lapsed from opening conference to citation issuance as measured by SAMM #7 has been a long-standing concern for the program.

The tables below show CONN-OSHA’s fiscal year-end averages for SAMM #7 for FY2008 through FY2010.

SAMM#7						
Average Number of Lapse Days from Opening Conference to Citation Issue						
	FY2008		FY2009		FY2010	
	CONN-OSHA	National Data	CONN-OSHA	National Data	CONN-OSHA	National Data
Safety	43.60	45.5	37.11	43.8	138.65	47.3
Health	32.91	58.7	35.37	57.4	84.95	61.9

There is no question that the program’s staffing vacancies that persisted for most of FY 2010 adversely affected the program’s performance with regard to this measure. In essence, the two CSHOs who staffed the program for most of the year had to manage increased workloads, and this made it difficult for them to perform the work necessary to issue citations in a timely manner.

Finding 10-#16: Average Number of Lapse Days from Opening Conference to Citation Issuance (SAMM#7)—CONN-OSHA did not meet the standard for the average number of calendar days from the opening conference to citation issue.

Recommendation 10-#16: CONN-OSHA must meet the standards for SAMM #7.

STATE ACTIVITY MANDATED MEASURES (SAMM)—FY 2010 (AND FY2011 1ST QTR.)

Although a detailed discussion of CONN-OSHA's FY 2010 performance with regard to many of the SAMM measures has already been provided in this report, the table below recaps CONN-OSHA's performance with respect to the entire FY2010 SAMM, and provides FY2011 (first quarter) data as well.

<i>Measure</i>		<i>State Data</i>	<i>Standard</i>	<i>Comment</i>
1. Average number of days to initiate complaint inspections		8.92 (FY2011-1 st Qtr: 14.83)	5	Standard was not met.
2. Average number of days to initiate complaint investigations.		5.50 (FY2011-1 st Qtr: 10.66)	1.00	Standard was not met.
3. Percent of complaints where complainants were notified on time.		100 (FY2011-1 st Qtr: 100)	100	Standard was met.
4. Percent of complaints and referrals responded to within 1 day.		0 (FY2011-1 st Qtr: 0)	100	N/A (CONN-OSHA had no inspections related to imminent danger complaints or referral inspections)
5. Number of denials where entry was not obtained.		0 (FY2011-1 st Qtr: 0)	0	N/A
6. Percent of S/W/R violations verified.	Private	N/A	100	Standard was met.
	Public	100 (FY2011-1 st Qtr: 100)		
7. Average number of calendar days from opening conference to citation issue.	Safety	138.65 (FY2011-1 st Qtr: 72.42)	47.3	Standard was not met.
	Health	84.95 (FY2011-1 st Qtr: 44.50)	61.9	Standard was not met.
8. Percent of programmed inspections with S/W/R violations.	Safety	69.44 (FY2011-1 st Qtr: 55.56)	58.4	Standard was met in FY2010, but not met in first qtr. of FY2011.

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Measure		State Data	Standard	Comment
	Health	100 (FY2011-1 st Qtr: 0)	50.9	Standard was met in FY2010 (however, CONN-OSHA conducted only one health-related programmed inspection). No health programmed inspections were conducted in the first quarter of FY2011.
9. Average violations per inspection with violations.	S/W/R	1.85 (FY2011-1 st Qtr: 1.11)	2.1	Standard was not met.
	Other	2.23 (FY2011-1 st Qtr: 3.11)	1.00	Standard was met.
10. Average initial penalty per serious violation – private sector only.		N/A	N/A	
11. Percent of total inspections in public sector.		100	100	
12. Average lapse time from receipt of contest to first level of decision.		N/A	N/A	N/A
13. Percent of 11(c) investigations completed within 90 days.		0 (FY2011-1 st Qtr: 0)	100	Standard was not met.
14. Percent of 11(c) complaints that are meritorious.		100 (FY2011-1 st Qtr: N/A)	21.2	Standard was met.
15. Percent of meritorious 11(c) complaints that are settled.		100 (FY2011-1 st Qtr: N/A)	86.0	Standard was met.

V. Other

Severe Violator Enforcement Program (SVEP)

On June 18, 2010, OSHA issued the SVEP FPC. States are required to either adopt this program or establish their own equivalent program. In addition, States are required to notify OSHA within 60 days of the issuance of this FPC whether their policies are identical to, or different from (but at least as effective as), those in the SVEP Instruction.

CONN-OSHA has notified the Region that it intends to adopt the SVEP FPC, but with policies and procedures that differ from the Federal SVEP FPC.

Finding 10-#17: Adoption of Severe Violator Enforcement Program—CONN-OSHA has failed to adopt the SVEP FPC within six months of issuance.

Recommendation 10-#17: CONN-OSHA must adopt the SVEP by June 1, 2011.

PSM TRAINING

The Environmental Protection Agency's (EPA) Risk Management Plan (RMP) lists several municipally owned and operated wastewater treatment and drinking water facilities in Connecticut which use chlorine in sufficient quantity to be covered by OSHA's PSM standard.

Finding 10-#18: PSM Training—Despite the fact that there are several facilities under CONN-OSHA's jurisdiction that are covered by the PSM standard, CONN-OSHA has no staff who have completed the three courses at the OSHA Training Institute on PSM (Course #3300—Safety and Health in Chemical Processing Industries; Course #3400—Hazard Analysis in the Chemical Processing Industries; and Course #3410—Advanced Process Safety management).

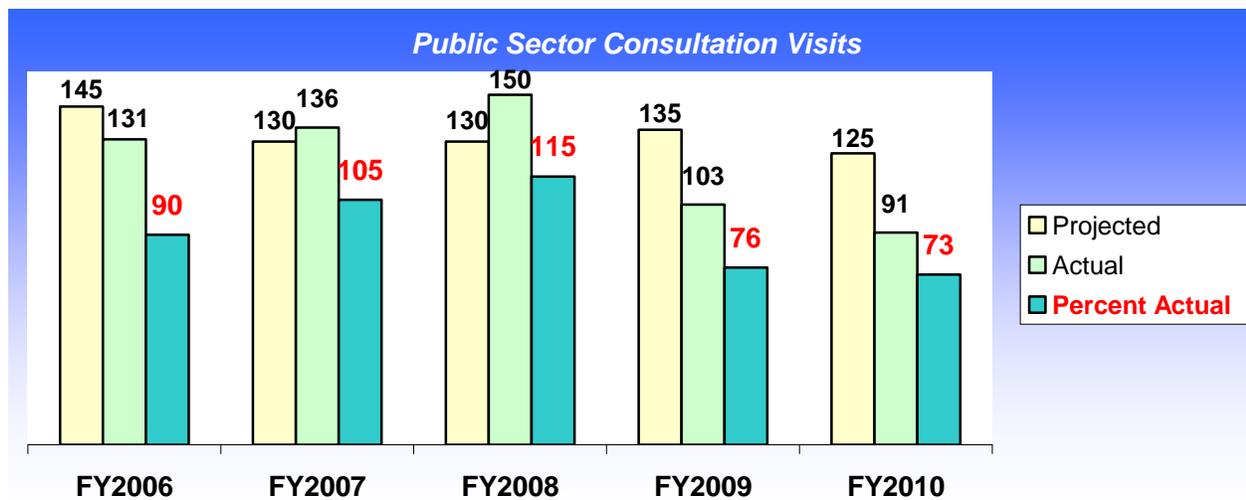
Recommendation 10-#18: (A) CONN-OSHA should ensure that at least one CSHO completes all of the three PSM training courses by the end of FY2012. **(B)** CONN-OSHA should determine which facilities on the EPA RMP list are actually operated by municipalities (and therefore are subject to CONN-OSHA's jurisdiction), and which facilities contract with private firms to operate their plants. **(C)** CONN-OSHA should investigate further to determine if there are any other state or municipal facilities (aside from those that appear on this particular list) that may be covered under OSHA's PSM standard. The latter two recommendations should be completed by the end of the fourth quarter of FY2011.

PUBLIC SECTOR CONSULTATION

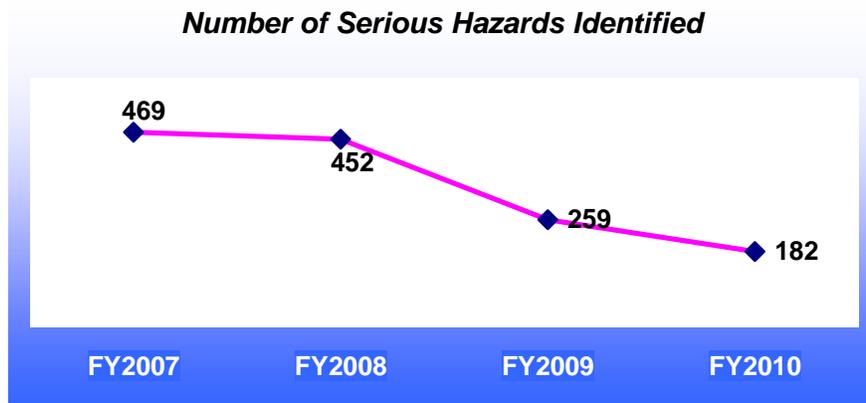
The CONN-OSHA public sector consultation program is normally staffed by three consultants (two health and one safety). In FY2009, the public sector consultation program lost one consultant to retirement in the fourth quarter of the fiscal year. In October 2010 this vacancy was eventually filled by a CONN-OSHA CSHO, who experienced a learning curve for a few months while transitioning from enforcement to consultation.

In FY2010, the program experienced another vacancy. This one occurred in April 2010 as a result of the promotion of one of the consultants to the position of program manager for CONN-OSHA’s 21(d) private sector consultation program. This vacancy lasted for about three months, and was not filled until August 2010.

It appears that over the past two fiscal years, these vacancies have affected the program’s ability to meet its projection for total number of visits, with the program conducting 91 out of 125 visits projected in FY2010, or 73 percent. In FY2010, CONN-OSHA’s posted its lowest percentage of visits completed over the past five fiscal years, as shown in the table below.



In FY2010, the program also declined further in terms of the number of serious hazards that it identified. In FY2009, the program identified a total of 259 serious hazards, which was significantly fewer than the number it had identified in previous years. In FY2010, CONN-OSHA identified only 182 hazards as serious.



Now that the CONN-OSHA public sector consultation program is fully staffed, the program's totals for visits and serious hazards identified should begin to increase. Region I will continue to monitor the public sector consultation program's performance in terms of identifying serious hazards and meeting its goal for total visits.

VI. Assessment of State Progress in Achieving Annual Performance Goals

Similar to FY2009, CONN-OSHA accomplished most of its annual performance plan goals. However, staffing vacancies prevented the Plan from achieving its goals for total inspections and consultation visits. Although these vacancies have been filled (with the exception of the CONN-OSHA Program Director), the entire fiscal year had lapsed before all three new hires were on board.

a. ASSESSMENT OF PROGRESS IN ACHIEVING ANNUAL PERFORMANCE GOALS

In developing its five-year strategic plan, CONN-OSHA used Bureau of Labor Statistics Data⁸ to identify six operations that had higher than average Days Away/Restricted/Transferred Case (DART) incidence rates compared to all other public sector operations in the State of Connecticut. In each year of its five-year strategic plan, CONN-OSHA intends to effect a reduction in these DART rates. CONN-OSHA's goal, at the end of the five-year plan, is to show that each of these DART rates has been reduced cumulatively by at least 10 percent, in comparison to the baseline DART rates.

The table below lists the six identified operations and compares CONN-OSHA's baseline data to calendar year 2009 results (the latest year for which the BLS has published statistics).

TARGETED STATE AND MUNICIPAL OPERATIONS (BASELINE TO 2009 DART RATE COMPARISONS)					
NAICS	State Agency	FY2004-2006 Avg. DART (baseline)	FY2008 DART	FY2009 DART	Pct. Change (from baseline to 2009 DART)
622000	Hospitals	10.0	10.4	10.0	0
623000	Nursing & Residential Care Facilities	9.9	10.3	9.9	0
237000	Highway Maintenance & Repair Operations	10.0	15.2	15.8	58
NAICS	Municipal Agency	FY2004-2006 Avg. DART (BASELINE)	FY2008 DART	FY2009 DART	Pct. Change (from baseline to 2009 DART)
221300	Water, Sewage &	9.3		6.9	(26)

⁸ CONN-OSHA used BLS data from calendar year (CY) 2006, the most recent BLS data available at the time the program developed the strategic plan.

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TARGETED STATE AND MUNICIPAL OPERATIONS (BASELINE TO 2009 DART RATE COMPARISONS)					
NAICS	State Agency	FY2004-2006 Avg. DART (baseline)	FY2008 DART	FY2009 DART	Pct. Change (from baseline to 2009 DART)
	Other Systems		11.5		
237000	Public Works—Street & Highway	10.0	15.2	15.8	58
562000	Waste Mgt. & Remediation Services	22.6	18.1	31.3	38

Although CONN-OSHA has three years remaining in its five-year plan to effect a 10 percent reduction in DART rates, the program appears to be fighting an uphill battle, since only one targeted operation's DART rate (municipal water, sewage and other systems) declined from the baseline rate. On top of this, there were two targeted operations for which the DART rate increased by more than 50 percent; in another targeted industry, the DART rate increased more than 30 percent.

As shown in the next table, Connecticut met or exceeded its FY2010 Annual Performance Plan goals, as detailed in **Appendix E**, the CONN-OSHA SOAR.

STRATEGIC GOAL 1: IMPROVE WORKPLACE SAFETY AND HEALTH FOR ALL WORKERS, BY REDUCING HAZARDS, EXPOSURES, INJURIES, ILLNESSES AND FATALITIES.			
ANNUAL PERFORMANCE GOAL	OUTCOME MEASURES	RESULTS	DISCUSSION
<p>1.1a,1b: Reduce the average incidence rate for cases with Days Away, Restricted or transferred (DART) by 10 percent in six state and municipal operations identified by CONN-OSHA as having higher than average DART rates (compared to all other public sector operations).</p>	<p>Intermediate outcome Measure: Perform 25 percent of all inspections and consultation visits in these targeted state and municipal industries.</p> <p>Primary Outcome Measure: CONN-OSHA will effect a 10 percent reduction in the DART rate (to be evaluated at the conclusion of the five-year strategic plan).</p>	<p>GOAL ACHIEVED (for intermediate outcome measures)</p>	<p>Total inspections: 78 Total inspections in targeted agencies: 26 Percent of inspections in targeted agencies: 33</p> <p>Total consultation visits: 91 Total consultation visits in targeted agencies: 29 Percent of consultation visits in targeted agencies: 32</p> <p>CONN-OSHA's baseline was established by averaging the targeted groups' DART rates for FY2004 through FY2006.</p> <p>The extent to which CONN-OSHA is successful in effecting a 10 percent reduction in DART rates for the targeted groups will be assessed at the conclusion of the five-year strategic plan. However, two years into the five-year strategic plan, none of the targeted industries' DART rates appears to be exhibiting a <u>steady</u> decline.</p>
<p>1.1c: Goal: Focus resources on the most hazardous industries to reduce fatalities. Strategy: Investigate fatalities within one workday of notification. Each issue of the <i>CONN-OSHA Quarterly</i> will discuss fatality prevention.</p>	<p>The baseline for investigating fatalities in 0.34 days, which is based on a three-year average of lapse time from date reported to inspection. Each issue of the <i>CONN-OSHA Quarterly</i> will include discuss prevention.</p>	<p>GOAL ACHIEVED (for CONN-OSHA Quarterly)</p>	<p>Three fatality investigations were conducted; there were four fatalities. In one of the fatality events, there were two deaths.</p> <p>Each issue of the <i>CONN-OSHA Quarterly</i> discussed fatality prevention.</p>

STRATEGIC GOAL 2: PROMOTE A SAFETY AND HEALTH CULTURE THROUGH COMPLIANCE ASSISTANCE, COOPERATIVE PROGRAMS AND STRONG LEADERSHIP			
PERFORMANCE GOAL/STRATEGY	OUTCOME MEASURES	RESULTS	DISCUSSION
<p>2.1a: Goal: Improve safety and health awareness in municipal governmental agencies.</p> <p>Strategy: Conduct a minimum of seven training programs that focus on the most hazardous municipal operations, such as: confined space entry; lockout/tagout; material handling and ergonomics; safe driving; trenching and excavation; work zones; and workplace violence.</p>	<p>Post- seminar questionnaires</p>	<p>GOAL ACHIEVED</p>	<p>CONN-OSHA planned to complete seven training programs for municipal workers on specific topics. CONN-OSHA conducted a total of 25 seminars for 393 municipal employees.</p> <p>All completed questionnaires reported that the training programs would help improve safety and health awareness.</p>
<p>2.1b: GOAL: Improve safety and health awareness in state governmental agencies.</p> <p>Strategy: Conduct a minimum of seven training programs that focus on the most hazardous municipal operations, such as: confined space entry; lockout/tagout; material handling and ergonomics; safe driving; trenching and excavation; work zones; and workplace violence.</p>	<p>Post- seminar questionnaires</p>	<p>GOAL ACHIEVED</p>	<p>CONN-OSHA planned to complete seven training programs for municipal workers on specific topics. CONN-OSHA conducted a total of 41 seminars for 673 state employees</p> <p>All completed questionnaires reported that the training programs would help improve safety and health awareness.</p>
<p>2.1c: Increase public sector</p>	<p>Post- seminar</p>	<p>GOAL ACHIEVED</p>	<p>CONN-OSHA fulfilled all 30 requests for training from</p>

STRATEGIC GOAL 2: PROMOTE A SAFETY AND HEALTH CULTURE THROUGH COMPLIANCE ASSISTANCE, COOPERATIVE PROGRAMS AND STRONG LEADERSHIP			
PERFORMANCE GOAL/STRATEGY	OUTCOME MEASURES	RESULTS	DISCUSSION
awareness of workplace safety and health by providing training, outreach, and seminars based on needs and requests.	questionnaires		municipalities and state agencies. All completed questionnaires reported that the training programs would help improve safety and health awareness.
<p>2.1d: Goal: Maintain current Alliances and solicit additional Alliances that support CONN-OSHA's strategic goals.</p> <p>Strategy: Participate in training and outreach activities with existing Alliances so that they will remain active.</p>	<p>Renew Alliances that expire in FY2010.</p> <p>Participate in training and outreach with Alliance partners in order to improve their safety and health awareness.</p>	GOAL ACHIEVED	<p>CONN-OSHA renewed six Alliances (Atlantic States Rural Water & Wastewater Association; Connecticut Association of Street and Highway Officials; Connecticut Highway Street Supervisor Association; Connecticut Inter-local Risk Management Agency; Connecticut Department of Environmental Protection; and the University of Connecticut Technology Transfer Center).</p> <p>CONN-OSHA conducted 12 training programs for its Alliance partners and also participated in 12 conferences/trade shows with Alliance partners.</p>
2.2a: CONN-OSHA will include workers in 100 percent of its onsite activities	Outcome measure: Mandated Activities Report for Consultation (MARC) (measure #3).	GOAL ACHIEVED	The FY2010 MARC indicates that CONN-OSHA met its goal by having workers participate in 100 percent of all public sector consultation visits.

STRATEGIC GOAL 3: MAXIMIZE CONN-OSHA EFFECTIVENESS AND EFFICIENCY BY STRENGTHENING ITS CAPABILITIES AND INFRASTRUCTURE			
PERFORMANCE GOAL	OUTCOME MEASURES	RESULTS	DISCUSSION
3.1a: CONN-OSHA staff members will complete at least one safety and/or health training course each year.	Outcome measure: Percentage of CONN-OSHA staff completing at least one training course.	GOAL ACHIEVED	CONN-OSHA met its goal of having 100 percent of its staff complete at least one training course. However, due to state budgetary constraints, most of the training was accomplished via webinar.
3.1b: All CONN-OSHA staff members will have the opportunity to complete at least one professional development course/seminar per year.	Outcome measure: Percentage of staff that has completed at least one professional development course or seminar.	GOAL ACHIEVED (see comment)	This goal should be revised when the new five-year strategic plan is developed. As it is currently written, this goal simply requires that CONN-OSHA provide the “opportunity” for staff members to attend professional development training. Region I strongly prefers that CONN-OSHA revise this goal so that attainment is based on the percentage of staff members completing at least one professional development course per year. No CONN-OSHA staff members attended professional development courses in FY2010. The CONN-OSHA program manager has not determined why no staff members chose to participate in any professional development courses.
3.2a: CONN-OSHA will maintain and revise as necessary its Local Emergency Management Plan	CONN-OSHA planned to participate as a team member; schedule training sessions; coordinate the development and implementation of plan changes with state and local agencies; and monitor development and implementation of the plan.	GOAL ACHIEVED	CONN-OSHA monitors its Emergency Operations Plan continuously. No incidents arose that required CONN-OSHA to revise its plan. CONN-OSHA staff attended local emergency planning committee monthly meetings.

Appendix A
FY 2010 State of Connecticut (CONN-OSHA) Enhanced FAME Follow-up Report
Summary of New and Continuing Findings and Recommendations

Rec #	Findings	Recommendations	Related FY 09 Rec #
10-1	Complaint and Referral Response (SAMM#1) —CONN-OSHA must continue to strive to meet the five-day standard for average number of days to initiate a complaint inspection.	Meet the five-day standard for complaint and referral response time.	09-1
10-2	Diary Sheets —Case file diary sheets do not sufficiently document important events and actions related to the case.	Ensure that all case diary sheets contain all entries and information required by the FOM, Chapter 5.	09-2
10-3	Case File Review Check List —CONN-OSHA has not implemented the case file review check list, as required by its Corrective Action Plan (CAP).	Implement the case file review check list as required by its CAP by May 1, 2011.	09-2
10-4	Case File Organization — Some case files' documents were not in the order established by Appendix C of ADM 03-01-005.	Ensure that case files are organized in accordance with Appendix 2 of ADM 03-01-005.	09-3
10-5	SAMM#8 —CONN-OSHA did not meet the standard for safety during the first quarter of FY2011 (but did exceed the standard for safety in FY2010). For health, CONN-OSHA has only conducted one programmed inspection in the past several months so the program's performance will have to have to be monitored in subsequent quarters of FY2011.	Meet the standards for SAMM#8 for both safety and health inspections. The SAMM report for the 4 th quarter (FY2011) will reflect that CONN-OSHA has met the standards.	09-4
10-6	Classifying/Grouping Violations —CONN-OSHA's percentage for all violations classified as serious continue to be too low (in comparison to Federal OSHA's percentage) and its percentage for all violations classified as other-than-serious continues to be too high.	Align more closely with Federal OSHA's percentages for violations classified as serious and those violations classified as other-than-serious. The Inspection Summary report for the third quarter of FY2011 will show that CONN-OSHA's percentages for serious and other-than-serious violations are at least within a few percentage points of Federal OSHA's percentages.	09-5
10-7	PMA Tracking Sheet —CONN-OSHA has not yet implemented the sample tracking sheet developed by Region I for ensuring that abatement information is received from the employer by the required due dates.	Implement use of the PMA tracking sheet by June 1, 2011.	09-11
10-8	Whistleblower Cases —Due to its complex regulatory system for handling Whistleblower cases, CONN-OSHA has advised that it cannot realistically meet the 90-day deadline for completing Whistleblower cases.	Explore the possibility of simplifying the state's procedures for handling Whistleblower complaints. CONN-OSHA should discuss its findings in regard to modifying this process during the fourth quarterly meeting with Region I.	09-17

Appendix A
FY 2010 State of Connecticut (CONN-OSHA) Enhanced FAME Follow-up Report
Summary of New and Continuing Findings and Recommendations

Rec #	Findings	Recommendations	Related FY 09 Rec #
10-9	Standards/Federal Program Change Adoptions —CONN-OSHA has not implemented the FOM.	Complete a review of the FOM and submit a comparison document (which describes the changes it has made to the Federal FOM) to the Region by June 1, 2011. Once the Region approves this comparison document, CONN-OSHA may fully implement the FOM.	09-18
10-10	Average Number of Days between Consultation Closing Conference and Issuance of the Written Report — CONN-OSHA did not meet the 20-day standard for health visits.	Meet the 20-day standard for safety and health visits.	09-22
10-11	Percentage of Programmed Inspections —CONN-OSHA's percentage for programmed inspections was far below Federal OSHA's percentage in FY2010.	Align percentages for programmed (and unprogrammed) inspections with Federal OSHA's percentages.	N/A
10-12	Average Number of Days to Initiate Complaint Investigations —With an average of 5.50 days, CONN-OSHA did not meet the one-day standard for SAMM#2.	Meet the one-day standard for average number of days to initiate complaint investigations (SAMM #2).	N/A
10-13	Site Specific Inspection Targeting —CONN-OSHA has not developed a site specific inspection targeting system in accordance with OSHA's SST Directive 10-06 (CPL 02).	Develop its own site specific inspection targeting system and provide documentation to the Region showing that it is as least effective as the Federal program by June 1, 2011.	N/A
10-14	Percentage of Inspections with Violations Cited/Percentage of Inspections Not In-Compliance with Serious Violations —CONN-OSHA is not in line with Federal OSHA's percentages for inspections with violations cited and inspections not in-compliance with serious violations cited.	Align percentages more closely with Federal OSHA for these two indicators by citing more serious violations per inspection.	N/A
10-15	Willful Violations —CONN-OSHA has not classified any violations as willful since at least FY2005. FY2010 was the first time since at least FY2005 that the plan classified a violation as repeat.	As of the end of FY2011, CONN-OSHA's percentages for serious, willful, repeat and S/W/R violations should be comparable to Federal OSHA's percentages.	N/A
10-16	Average Number of Lapse Days from Opening Conference to Citation Issue (SAMM#7) —CONN-OSHA did not meet the standard for the average number of calendar days from the opening conference to citation issue.	Meet the standards for SAMM #7.	N/A
10-17	Adoption of the Severe Violator Enforcement Program —CONN-OSHA has failed to adopt the SVEP FPC within six months of issuance.	Adopt the SVEP by June 1, 1011.	N/A

Appendix A
FY 2010 State of Connecticut (CONN-OSHA) Enhanced FAME Follow-up Report
Summary of New and Continuing Findings and Recommendations

Rec #	Findings	Recommendations	Related FY 09 Rec #
10-18	PSM Training —CONN-OSHA has no staff who have completed the three courses at the OSHA Training Institute on PSM (Course #3300—Safety and Health in Chemical Processing Industries; Course #3400—Hazard Analysis in the Chemical Processing Industries; and Course #3410—Advanced Process Safety Management).	(A) Ensure that at least one CSHO completes all of the three PSM training courses by the end of FY2012. (B) Determine which facilities on the EPA RMP list are actually operated by municipalities (and therefore are subject to CONN-OSHA’s jurisdiction), and which facilities contract with private firms to operate their plants. (C) Investigate further to determine if there are any other state or municipal facilities (aside from those that appear on this particular list) that may be covered under OSHA’s PSM standard. The latter two recommendations should be completed by the end of the 4 th quarter (FY2011).	N/A

Appendix B
Connecticut State Plan
FY 2010 Enhanced FAME Follow-up Report Prepared by Region I
Status of Findings, Recommendations, and Corrective Actions

Rec #	Findings	Recommendations	Corrective Action Plan	State Action Taken	Status
09-1	Complaint and Referral Response (SAMM#1) —CONN-OSHA's FY2009 average of 7.24 days did not meet the five-day standard for average number of days to initiate a complaint inspection.	Meet the five-day standard.	CONN-OSHA will run the SAMM monthly to monitor its performance with regard to this measure. <i>(The SAMM for April 2011 will reflect that the standard has been met.)</i>	CONN-OSHA runs the SAMM monthly.	This finding is pending correction.
09-2	Fatality Case Files/Diary Sheets —Case diary sheets relating to fatality investigations did not contain notes on important discussions that occurred between the compliance officers and the supervisors.	Document all information relevant to fatality investigations in the case file diary sheet (including important discussions between CSHOs and supervisors). Review Chapter 5 of the FOM, Section X.	CONN-OSHA will develop a case file review check and the manager will review all case files to ensure that diary sheets contain all required entries.	The manager reviews all case files but the case file review check list has not been implemented.	This finding is pending correction.
09-3	Case file organization — Some case files' documents were not in the order established by Appendix C of ADM 03-01-005.	Use files with paper fasteners and review OSHA's guidance on case file organizations, Appendix C of ADM 03-01-005.	All CSHOs will review OSHA's guidance document; case files will be reviewed by management; and a case file review check list will be implemented.	The case file review check list has not been implemented; all other actions have been completed (or are ongoing).	This finding is pending correction.
09-4	SAMM# 8 —CONN-OSHA did not meet the standard of 51.2 for percent of programmed inspections with S/W/R violations, with a percentage of 48.39 in FY2009 for health related inspections.	Meet the national standards for safety and health inspections.	Conduct staff training on Chapter 4 of the FOM; and run quarterly SAMM reports to monitor performance. <i>(The SAMM for the 4th qtr. of FY2011 will reflect that the standard has been met.)</i>	Completed (ongoing).	This finding is pending correction.
09-5	Classifying/Grouping Violations —CONN-OSHA's FY2009 percentage for serious violations was too low compared	Review Chapter 4 of the FOM, which discusses violation classifications and grouping violations.	Conduct staff training on Chapter 4 of the FOM; monitor performance by running Inspection Summary reports quarterly; and	Completed (ongoing)	This finding is pending correction.

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Rec #	Findings	Recommendations	Corrective Action Plan	State Action Taken	Status
	to its percentage for other-than-serious violations.		management will carefully monitor all probability and severity assessments. The Inspection Summary report for the 3 rd qtr. will reflect that the program's percentages are comparable to Federal OSHA's percentages.		
09-6	Penalty Reduction —CONN-OSHA's informal settlement agreements resulted in a penalty reduction of approximately 60 percent.	Penalty reductions in the 60 percent range should be reserved only for employers who provide adequate proof of abatement for each cited violation, and that this abatement verification is provided within the dates indicated on the citation (FOM, Chapter 7). The reasons for granting penalty reductions (and extended abatement dates) should be documented on the case file diary sheet.	Adopt OSHA's guidelines for penalty reductions and Region will track the program's success in adhering to these guidelines using IMIS data.	Completed (ongoing)	This finding was corrected.
09-7	SAMM# 6, Abatement Verification - CONN-OSHA's FY2009 percentage of 97.96 for S/W/R violations verified timely did not meet the standard of 100 percent.	Meet the standard.	Conduct staff training on Chapter 7 of the FOM; run monthly SAMM reports to monitor performance; and develop a system for tracking abatement due dates. <i>(The SAMM for March 2011 will reflect that CONN-OSHA has met the standard.)</i>	Completed (ongoing)	This finding is pending correction.

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Rec #	Findings	Recommendations	Corrective Action Plan	State Action Taken	Status
09-8	Abatement Verification —In some municipalities where multiple departments were inspected, just one of the case files contained all of the other departments' documentation of abatement.	Maintain case files in accordance with Appendix C of ADM 03-01-005, which states that: "An inspection case file shall be composed of all essential documents relating to a single inspection of an establishment."	Management will review all inspection case files to verify that documents related to inspections of municipalities with multiple departments are filed appropriately.	Completed (ongoing).	This finding was corrected.
09-9	Abatement Verification —Some case files had been closed before adequate documentation of abatement has been received by the program.	Review Chapter 7 of the FOM, which states that case files must remain open throughout the inspection process.	Management will review inspection case files to ensure that abatement has occurred and that it was properly documented before the case files are closed.	Completed (ongoing).	This finding was corrected.
09-10	Abatement Verification — Some cases lacked written certification of abatement while others contained abatement letters that did not document abatement for all citations issued. In addition, some case files lacked relevant documents such as written hazard communication programs, evidence of training, and an emergency action plan.	Review Chapter 7 of OSHA's FOM, Section B, which relates to Adequacy of Abatement Documentation., and will maintain case files accordingly.	Conduct staff training on Chapter 7 of the FOM; CSHOs will use the case file review check list to ensure that abatement has occurred and is properly documented before the case files are closed; managers will review case files.	Completed (ongoing).	This finding was corrected.
09-11	Abatement Verification —Some case files did not contain documentation related to Petitions for Modification of Abatement (PMA).	Ensure that all documentation related to PMAs is contained in the relevant case files, such as copies of the petition itself, as well as CONN-OSHA's approval (or denial) of the PMA, and any written objections by employees to the PMA. (Refer to Chapter 7 of the FOM, Section III.)	CSHOs will use a tracking sheet to ensure that employers follow all procedures in the PMA process; develop a system for tracking due dates for abatements that were granted under PMAs; conduct staff training on Chapter 7 of the FOM; managers will review case files.	CONN-OSHA has not developed a PMA tracking sheet but will do so by June 1, 2011; all other actions completed (ongoing).	This finding was corrected.

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FY 2010 Enhanced FAME Follow-up Report Prepared by Region I
Status of Findings, Recommendations, and Corrective Actions

Rec #	Findings	Recommendations	Corrective Action Plan	State Action Taken	Status
09-12	Informal Conferences — Several of the case files that had informal conferences did not contain documentation that labor organizations were ever notified of the informal conference	Labor unions should receive adequate and timely notification of the scheduling of informal conferences, and that this notification is documented in the case file. (Refer to Chapter 7 of the FOM.)	Conduct staff training on Chapter 7 of the FOM; use the case file review check list to ensure that union notification is contained in the case files; and managers will review case files.	The case file review check list has not been implemented; all other actions have been completed (or are ongoing).	This finding has been corrected.
09-13	Informal Conferences — Some case files did not contain notes or other documentation related to informal conferences and/or informal settlement agreements.	Documentation of informal conferences and informal settlement agreements must be included in all case files where appropriate. If an informal conference was held that pertains to more than one municipal department, then each department's case file should contain notes, diary sheet entries and other documentation related to the informal conference and the informal settlement agreement. (Refer to Chapter 7, Section II (F) of the FOM.)	Managers will review case files to ensure that documentation and notes related to informal conferences are contained in the file of every case for which an informal conference is held.	Corrected (ongoing).	This finding was corrected.
09-14	Informal Conferences — Some cases files' diary sheets did not contain entries with regard to the dates, and location, etc. of informal conferences.	Diary sheets must record the scheduling information for informal conferences (Refer to Chapter 7 of the FOM, Section II (D).)	Managers will review case files to ensure that documentation and notes related to informal conferences are contained in the file of every case for which an informal conference is held.	Corrected (ongoing).	This finding was corrected.

Appendix B
Connecticut State Plan
FY 2010 Enhanced FAME Follow-up Report Prepared by Region I
Status of Findings, Recommendations, and Corrective Actions

Rec #	Findings	Recommendations	Corrective Action Plan	State Action Taken	Status
09-15	Whistleblower Program —In two of the cases we reviewed, the lapse time between the date the case was filed and notification of the employer was up to five weeks.	OPP should notify the employer in a timely manner to accelerate the process of mediation.	Employers will be notified in a timely manner of complaint filings.	Corrected (ongoing).	This finding was corrected.
09-16	Whistleblower Program —None of the case files that the Region examined were assembled in the proper format and order in accordance with Chapter 5, Section III.B.1 of OSHA's Discrimination Manual (DIS 0-0.9). The case files had some paperwork contained loosely in the files.	OPP should assemble discrimination case files in an orderly fashion in accordance with OSHA's Discrimination Manual.	Case files will be maintained in accordance with OSHA's Discrimination Manual	Corrected (ongoing).	This finding was corrected.
09-17	Whistleblower Program —Only one-third of CONN-OSHA's discrimination cases are completed within 90 days. The SAMM standard is 100 percent.	Work to ensure that cases are completed within the 90-day guideline.	This corrective action has been revised. CONN-OSHA will explore the possibility of simplifying the state's complex regulatory process for handling discrimination complaints. During the fourth quarterly meeting, Region I and CONN-OSHA will discuss the results of CONN-OSHA's inquiries into this matter.	No action has been taken to date.	This finding is pending correction.

Appendix B
Connecticut State Plan
FY 2010 Enhanced FAME Follow-up Report Prepared by Region I
Status of Findings, Recommendations, and Corrective Actions

Rec #	Findings	Recommendations	Corrective Action Plan	State Action Taken	Status
09-18	Standards/Program Change Adoptions —CONN-OSHA did not completed a full review of the FOM to determine which provisions, if any, the program would need to modify, since the FOM pertains chiefly to Federal OSHA <i>private sector enforcement</i> , and CONN-OSHA is a public sector employee only state plan.	CONN-OSHA should complete its review of the FOM. This includes identifying any provisions that may require change, drafting the proposed changes, and forwarding the entire package to Region I for review and approval. Once this process has been completed, implementation of the FOM should begin immediately.	The corrective action has been revised to set a target date of June 1, 2011 for CONN-OSHA to complete the steps required to implement the FOM.	CONN-OSHA is reviewing the FOM.	This finding is pending correction.
09-19	Consultation — CONN-OSHA did not meet the 100 percent standard for verifying hazards corrected within a timely manner (14 days within the latest correction due date).	CONN-OSHA must work harder to meet the standard of 100 percent to ensure that workers are protected from identified hazards.	CONN-OSHA will meet the 100 percent standard.	The standard has been met.	This finding was corrected.
09-20	Debt Collection Procedures — CONN-OSHA has not established formal debt collection procedures.	CONN-OSHA should adopt formal debt collection procedures.	CONN-OSHA will adopt formal debt collection procedures by January 31, 2011.	CONN-OSHA has developed and formalized debt collection procedures.	This finding was corrected.
09-21	CSHO Training —In accordance with TED 01-00-018, the program’s compliance officers still need to complete course #2450 (Evaluation of Safety and Health Management Systems) and #1310 (Investigative Interviewing Techniques).	The affected CSHOs must complete these two remaining courses as soon as possible.	CONN-OSHA will enroll the affected CSHOs in the required courses, to be completed by the end of FY2011.	The three compliance officers have been scheduled to take the course through the Office of Training and Education.	This finding was corrected.

Appendix B
Connecticut State Plan
FY 2010 Enhanced FAME Follow-up Report Prepared by Region I
Status of Findings, Recommendations, and Corrective Actions

Rec #	Findings	Recommendations	Corrective Action Plan	State Action Taken	Status
09-22	Average Number of Days Between Consultation Closing Conference and Issuance of Written Report – CONN-OSHA’s FY2009 year-end average of 22.33 days exceeded the 20 day standard.	CONN-OSHA must meet the 20-day standard.	On a quarterly basis, CONN-OSHA will run the MARC to monitor the program’s performance with regard to this measure. If the performance measure is not being met, the manager will meet with consultants to analyze and correct problems that are causing deficiencies. The ACE report for the second quarter of FY2011 will reflect that this standard has been met.	Completed (ongoing)	This finding is pending correction.

Appendix C
Connecticut Public Employee Only State Plan
FY 2010 Enforcement Activity

	CT*	State Plan Total	Federal OSHA
Total Inspections	78	57,124	40,993
Safety	51	45,023	34,337
% Safety	65%	79%	84%
Health	27	12,101	6,656
% Health	35%	21%	16%
Construction	7	22,993	24,430
% Construction	9%	40%	60%
Public Sector	78	8,031	N/A
% Public Sector	100%	14%	N/A
Programmed	33	35,085	24,759
% Programmed	42%	61%	60%
Complaint	28	8,986	8,027
% Complaint	36%	16%	20%
Accident	3	2,967	830
Insp w/ Viols Cited	51	34,109	29,136
% Insp w/ Viols Cited (NIC)	65%	60%	71%
% NIC w/ Serious Violations	72.5%	62.3%	88.2%
Total Violations	229	120,417	96,742
Serious	103	52,593	74,885
% Serious	45%	44%	77%
Willful	-	278	1,519
Repeat	1	2,054	2,758
Serious/Willful/Repeat	104	54,925	79,162
% S/W/R	45%	46%	82%
Failure to Abate	-	460	334
Other than Serious	125	65,031	17,244
% Other	55%	54%	18%
Avg # Violations/ Initial Inspection	4	3.4	3.2
Total Penalties	\$14,815	\$ 72,233,480	\$ 183,594,060
Avg Current Penalty / Serious Violation	\$134.10	\$ 870.90	\$ 1,052.80
Avg Current Penalty / Serious Viol- Private Sector Only	N/A	\$ 1,018.80	\$ 1,068.70
% Penalty Reduced	50.6%	47.7%	40.9%
% Insp w/ Contested Viols	0.0%	14.4%	8.0%
Avg Case Hrs/Insp- Safety	37.9	16.2	18.6
Avg Case Hrs/Insp- Health	25.2	26.1	33
Lapse Days Insp to Citation Issued- Safety	100.1	33.6	37.9
Lapse Days Insp to Citation Issued- Health	62.3	42.6	50.9
Open, Non-Contested Cases w/ Incomplete Abatement >60 days	0	1,715	2,510

Appendix C
Connecticut Public Employee Only State Plan
FY 2011 (1st Qtr.) Enforcement Activity

	CT*	State Plan Total	Federal OSHA
Total Inspections	14	10,437	8,642
Safety	8	8,310	7,170
% Safety	57%	80%	83%
Health	6	2,127	1,472
% Health	43%	20%	17%
Construction	-	3,991	5,010
% Construction	0%	38%	58%
Public Sector	14	1,474	N/A
% Public Sector	100%	14%	N/A
Programmed	6	6,169	4,970
% Programmed	43%	59%	58%
Complaint	6	1,749	1,819
% Complaint	43%	17%	21%
Accident	-	624	198
Insp w/ Viols Cited	2	4,219	3,592
% Insp w/ Viols Cited (NIC)	14%	40%	42%
% NIC w/ Serious Violations	0.0%	62.8%	88.1%
Total Violations	38	29,218	21,855
Serious	10	12,882	16,882
% Serious	26%	44%	77%
Willful	-	119	179
Repeat	-	542	866
Serious/Willful/Repeat	10	13,543	17,867
% S/W/R	26%	46%	82%
Failure to Abate	-	72	42
Other than Serious	28	15,602	3,946
% Other	74%	53%	18%
Avg # Violations/ Initial Inspection	1.0	3.2	2.6
Total Penalties	\$2,520	\$24,905,784	\$ 47,759,899
Avg Current Penalty / Serious Violation	\$202.00	\$1,155.60	\$ 1,900.70
% Penalty Reduced	0.0%	45.1%	40.4%
% Insp w/ Contested Viols	0.0%	11.4%	8.9%
Avg Case Hrs/Insp- Safety	-	12.8	13.9
Avg Case Hrs/Insp- Health	-	19.9	22.5
Lapse Days Insp to Citation Issued- Safety	51.3	36.3	43.9
Lapse Days Insp to Citation Issued- Health	31.5	46.2	53.7
Open, Non-Contested Cases w/ Incomplete Abatement >60 days	0	1,548	2,622

Appendix D FY 2010 SAMM

U. S. D E P A R T M E N T O F L A B O R
O C C U P A T I O N A L S A F E T Y A N D H E A L T H A D M I N I S T R A T I O N
S T A T E A C T I V I T Y M A N D A T E D M E A S U R E S (S A M M s)

NOV 12, 2010

State: CONNECTICUT

RID: 0150900

MEASURE	From: 10/01/2009 To: 09/30/2010	CURRENT FY-TO-DATE	REFERENCE/STANDARD
1. Average number of days to initiate Complaint Inspections	250 8.92 28	31 10.33 3	Negotiated fixed number for each State
2. Average number of days to initiate Complaint Investigations	11 5.50 2	1 1.00 1	Negotiated fixed number for each State
3. Percent of Complaints where Complainants were notified on time	26 100.00 26	2 100.00 2	100%
4. Percent of Complaints and Referrals responded to within 1 day -ImmDanger	0 0	0 0	100%
5. Number of Denials where entry not obtained	0	0	0
6. Percent of S/W/R Violations verified			
Private	0 0	0 0	100%
	95	20	

Public	100.00	100.00	100%	
	95	20		
7. Average number of calendar days from Opening Conference to Citation Issue				
	4853	507	2624646	
Safety	138.65	72.42	47.3	National Data (1 year)
	35	7	55472	
	1784	0	750805	
Health	84.95	0	61.9	National Data (1 year)
	21	0	12129	
8. Percent of Programmed Inspections with S/W/R Violations				
	25	5	93201	
Safety	69.44	62.50	58.4	National Data (3 years)
	36	8	159705	
	1	0	10916	
Health	100.00	0	50.9	National Data (3 years)
	1	0	21459	
9. Average Violations per Inspection with Vioations				
	104	10	428293	
S/W/R	1.85	1.42	2.1	National Data (3 years)
	56	7	201768	
	125	26	240266	
Other	2.23	3.71	1.2	National Data (3 years)
	56	7	201768	
10. Average Initial Penalty per Serious Violation (Private Sector Only)	0	0	509912690	
	0	0	1360.4	National Data (3 years)
			374823	
11. Percent of Total Inspections in Public Sector	78	5	490	
	100.00	100.00	100.0	Data for this State (3 years)
	78	5	490	
12. Average lapse time from receipt of Contest to first level decision	0	0	3826802	
	0	0	217.8	National Data (3 years)
	0	0	17571	
13. Percent of 11c Investigations Completed within 90 days	0	0	100%	
	.00			
	2	0		

14. Percent of 11c Complaints that are Meritorious	2	0	1461	
	100.00		21.2	National Data (3 years)
	2	0	6902	
15. Percent of Meritorious 11c Complaints that are Settled	2	0	1256	
	100.00		86.0	National Data (3 years)
	2	0	1461	

Appendix D FY 2011 (1st Qtr.) SAMM

U. S. D E P A R T M E N T O F L A B O R
O C C U P A T I O N A L S A F E T Y A N D H E A L T H A D M I N I S T R A T I O N
S T A T E A C T I V I T Y M A N D A T E D M E A S U R E S (S A M M s)

JAN 28, 2011

State: CONNECTICUT

RID: 0150900

MEASURE	From: 10/01/2010 To: 12/31/2010	CURRENT FY-TO-DATE	REFERENCE/STANDARD
1. Average number of days to initiate Complaint Inspections	89 14.83 6	110 15.71 7	Negotiated fixed number for each State
2. Average number of days to initiate Complaint Investigations	32 10.66 3	32 10.66 3	Negotiated fixed number for each State
3. Percent of Complaints where Complainants were notified on time	6 100.00 6	7 100.00 7	100%
4. Percent of Complaints and Referrals responded to within 1 day -ImmDanger	0 0	0 0	100%
5. Number of Denials where entry not obtained	0	0	0
6. Percent of S/W/R Violations verified			
Private	0 0	0 0	100%

Public	42 100.00 42	43 100.00 43	100%	
7. Average number of calendar days from Opening Conference to Citation Issue				
Safety	507 72.42 7	507 72.42 7	2625962 47.3 55504	National Data (1 year)
Health	89 44.50 2	89 44.50 2	750457 61.9 12126	National Data (1 year)
8. Percent of Programmed Inspections with S/W/R Violations				
Safety	5 55.56 9	5 55.56 9	93174 58.3 159845	National Data (3 years)
Health	0 0 0	0 0 0	10933 50.9 21488	National Data (3 years)
9. Average Violations per Inspection with Vioations				
S/W/R	10 1.11 9	10 1.11 9	428333 2.1 201739	National Data (3 years)
Other	28 3.11 9	28 3.11 9	240454 1.2 201739	National Data (3 years)
10. Average Initial Penalty per Serious Violation (Private Sector Only)				
	0 0 0	0 0 0	510318849 1361.5 374828	National Data (3 years)
11. Percent of Total Inspections in Public Sector	14 100.00 14	15 100.00 15	490 100.0 490	Data for this State (3 years)
12. Average lapse time from receipt of Contest to first level decision				
	0 0 0	0 0 0	3778069 213.2 17717	National Data (3 years)
13. Percent of 11c Investigations Completed within 90 days				
	0	0	100%	

		0			0		
14. Percent of 11c Complaints that are Meritorious		0			0		1464
		0			0		21.2
		0			0		6912
		0			0		
15. Percent of Meritorious 11c Complaints that are Settled		0			0		1257
		0			0		85.9
		0			0		1464

National Data (3 years)

National Data (3 years)

Appendix E

State Indicator Report (SIR)

Not Applicable for CONN-OSHA

Appendix F

Connecticut FY 2010 State SOAR Annual Report (SOAR)

Available Separately