

Appendix A
Indiana State Plan
FY 2010 Enhanced FAME Follow-up Report Prepared by Region V
Summary of New and Continuing Findings and Recommendations

Rec #	Findings	Recommendations	Related FY 09 Rec #
10-1	While performing safety and health inspections, IOSHA staff decides on behalf of witnesses and employees whether their interviews will have their names attached to the interviews.	Provide all witnesses with information that clearly explains their rights, especially with regard to confidentiality prior to all interviews. Ensure employees and witnesses who are interviewed are provided the opportunity to decide if their name or other personal information should be included as part of their interview documentation or statement.	New
10-2	Finding 10-2: Two files were reviewed where no verification of abatement was found. Recommendation 10-2: IOSHA should obtain abatement verification for all files where abatement is required. When verification of abatement is not provided by the employer, follow-up should be conducted.	IOSHA should obtain abatement verification for all files where abatement is required. When verification of abatement is not provided by the employer, follow-up should be conducted.	New
10-3	Complaint investigations and inspections were timely. However, the files did not always contain an updated OSHA-7 with all pertinent actions in it. Copies of all letters required to be sent by IOSHA were not found in the file. The missing letters were notification letters to Complainants and where appropriate, to Respondents, and inspection result letters, specifically to the unions. The diary logs did indicate that the employer and union letters were sent. No diary log entries indicated that Complainant acknowledgement letters were sent. There was also no evidence that IOSHA sent the Certificate of Posting (COP) to the employer when appropriate.	All appropriate entries should be made on the OSHA-7, and an updated OSHA-7 should be maintained in the file. These entries should be performed in accordance with OSHA Instruction 03-06 (IRT 01) (03-06 (ADM 01)), and the IMIS Enforcement Data Processing Manual, Table of Contents and Chapters 1 and 7. All notification letters should be sent and, when appropriate, the COP.	09-3
10-4	There was not always adequate documentation that supported that a complaint item did not exist. A note in the file is not normally adequate; however, IOSHA did frequently address complaint items through photos and interviews. Thirteen out of 15 files that were associated with exposure to hazardous substances did not contain any sampling information or justification as to why sampling was not necessary.	While the OSHA Field Inspection Reference Manual CPL 2.103 does not allow for Compliance Safety and Health Officers (CSHOs) to make their own decisions about what supporting documentation is needed to document a hazard, documentation is not required to be present to support that a hazard does not exist. It is recommended that documentation in the file shows that all complaint items have been evaluated. When addressing complaints about exposure to contaminants,	09-4

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	Documentation of interviews and related safety and/or health programs were not in the files. Notes with a list of employees interviewed were in the files; however, the files did not contain documentation of the interviews.	an explanation should be provided when sampling was not conducted.	
10-5	Files were not maintained in an orderly manner. Not all file sections were tabbed with contents, files were not completely bound, and not all the files contained paper or electronic copies of digital records. Furthermore, staff that may need access to the files did not always have the software and hardware required to access the file information.	A paper copy of the electronic documents should be placed in every file. Files should be orderly and all documents bound.	09-6
10-6	While employee interviews were always indicated as being performed, in eight out of 36 files nothing beyond contact information was listed in the file.	Better documentation proving exposure should have been provided to support citations. One file reviewed indicated that all the citations were deleted due to lack of employee exposure documentation.	09-17
10-7	Although generated and distributed monthly, Supervisors are not utilizing IMIS reports to track abatement.	Supervisors must consistently review the IMIS reports to track abatement and update the IMIS in a timely manner.	09-22
10-8	In some cases, abatement was not late as the employer had been informally granted extra time to submit abatement. One file was reviewed where the employer had petitioned for a modification of abatement due date. The time requested was not noted. The Supervisor did not note any discussion with the employer; however, abatement was submitted at a much later date than the original due date.	Require employers to follow procedures for PMA and ensure that IMIS is timely updated to reflect any extensions granted.	09-23
10-9	Although several IMIS management reports are being generated and distributed to the management team on a monthly basis, the majority of the reports are not being used effectively.	IOSHA must establish a system for the proper handling and review of IMIS management reports. Consideration should be given to the importance of the report when determining the frequency with which it is generated and distributed (weekly, bi-weekly, or monthly).	09-30

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10-10	IOSHA conducted one follow-up inspection during FY2009. IMIS reports are not utilized to identify cases requiring follow-up inspections.	IOSHA must begin using IMIS reports to identify and assign establishments requiring follow-up inspections.	09-36
10-11	Electrical hazards cited were classified as serious only 48% of the time and fire protection in construction was classified as serious two times while being cited a total of 71 times.	Review classification of electrical and fire hazard violations in both Construction and General Industry to ensure consistency with the Field Operations Manual and within IOSHA.	09-37