

# **FY 2014 Follow-Up Federal Annual Monitoring and Evaluation (FAME) Report**

**State of Alaska**

**Department of Labor and Workforce Development  
Labor Standards and Safety Division –  
Alaska Occupational Safety and Health (AKOSH)**



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## I. Executive Summary

### A. State Plan Activities, Themes, and Progress

The purpose of this report is to assess Alaska Occupational Safety and Health’s (AKOSH’s) performance during Fiscal Year (FY) 2014 with regard to activities mandated by the Occupational Safety and Health Administration (OSHA) and to gauge the State Plan’s progress toward resolving recommendations from the FY 2013 Federal Annual Monitoring and Evaluation (FAME) Report. This report assesses the State Plan’s achievement of its annual performance plan goals, as well as its progress toward the goals in its Five-Year Strategic Plan.

AKOSH’s overall performance, with respect to activities that are mandated by the Occupational Safety and Health (OSH) Act, and its implementation of policies and regulations are in need of significant improvement at this time.

AKOSH has not met its annual inspection goal since FY 2006. With the exception of FY 2013, the state has missed its goal routinely by a fairly large margin, which may be largely due to ongoing staff turnover. The State Plan’s inspection history is referenced below in Tables 1 and 2. The data reference the official end-of-year State Activity Mandated Measures (SAMM) Report, which indicates the State Plan’s status toward achieving its annual inspections goals.

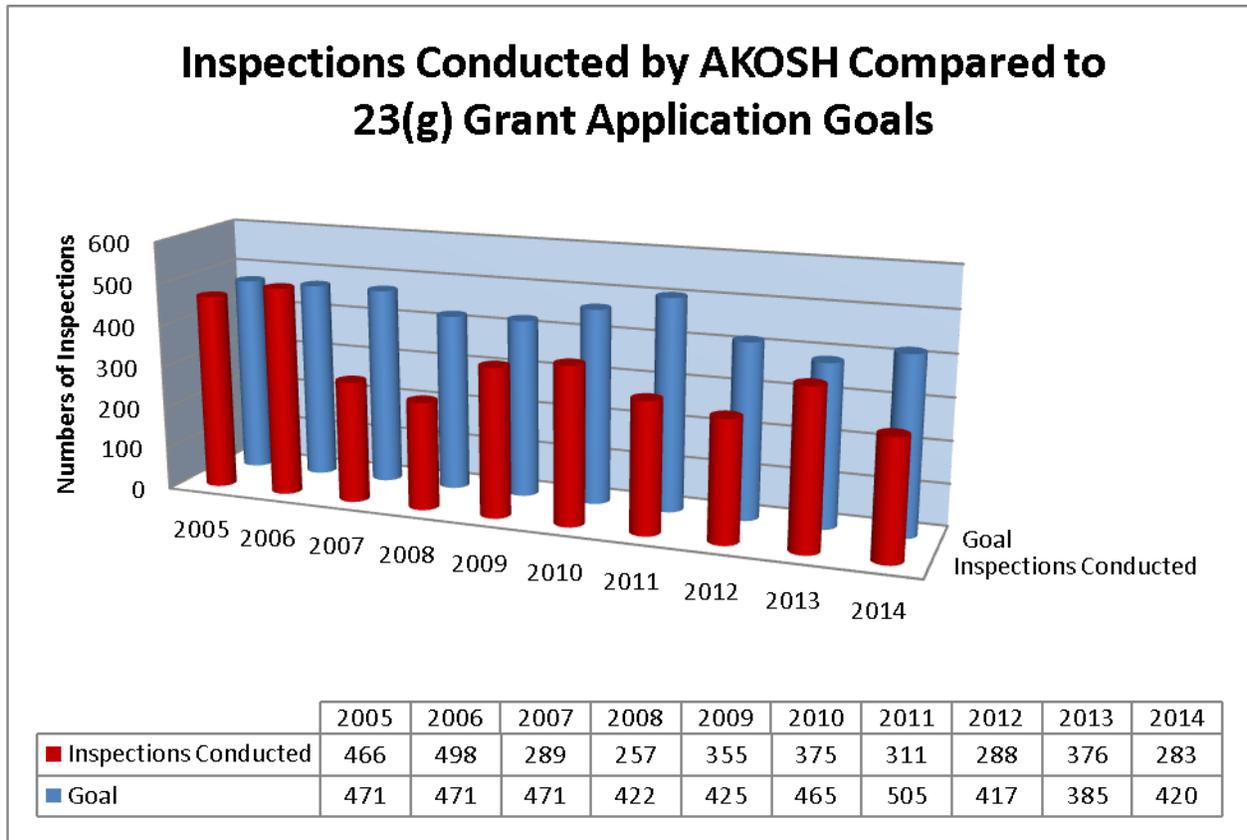
**Table 1**

<b>AKOSH Inspections Conducted FY 2005 – FY 2014 (SAMM 17)</b>										
<b>Inspections</b>	<b>FY 2005</b>	<b>FY 2006</b>	<b>FY 2007</b>	<b>FY 2008</b>	<b>FY 2009</b>	<b>FY 2010</b>	<b>FY 2011</b>	<b>FY 2012</b>	<b>FY 2013</b>	<b>FY 2014</b>
<b>Goal</b>	471	471	471	422	425	465	505	417	385	420
<b>Conducted</b>	466	498	289	257	355	375	311	288	376	283
<b>Difference</b>	(5)	27	(182)	(165)	(70)	(90)	(194)	(129)	(9)	(137)
<b>% of Goal</b>	98%	105%	61%	61%	84%	81%	62%	69%	98%	67%

The official FY 2014 end-of-year SAMM from OSHA’s National Office indicates AKOSH conducted 283 inspections, which is 67% of the annual goal.

Table 2 represents the data of AKOSH’s inspections conducted for each year from FY 2005 through FY 2014 compared to the approved inspection goals submitted in the state’s 23(g) grant application in August preceding each new fiscal year:

**Table 2**



A continuing concern with the AKOSH program is the practice of conducting inspections without performing a visit to the employer’s site or its establishment. While OSHA recently passed regulations requiring employers to report the overnight hospitalization of employees, amputations, and loss of an eye, the State of Alaska has had a similar regulation for many years. Regardless, AKOSH does not always conduct a thorough evaluation of the hazardous condition resulting in a hospitalization case, which is required by the AKOSH Field Operations Manual (FOM). OSHA recognizes that there may be circumstances where an inspection with an onsite component may not always be a useful allocation of resources. However, during this FAME evaluation period, OSHA identified three cases from a random selection of case files where an onsite inspection or investigation was not completed. The employer was merely cited for “failure to notify,” and the case was closed without any further investigation. Workers in the AKOSH program call this process an “arm chair inspection.” These types of incidents are not being thoroughly investigated in accordance with the AKOSH FOM. One specific case involved a worker who fell through a roof; the worker suffered life-threatening injuries and was

hospitalized for several weeks. Neither an onsite inspection nor a thorough investigation was evident from the documentation in the case file.

AKOSH continues to experience significant problems retaining compliance staff, which is affecting AKOSH's ability to meet its inspection goals and ensure the quality of its staff's work. In the past year, only four out of 10 enforcement compliance officers had more than five years of service with the AKOSH program. In FY 2014 alone, there were four resignations and one transfer of enforcement compliance officers, which is almost half of the allocated compliance officers. In addition, the majority of compliance staff (six of 11) have not completed, or are not on schedule to complete, their required core training development process as required by Alaska *Program Directive 09-02: Initial Training for Compliance Staff*. This directive requires compliance officers to complete eight core courses at the OSHA Training Institute within three years. Staff turnover and deficiencies in accomplishing required training have had a negative impact on the morale and work product of compliance officers as evidenced in case file reviews and supported by interviews of AKOSH workers during this evaluation period.

As a direct result of the staff turnover and training deficiencies, OSHA found case file documentation, abatement verification, and processing times are still problematic within the program. AKOSH has not completed case files within established timeframes for many years. During FY 2014, enforcement cases remained open for a timeframe nearly twice that of the national average, at 88 calendar days for safety cases and 120 days for health cases. AKOSH does not always mail letters to inform complainants and next-of-kin of the completion and results of complaints and fatality investigations. It was also found that AKOSH does not always ensure that case files are thoroughly reviewed and include the required exposure documentation, that all hazardous conditions are appropriately cited in all cases, and that abatement certification is completed in accordance with policy guidance in the FOM. In addition, it was discovered that AKOSH management is incorrectly modifying probability and severity in the originally-issued citations for purposes of settlement at informal conferences, resulting in employers receiving up to 80% reduction in total penalties without adequate justification. For public employers, the State Plan has improperly accepted safety and health program improvement cost receipts to be remitted in lieu of penalty payments. These findings are described in detail in Sections II and III of the report.

For these reasons, the State Plan's performance and its adherence to established policies and procedures need significant improvement at this time. Resolving these issues is critical for AKOSH to maintain funding and approval as a State Plan. AKOSH must make increased efforts to meet goals and improve enforcement activities in order to strengthen its administration and execution of the entire program.

## **B. State Plan Introduction**

The State of Alaska, under an agreement with OSHA, operates an occupational safety and health program through its Department of Labor and Workforce Development, Labor Standards and Safety Division, Occupational Safety and Health. The program operates in accordance with Section 18 of the OSH Act of 1970. The Alaska State Plan was approved July 31, 1973, and its developmental period under Section 18(e) of the OSH Act ended October 1, 1976. On

September 9, 1977, OSHA certified that the state had completed all developmental steps, as specified in its plan, and granted AKOSH final approval on September 26, 1984.

The head of Alaska’s Department of Labor and Workforce Development is Ms. Heidi Drygas, the Commissioner of Labor, who serves as the State Plan designee. The Director of the Labor Standards and Safety Division, Mr. Grey Mitchell, manages the Occupational Safety and Health Section.

AKOSH exercises jurisdiction over all private sector employers with the exception of the following: Denali National Park; Metlakatla Indian Reservation; maritime industries; federal government-owned, contractor-operated (GOCO) Native Health Care Facilities; and select military installations. The state has regulatory authority in state and local government workplaces. OSHA covers all excepted employers noted above, as well as federal agencies.

There are relatively few differences between AKOSH’s standards and those of OSHA. AKOSH has its own regulations for logging and oil and gas operations. The state also has a regulatory requirement that employers report incidents that result in one or more workers being hospitalized.

During FY 2014, the State Plan was staffed with 12 compliance officers (six safety, six health) and 11 consultants. The compliance officer positions include the program analyst (assistant chief) and discrimination officer. The program covers approximately 331,828 workers employed in 22,214 establishments statewide. AKOSH’s federally-approved state OSHA program was funded at \$3,067,200, of which \$1,377,600 were federal funds.

Alaska administers a combined onsite consultation program under 21(d) and 23(g) funding. AKOSH’s 11 consultant positions are a combination of 21(d), 23(g), and 100% state-funded. These consultants provide services to both state and local government and private employers.

Table 3 below shows AKOSH’s funding levels from FY 2010 through FY 2014.

**Table 3**

<b>FY 2010-2014 Funding History</b>					
<b>Fiscal Year</b>	<b>Federal Award (\$)</b>	<b>State Plan Match (\$)</b>	<b>100% State Funds (\$)</b>	<b>Total Funding (\$)</b>	<b>% of State Plan Contribution</b>
<b>2014</b>	\$1,377,600	\$1,377,600	\$312,000	\$3,067,200	55%
<b>2013</b>	\$1,369,800	\$1,369,800	\$396,408	\$3,136,008	56%
<b>2012</b>	\$1,429,400	\$1,429,400	\$223,699	\$3,082,499	54%
<b>2011</b>	\$1,501,924	\$1,501,924	\$514,048	\$3,517,896	57%
<b>2010</b>	\$1,478,963	\$1,478,963	\$750,109	\$3,708,035	60%

Table 4 shows the number of AKOSH’s full-time staff at the end of FY 2013 going into FY 2014. The only changes to 50/50 funded full-time equivalent (FTE) positions on board at the end of FY 2014 were that the first-line supervisor was no longer on board, health compliance

officers increased to 4.00, public sector safety consultants decreased to 2.10, and clerical increased to 5.10. This resulted in an end-of-year for FY 2014 on board FTE total of 20.00.

**Table 4**

<b>FY 2014 Staffing</b>					
<b>23(g) Grant Positions</b>	<b>Allocated FTE Funded 50/50</b>	<b>Allocated FTE 100% State Plan Funded</b>	<b>Total</b>	<b>50/50 Funded FTE On Board as of 08/15/13</b>	<b>100% State Plan Funded FTE On Board as of 08/15/13</b>
Managers/ Supervisors (Administrative)	1.64	0.00	1.64	1.64	0.00
First-Line Supervisors (Program)	1.00	0.00	1.00	1.00	0.00
Safety Compliance Officers	6.00	0.00	6.00	5.00	0.00
Health Compliance Officers	5.50	0.00	5.50	2.50	0.00
Public Sector Safety Consultants	2.80	0.00	2.80	2.45	0.00
Public Sector Health Consultants	1.00	0.00	1.00	0.70	0.00
Compliance Assistance Specialist	1.00	0.00	1.00	1.00	0.00
Clerical	5.10	0.00	5.10	4.42	0.00
Other ( <i>all positions not counted elsewhere</i> )	0.50	0.00	0.50	0.50	0.00
<b>Total 23(g) FTEs</b>	<b>24.54</b>	<b>0.00</b>	<b>24.54</b>	<b>19.51</b>	<b>0.00</b>

### **C. Data and Methodology**

OSHA has established a two-year cycle for the FAME process. This is the follow-up year, and as such, OSHA did not perform the level of review associated with a comprehensive FAME. This strategy allows the State Plan to focus on correcting deficiencies identified in the most recent comprehensive FAME.

Monitoring of the State Plan consisted of a variety of methods and tools. The opinions, analyses, and conclusions described herein are based on information obtained from these sources, including:

- Analysis and monitoring of the FY 2013 AKOSH Corrective Action Plan, which provides the State Plan’s status and response to the FY 2013 FAME (Appendix C);
- Statistical reports comparing state performance to federal performance;

- SAMM Report data (Appendix D);
- Mandated Activities Report for Consultation data;
- State Information Report data;
- The FY 2014 State OSHA Annual Report (SOAR) prepared by AKOSH, which contains details of the state's achievements with respect to its annual goals;
- Grant assurances;
- Quarterly monitoring meetings between OSHA and the State Plan;
- Case file reviews of 47 inspection files (consisting of 11 programmed inspections, 10 complaints/referrals, 23 hospitalization accidents, and three fatalities); and
- Interviews with the Chief of Enforcement and compliance staff.

The review of the AKOSH State Plan also included the participation of OSHA's Anchorage Area Director in four quarterly meetings with the State Plan and additional onsite meetings during the evaluation period. The Area Director and Anchorage Area Office staff conducted other monitoring, as needed, with the State Plan to include case file reviews, program reviews, and periodic technical assistance. OSHA worked closely with top AKOSH management to collaborate on ideas, initiatives, methods, and means of protecting workers. Additionally, OSHA has initiated enhanced communications with the Alaska Commissioner of Labor and the Director of Labor Safety and Standards in order to reinforce OSHA's support of the State Plan.

Over a period of five days onsite, 47 enforcement case files were reviewed. All case files were reviewed to assess the quality of documentation, violation classification, penalty calculations, abatement verification, settlement, and other factors as appropriate in order to verify corrective actions taken to address FY 2013 FAME findings. The case files were randomly chosen using a random numbers table. This assessment resulted in new and continuing findings and recommendations which are discussed in Sections II and III of this report.

#### **D. Findings and Observations**

The FY 2014 FAME Report on AKOSH includes a total of 13 findings, five of which remain open and continued from the FY 2013 FAME Report. Two previous observations were converted to new findings, and two observations were continued from FY 2013 for further monitoring. Section II of the report provides details of each of the current findings and recommendations. Appendix A lists the new and continued findings and recommendations. Appendix B lists new and continued observations.

In FY 2013, OSHA identified nine findings and four observations. The state made satisfactory progress to complete corrective actions for four of the findings. AKOSH's actions were adequate to resolve those issues, and OSHA considers the findings complete. As noted above, two observations from the previous FAME Report were converted to new findings, and two observations were continued. Section III of the report provides detail of the statuses of all FY 2013 findings and recommendations. Appendix C lists all the FY 2013 findings and recommendations and their statuses.

#### **Completed or Closed FY 2013 Findings and Recommendations**

AKOSH completed corrective actions for four of the nine findings from the FY 2013 FAME Report. Based on documentation noted during the case file reviews, AKOSH has taken satisfactory corrective action to ensure compliance officers have adequate monitoring equipment and are conducting appropriate health sampling in accordance with the AKOSH FOM. Corrective action was evident in violation processing and penalty application. Appropriate gravity-based penalties were documented using accurate probability and severity calculations; and the correct penalty reduction factors, such as history and good faith, were appropriately applied. Additionally, in FY 2014, AKOSH increased its presence in the seafood processing industry by conducting more inspections at these workplaces. The action by AKOSH to correct these items in one evaluation cycle is notable.

### **FY 2014 Findings**

Findings FY 2014-1 through FY 2014-8 are new for this evaluation period. Although all of these items are considered serious enough to be raised as new findings, three issues are noteworthy and impact the overall effectiveness and administration of the State Plan's program. The issues are as follows: (1) AKOSH management adjusts penalty reductions at informal conferences; (2) AKOSH allows public employers to remit receipts for improvement costs for their safety and health programs rather than paying a traditional penalty; and (3) AKOSH compliance staff are not receiving the required initial safety and health training in the established three-year timeframe.

Findings FY 2014-9 through FY 2014-13 are continued from FY 2013. AKOSH's efforts to correct these items show little, if any, improvement from the comprehensive FY 2013 FAME Report. In particular, AKOSH conducts inspections with no onsite component where a thorough investigation was not completed through worker and management interviews, and assurances of hazard abatement are not affirmed. For example, in three hospitalization incidents, there was no indication in the case files that hazard abatement was completed by the employer and affirmed by AKOSH prior to closing the cases. In all three instances, the "inspection" was conducted entirely by telephone or only included a site visit to the employer's corporate office, not the actual location of the incident. A visit to the incident locations and/or conducting worker interviews to verify hazard abatement would have been appropriate in all three cases. Without AKOSH's verification of hazard abatement, more workers could be exposed to the hazard(s) that caused the initial hospitalization.

## **II. Assessment of State Plan Performance**

### **A. Major New Issues**

As shown in Tables 1 and 2 of the Executive Summary, AKOSH has not consistently met its inspection goals over the last five years. With the exception of FY 2013, AKOSH inspection totals have been significantly below target.

During the previous five fiscal years, AKOSH has encountered significant staff turnover rates within its enforcement program. These high turnover rates have had a substantial impact on

AKOSH’s ability to meet its inspection goals established in each year’s 23(g) federal funding grant application. A total of 10 AKOSH compliance officers have resigned in the past five fiscal years, and two have transferred to consultation. Of the 12 staffed enforcement positions, only four individuals have remained with AKOSH for more than five years. As a result, AKOSH has experienced a 75% turnover rate in its staff within a five-year period.

Table 5 below shows the turnover of AKOSH enforcement personnel during the past five years between FY 2010 and FY 2014.

**Table 5**

<b>AKOSH Turnover in Enforcement Personnel (FY 2010 – 2014)</b>					
	<b>FY 2014</b>	<b>FY 2013</b>	<b>FY 2012</b>	<b>FY 2011</b>	<b>FY 2010</b>
<b>Allocated Positions</b>	11.5	11.5	11.5	12.5	12.5
<b>Staffed Positions</b>	12	12	12	13	13
<b>Resignations of Compliance Safety and Health Officers</b>	4	1	0	5	0
<b>Transfers to Consultation</b>	1	0	1	0	0
<b>New Hires</b>	4	1	5	1	0
<b>Year-End Vacancies (Safety/Health)</b>	1 Safety	1 Safety/ 2 Health	1 Safety/ 2 Health	3 Safety/ 3 Health	1 Safety/ 1 Health

Another major issue during this period was that the quality of inspections continued to deteriorate. This issue was noted during the FY 2013 Comprehensive FAME and was encountered again during onsite case file reviews this monitoring period. This deterioration may be attributed to staffing and management turnover, as well as a lack of completion of required core training for new hires. Lapse times have also steadily increased over the last five years and have now reached, on average, three months lapse from opening conference to issuance of safety related-citations and four months lapse from opening conference to issuance of health-related citations.

Below are new findings noted in case file reviews during this evaluation period:

AKOSH management was found to be incorrectly reducing penalties at the time of informal conferences. This process entailed adjusting the initial severity and probability of violations and applying an additional reduction for good faith in return for prompt hazard abatement. The original severity and probability should not be altered from the originally issued citation. When this happens, the initial penalty is permanently altered and lost in the Integrated Management

Information System (IMIS) and misrepresents any final penalty data and reductions for the violation. This practice is not acceptable.

Based on a review of 47 case files, there was little evidence written in the settlement notes to justify a change or additional reduction in severity or probability by management. As a result of this practice, many of Alaska's private employers have received a total reduction in penalties of as much as 80% in FY 2014.

In addition, management was allowing state and local agencies to settle public employer cases by remitting receipts for improvement costs for their safety and health programs rather than pay a traditional penalty. There is no provision in AKOSH's FOM for this process to be an acceptable practice. AKOSH's FOM refers to the payment of monetary penalties, not application of program improvements (receipts), in lieu of penalty payments.

**Finding FY 2014-1:** AKOSH adjusts penalty reductions for purposes of settlement at informal conferences by modifying the initial probability and severity of violations post-issuance, which is not a routinely acceptable practice.

**Recommendation FY 2014-1:** Ensure all penalty adjustments, made for purposes of settlement at informal conferences, are modified appropriately and documented in the inspection case file.

**Finding FY 2014-2:** AKOSH allows public employers to remit cost receipts for safety and health program improvements in lieu of penalty payments.

**Recommendation FY 2014-2:** Ensure only monetary penalties are collected from public employers as appropriate, and/or ensure the AKOSH FOM is revised to address this policy.

Next, AKOSH has not corrected a large number of reject and draft forms (e.g. inspections, complaints, etc.) in IMIS over the past year. This has resulted in increased difficulty in making a true determination of AKOSH progress toward achieving its inspection goals and monitoring the State Plan during FY 2014. At the end of the evaluation period, there were 55 rejects and draft inspection forms in IMIS. Additionally, AKOSH entered and saved 283 inspections into IMIS as indicated by the end-of-year SAMM Report for FY 2014. Per the State Plan's own data, there are a number of inspections which were not counted in the official SAMM data because the inspections were not correctly entered and saved into IMIS as required.

**Finding FY 2014-3:** The State Plan did not maintain accurate data in IMIS.

**Recommendation FY 2014-3:** Ensure AKOSH data is accurate by training administrative and compliance staff to correct all reject and draft forms and save inspections appropriately as "final" once entered into IMIS and/or OIS.

Also, in FY 2014, there were two Complaints About State Program Administration (CASPA's) investigated. Both cases resulted in findings and recommendations to the state. Two findings

identified during this evaluation period also relate to similar findings resulting from the investigation of CASPAs A-86 and A-87.

CASPA A-86 involved a fatality case in Haines, Alaska where an inspection was conducted by telephonic means with no onsite investigation. AKOSH continues to investigate incidents without performing onsite inspections of the related incident site. It was identified during the FY 2014 case file review that citations are being issued to employers without compliance staff actually visiting the incident sites and conducting onsite investigations. The majority of the inspections conducted without a site visit were hospitalization cases where the employer failed to notify AKOSH of the worker's injury. In most of these cases, citations were issued for "failure to notify" the State Plan of an in-patient hospitalization, but there was no documentation or information in the case files indicating whether the hazard was abated and why a site visit was not accomplished. This finding is reported in Section III of this report as Finding FY 2014-11 (Continued and Revised FY 2013-1).

CASPA A-87 involved several complainants who were not sent the results of their complaint following a single inspection. OSHA determined that AKOSH did not follow its policies and procedures for complaint inspections regarding sending complainants a letter detailing the results of AKOSH's inspection. Although the State Plan agreed to take corrective action on the recommendations for CASPA A-87, evidence revealed during the FY 2014 case file review showed that in 50% of the reviewed complaint cases, letters to complainants for formal complaints were not documented or maintained in the case files. While only six complaints were reviewed, three of the cases did not have a letter sent to the complainant providing the results of the inspection. This issue is again noted as a finding in this report.

**Finding FY 2014-4:** In 50% of formal complaint case files reviewed, AKOSH did not ensure letters were sent to complainants providing the results of the inspections.

**Recommendation FY 2014-4:** Ensure all complainants are sent letters regarding the results of formal complaint inspections.

In 10 out of 47 (21%) case files reviewed, there were obvious safety and health violations that should have been cited based on photographs and/or notation documented in the case files. The hazards that were identified to have associated violations supported in the case files, but were not cited, included fire and chemical exposures (e.g. lack of personal protective equipment).

**Finding FY 2014-5:** In 21% of case files reviewed, citations were not issued for all violations of hazards observed during the inspection and documented in the case file.

**Recommendation FY 2014-5:** Ensure management conducts a comprehensive and thorough review of all case files prior to issuance of citations.

Moreover, AKOSH completed four fatality investigations during FY 2014. Of those four investigations, only two had next-of-kin letters maintained and documented in the case files. In accordance with the established policies and procedures for fatality inspection, a letter is required

to be sent to the next-of-kin of the victim. This has been the subject of previous findings in FAME Reports for this State Plan in past years.

**Finding FY 2014-6:** In 50% of the case files reviewed, condolence letters and inspection results were not sent to the next-of-kin in accordance with the AKOSH FOM.

**Recommendation FY 2014-6:** Ensure next-of-kin are sent condolence letters and inspection results at the completion of fatality investigations and copies of the letters are maintained in the case file.

Additionally, in FY 2015, a CASPA was received alleging that AKOSH was not adhering to established policies and procedures regarding the administration of its program. Due to the sensitive nature of the complaint items, and in accordance with CASPA procedures, an investigation was conducted by OSHA's Anchorage Area Office. Details of the CASPA will be included in the next comprehensive FAME Report.

## **B. Assessment of State Plan Progress in Achieving Annual Performance Goals**

AKOSH established a Five-Year Strategic Plan for the period from October 1, 2013 (FY 2014) through September 30, 2018 (FY 2018), which included short- and long-range objectives aimed at improving safety and health for Alaska's workers. AKOSH developed and submitted its FY 2014 Annual Performance Plan in support of its Strategic Plan as part of its grant application for federal funds. The State Plan met more than half of its annual goals for FY 2014. Only one goal stood out as requiring significant improvement, raising it to a finding. Satisfactory progress was made with respect to the other annual goals. A finding was noted, and a recommendation was made where OSHA found need for significant improvement of compliance officer training of the core courses within the specified three-year timeframe. This issue is discussed below in the results for Annual Performance Goal 3.1a.

The following is OSHA's assessment of AKOSH's performance compared to its FY 2014 annual goals:

***Strategic Goal 1: Improve workplace safety and health in both the public and private sectors as evidenced by a reduction in the rate of injuries, illnesses, and fatalities.***

**FY 2014 Outcome Goal 1.1** – By the end of 2018, reduce the rate of workplace fatalities caused by circumstances that are under AKOSH jurisdiction by 10% as compared to the rate from the previous five-year period.

**FY 2014 Performance Goal 1.1** – Concentrate on the primary causes of fatalities and the industries where fatalities take place by focusing AKOSH efforts to Goals 1.2, 1.3, and 1.4.

**Results** – The total number of fatalities during FY 2014 was four, with an actual fatality rate of 1.19 for the period. The target rate was 1.53 fatalities per 100,000 workers.

**OSHA Assessment** – AKOSH met this goal.

**FY 2014 Outcome Goal 1.2** – Reduce the number of worker injuries and illnesses in the construction industry by focusing compliance, consultation, and outreach efforts on the causes of “struck by” and “falling” incidents.

**FY 2014 Performance Goal 1.2** – Reduce the lost time injury and illness rate in the construction industry as determined by the number of lost time injuries and illnesses per hundred employees by 2%.

**Results** – The injury and illness rate for the construction industry rose 0.08 from the target goal of 1.50.

**OSHA Assessment** – AKOSH did not meet the annual performance goal. Although the State Plan had a positive influence on the construction industry from its enforcement presence, in combination with its consultation and compliance assistance component, the goal was not reached. OSHA will continue to monitor this goal in FY 2015.

**FY 2014 Outcome Goal 1.3** – Reduce the number of worker injuries and illnesses in the transportation and warehousing industry sector by focusing compliance, consultation, and promotion efforts on the causes of “struck by,” “falling,” and “caught in or between” incidents.

**FY 2014 Performance Goal 1.3** – Reduce the lost time injury and illness rate in the transportation and warehousing industry sector by 2%.

**Results** – AKOSH reached its target goal of 1.29. This was a decrease of 3% from 1.32.

**OSHA Assessment** – AKOSH met this goal.

**FY 2014 Outcome Goal 1.4** – Reduce the number of worker injuries and illnesses in the seafood processing industry by focusing compliance, consultation, and outreach efforts on the causes of “falling,” “caught in or between,” and “pinch-point” (or amputation) incidents.

**FY 2014 Performance Goal 1.4** – Reduce the lost time injury and illness rate in the seafood processing industry as determined by the number of lost time injuries and illnesses per hundred employees by 2%.

**Results** – AKOSH’s annual target rate goal of 4.88 per 100 workers was attained with an actual outcome rate of 3.17.

**OSHA Assessment** – AKOSH met this goal.

**FY 2014 Outcome Goal 1.5** – Respond effectively to legal mandates so Alaskan workers are provided protection under the AKOSH Act.

**FY 2014 Performance Goal 1.5a – Initiate inspections of fatalities and catastrophes (three or more hospitalizations) within one working day, and initiate inspections for two or less hospitalizations within seven working days for 90% of occurrences to prevent further injuries or deaths.**

**Results** – AKOSH has achieved an outcome of 100% timely responses to fatalities and catastrophes.

**OSHA Assessment** – AKOSH met this goal.

**FY 2014 Performance Goal 1.5b – Initiate inspections within seven working days or investigations within one working day of worker complaints for 90% of the cases.**

**Results** – AKOSH has achieved an outcome of 98% timely responses to complaint inspections and 100% of timely responses to investigate complaints using a phone and fax method. The total outcome is 99% timely responses to all complaints within the time limit goals.

**OSHA Assessment** – AKOSH met this goal.

**FY 2014 Performance Goal 1.5c – Resolve 75% of all discrimination cases within 90 days.**

**Results** – AKOSH did not meet the annual goal for timely resolution of discrimination investigations. AKOSH resolved 55% of discrimination cases within 90 days. OSHA will continue to monitor this issue on FY 2015.

**OSHA Assessment** – AKOSH did not meet this goal. The State Plan lost its 11(c) discrimination investigator early in this evaluation period and the occupational safety and health analyst, who was a supervisor and reviewer of the 11(c) investigation case files, later in the period. OSHA identified the lack of discrimination investigation staff during its second quarter meeting with the State Plan in Anchorage. AKOSH responded by assigning a compliance officer to conduct both enforcement and discrimination investigations. OSHA has provided support and training to this individual to ensure discrimination cases are being conducted and reviewed in accordance with policy and procedure. It is anticipated that the lapse time for discrimination cases will decrease as the investigator gains more experience and skill in conducting these types of investigations. OSHA will continue to monitor this goal in FY 2015.

***Strategic Goal 2: Promote a safety and health culture in the Alaskan workplace (both public and private sectors) through compliance assistance, cooperative programs, and consultation assistance.***

**FY 2014 Outcome Goal 2.1 – Promote safety and health programs in the workplace.**

**FY 2014 Performance Goal 2.1a** – Develop and deliver training to workers and employers in the construction industry that targets the most likely causes of injuries, illnesses, and fatalities.

**FY 2014 Performance Goal 2.1b** – Develop and deliver training to workers and employers in the transportation and warehousing industry sector that targets the most likely causes of injuries, illnesses, and fatalities.

**FY 2014 Performance Goal 2.1c** – Develop and deliver training to workers and employers in the seafood processing industry that targets the most likely causes of injuries, illnesses, and fatalities.

**Results** – AKOSH developed and delivered both formal and informal training to 1,343 workers in the three identified industries. This was 96% of the target goal.

**OSHA Assessment** – Despite the loss of four consultants during the year, the State Plan still achieved 96% of its annual performance goal and reached 1,343 workers. OSHA will continue to monitor this issue in FY 2015.

**FY 2014 Outcome Goal 2.2** – Promote cooperative partnership agreements and recognition programs as a means of lowering accident and fatality rates.

**FY 2014 Performance Goal 2.2a** – Maintain, at a minimum, 12 Voluntary Protection Program (VPP) participants.

**Results** – The Alaska VPP had 12 participants at the beginning of FY 2014. By year-end, there were 11 participants, with the program losing one company during the third quarter. Consequently, AKOSH did not achieve its annual goal.

**OSHA Assessment** – AKOSH did not meet this goal. Although there was adequate rationale for the loss of one employer in the VPP program due to ceasing operations in Alaska, the State Plan should consider reassessing the Alaska VPP and adjusting the goal accordingly for the remainder of the Strategic Plan period of FY 2014 – FY 2018. OSHA’s VPP and Consultation Manager will continue to monitor AKOSH’s activity with respect to this goal in FY 2015.

**FY 2014 Performance Goal 2.2b** – While maintaining, at a minimum, 12 Safety and Health Achievement Recognition Program (SHARP) participants, increase the number of SHARP participants by two.

**Results** – The SHARP had 12 participants at the beginning of FY 2014. At the end of FY 2014, AKOSH added four more sites, for a total of 16 by year-end.

**OSHA Assessment** – AKOSH met this goal.

***Strategic Goal 3: Secure public confidence in the development and delivery of AKOSH's programs and services through excellence.***

**FY 2014 Outcome Goal 3.1 – Ensure AKOSH staff is well-trained and knowledgeable and delivers services in a fair and consistent manner.**

**FY 2014 Performance Goal 3.1a – Work with OSHA Training Institute and Region X to address the issue of establishing regional training to ensure that compliance and consultation staff receive basic and specialized training necessary to effectively carry out this strategic plan.**

**Results** – Employment training records revealed six of the current compliance staff have not completed or are not on track to complete the eight required courses by the end of their third year of employment (a deficit of approximately 26 courses). This core competency training is required by AKOSH Initial Training for Compliance Officers Program Directive 09-02. The training directive outlines the required eight core training courses (seven classroom sessions and one online session) for compliance safety and health officers (CSHOs) to complete in their first three years of employment with the state.

**OSHA Assessment** – AKOSH did not meet the annual performance goal. AKOSH experienced high employee turnover rates among its enforcement staff during this monitoring period. The training records indicated there is a focus by management to ensure that first year training courses are completed (e.g. initial compliance course and the initial health or safety introductory course). After the coursework in the first year is complete, management does not ensure compliance officers accomplish the remaining required core courses within the three-year period.

In addition to its recommendation associated with Finding FY 2014-7, OSHA suggests that AKOSH consider changing this annual performance goal with the next grant submission to read “Work with OSHA Training Institute and Region X partners to assure that compliance and consultation staff complete required core training within established timeframes, and receive additional specialized training necessary to effectively carry out this strategic plan.” OSHA will continue to discuss this goal with the State Plan during the quarterly meetings in FY 2015.

**Finding FY 2014-7:** The State Plan has not implemented Program Directive 09-02 in that five compliance officers have not completed or are not on track to complete eight core development courses through the OSHA Training Institute in their first three years of employment.

**Recommendation FY 2014-7: Develop and implement a training plan to ensure all compliance staff completes core training within the established three-year timeframe.**

**FY 2014 Performance Goal 3.1b – Conduct quarterly self-audits of enforcement of enforcement and consultation case files to evaluate the effectiveness and consistency of services.**

**Results** – During FY 2014, AKOSH management began a review process for evaluating progress on enforcement and consultation case files.

**OSHA Assessment** – AKOSH met this goal. The Anchorage Area Director has collaborated with AKOSH management to improve the reviews for this performance goal.

Alaska’s more detailed report on its accomplishments with respect to its FY 2014 Annual Performance Plan can be found on the state’s website at <http://labor.state.ak.us/lss/> in the SOAR.

**C. Highlights from the State Activity Mandated Measures (SAMM)**

In many areas of the mandated activities reported in the SAMM, AKOSH has done well compared to the national average. Historically, Alaska has performed relatively well on the mandated activities with two exceptions, SAMMs 23 and 17, which have been and continue to be problematic for AKOSH.

Note: In FY 2013, SAMM 23 became the official mandated measure for lapse time, and SAMM 7 was measured for informational purposes only. However, the two measures are calculated differently and cannot easily be used as comparison measures. SAMM 7 calculates the lapse time from the open date of an inspection to the citation issuance date using calendar days; SAMM 23 measures lapse time from the opening date of the inspection to the citation issuance date using workdays. Due to the denominators also being different, the two measures are not able to be compared. Thus, OSHA continues to review SAMM 7 with AKOSH at each quarterly meeting as it is still an accurate and valuable indicator of lapse time trends, which also compares to previous years of monitoring the State Plan.

These measures look at how many inspections the state has conducted and how quickly they get citations issued so that hazards can be corrected in a timely manner. SAMM 7, *Issuance Lapse Time*, has been problematic for AKOSH in that they have incurred issuance lapse times that are almost double the national average. This means that hazards are potentially left unabated for longer periods than are necessary with workers potentially still exposed to the hazards. Lapse time continues to rise and is trending in the wrong direction. This has been an ongoing issue with the State Plan and has been addressed in the last eight FAME Reports. It is once again a continued finding during this evaluation period and is further discussed in Section III.

The following tables represent Alaska’s performance history for both industrial hygiene and safety citation lapse times. See Appendix D for details (SAMM 7, 23).

**Table 6**

<b>Citation Lapse Time (SAMM 7 - Open Date to Issue Date)*</b>				
<b>Safety/Health Lapse Time (Days)</b>	<b>FY 2014 Safety/Health</b>	<b>FY 2013 Safety/Health</b>	<b>FY 2012 Safety/Health</b>	<b>FY 2011 Safety/Health</b>
<b>Actual</b>	88/120	83 / 115	86 / 115	102 / 109
<b>National Average</b>	56 / 67	54 / 66	56 / 68	52 / 65
<b>Difference</b>	+32 / +53	+29 / +49	+30 / +47	+50 / +44

\*Due to recent mandated activity policy revisions during FY 2013, lapse time calculations during FY 2013 are now being monitored using SAMM 23 rather than SAMM 7 as used during previous years. The SAMM 7 information above is provided for informational purposes only.

AKOSH has only achieved its inspection goal once in the last 10 years of federal monitoring due to a variety of reasons, which includes personnel shortages and training of new personnel. This fiscal year, AKOSH achieved only two-thirds or 67% of the annual goal as measured by SAMM 17, which counts inspections that have been correctly entered into IMIS. AKOSH maintains it completed 80% of its goal this period based on the belief that a portion of inspections were incorrectly entered into IMIS and were not added into the total number of inspections on the SAMM Report. However, OSHA believes that the number of inspections in the SAMM is a more accurate indication of actual performance as the figures in the SAMM have been audited and are finalized. Regardless of whether the State Plan conducted 80% of its inspection goal, the issue and overall trend for the decade is the State Plan does not meet its established annual goals. This issue was not addressed as a finding in last year’s FAME because the State Plan came within 2.4% of its goal. AKOSH failed to meet its goal during FY 2014, and it is once again a finding.

**Finding FY 2014-8:** In accordance with official end-of-year SAMM data, AKOSH conducted 283 inspections in FY 2014, achieving only 67% of its annual goal of 420 inspections.

**Recommendation FY 2014-8:** Ensure established annual inspection goals are achieved through adequate planning and execution.

### **III. Assessment of State Plan Corrective Actions**

This section summarizes the findings and recommendations for the previous evaluation period and the State Plan’s progress in taking corrective action toward addressing the findings. In FY 2013, there were a total of nine findings, all of which relate to Alaska’s enforcement program. The statuses of corrective actions related to the findings and recommendations are provided in Appendix C. During FY 2013, four observations were included for purposes of future State Plan monitoring and are provided in Appendix B.

Overall, AKOSH made positive progress toward initiating and implementing corrective action for four of the findings. Five of the findings are continued because the issues still remain as supported by the FY 2014 case file review. There were two FY 2013 observations that were converted to findings in this report. An update of corrective action status for FY 2013 and FY 2014 recommendations will be provided in the FY 2015 Comprehensive FAME Report.

**Finding FY 2013-1:** In accordance with the AKOSH FOM, it was determined that the state did not perform onsite inspections at two work sites where incidents had occurred, requiring hospitalization of workers.

**Recommendation FY 2013-1 (Revised and Continued FY 2012-1):** In accordance with the AKOSH FOM, ensure that inspections include onsite visits to the incident sites. If the incident site is deemed unsafe, then AKOSH should select an alternative site, such as the employer's establishment location.

**Status:** AKOSH has continued to conduct inspections without visiting sites where incidents involving falls or other serious incidents have occurred. Three inspections were found during the FY 2014 follow-up FAME period where onsite inspections and/or assurances of abatement of hazards through thorough investigations were not completed. One incident involved a worker who fell through a roof and was hospitalized for weeks. The other incidents involved hospitalizations of workers who were injured in excavation and aviation accidents. In these cases, no investigations were conducted to determine if the conditions remained and whether the employers had abated the hazards. In addition, the employers were cited solely for not reporting the incidents and injuries to AKOSH. **This finding remains open and continued as Recommendation FY 2014-9.**

**Finding FY 2013-2:** During FY 2013, AKOSH's citation lapse times were 83 days for safety inspections and 115 for health inspections.

**Recommendation FY 2013-2 (Revised and Continued FY 2012-5):** Review the citation issuance process to determine the cause of the high occurrence of lapse time between opening an inspection and issuance of a citation. Develop and implement a resolution to ensure citations are issued timely and employers are put on notice to abate hazards in a timely manner.

**Status:** Lapse times for AKOSH during this evaluation period increased from FY 2013 remaining high above acceptable national averages at 69 days for safety and 100 days for health inspections (SAMM Measure 23). **This finding remains open and continued, to include FY 2014 data, as Finding FY 2014-10.**

**Finding FY 2013-3:** A review of documentation in health case files, found that appropriate industrial hygiene monitoring (air and noise sampling) was not being conducted by health compliance officers during inspections in accordance with policy and guidelines outlined in the Industrial Hygiene Technical Manual.

**Recommendation FY 2013-3 (Continued FY 2012-9): Ensure that health citations conform to policy on documentation of violations. Conduct industrial hygiene monitoring to confirm violations of health standards.**

**Status:** AKOSH has improved its industrial hygiene monitoring and is conducting appropriate active health sampling where required and not relying on employer provided monitoring. **OSHA considers this finding completed.**

**Finding FY 2013-4:** Penalties were not calculated correctly in accordance with the policies and procedures in the AKOSH FOM in that (1) compliance officers were not correctly calculating probability and severity to accurately reflect the most probable injury related to the identified hazard; and (2) in over 10% of all case files reviewed, it was found that “serious” occupational hazards were assessed incorrectly and issued as “other than serious.”

**Recommendation FY 2013-4: Ensure that penalty calculation factors, such as severity and probability and hazard classification, are calculated in a manner consistent with policy contained in the FOM.**

**Status:** Based on the FY 2014 case file review, penalty calculations made by compliance staff were appropriate and in accordance with the FOM. **This finding is considered completed.**

**Finding FY 2013-5:** In 10% of all case files reviewed, history and/or good faith reductions were inappropriately applied during violation processing when calculating the gravity-based penalty where documentation in the case files indicated the employer had history of violations in the previous three years and/or demonstrated a lack of an effective safety and health program. Employers should not have been given a penalty reduction for either history or good faith in those types of circumstances in accordance with the AKOSH FOM.

**Recommendation FY 2013-5: Ensure application of inspection penalty reductions, such as history and good faith, is in accordance with policy as contained in the FOM.**

**Status:** A review of case files in FY 2014 has shown this problem to be resolved. **This item is considered completed.**

**Finding FY 2013-6:** Legal sufficiency of enforcement citation documentation was not in accordance with the AKOSH FOM in that (1) documentation of hazard duration and frequency was found to be assessed incorrectly in 20% of reviewed case files; and (2) in 10% of case files reviewed, the Alleged Violation Description (AVD) did not accurately describe the hazard and location, nor did it correctly separate the AVD into instances in accordance with policy.

**Recommendation FY 2013-6: Ensure that duration and frequency of hazard exposures are annotated correctly in the case file and AVD are separated out by instance, clearly reflecting the hazard and its respective location according to policy contained in the FOM.**

**Status:** Inadequate documentation of duration and frequency and lack of specificity in the Alleged Violation Description were once again found to be a problem identified in over 40% of case files during the FY 2014 case file review. No progress on this item has been made during this evaluation period. OSHA will continue to monitor this item and work with the State Plan to make the appropriate corrections. **This item is open and continued as Finding FY 2014-11.**

**Finding FY 2013-7:** In 10% of all case files reviewed, abatement was not documented.

**Recommendation FY 2013-7:** Ensure that abatement is received, reviewed, and documented in all case files prior to closure and that all abatements are closed and verified at or prior to the 60-day state negotiated goal.

**Status:** Confirmation of abatement through certification by the employer was found to be problematic in over 30% of the case files reviewed during this evaluation period. There has been no progress on this item during this evaluation period. OSHA will continue to monitor this item and work with the State Plan to make the appropriate corrections. **This item is open and continued as Finding FY 2014-12.**

**Finding FY 2013-8:** Alaska's timely response rate for notification of intent regarding adoption of federal program changes and standards is 43% (4/7).

**Recommendation FY 2013-8:** Ensure responses to OSHA regarding intent of adoption of federal program changes and standards are within the time frame indicated on the Automated Tracking System (ATS) Notice.

**Status:** Alaska's timely response rate for notification of intent regarding adoption of federal program changes and standards during this evaluation period is still a problem. Its response rate was noted as 46% (6/11) for FY 2014. The State Plan responded that OSHA's ATS system notices were inconsistently delivered to the State Plan. OSHA's regional office staff readily communicates notices and reminders to the correct staff within AKOSH, as necessary. In addition, State Plans are required to routinely review the Federal Register for new standards and action items, as appropriate, in order to meet timelines for such standards. New OSHA Directives can be found on OSHA's website upon its effective date, which will normally precede the ATS notice by a few days. **This item is open and continued as Finding FY 2014-13.**

**Finding FY 2013-9:** In an industry with over 25,000 workers, where injury rates have increased for the third year in a row, only eight inspections were conducted in FY 2013. AKOSH is not effectively targeting the seafood processing industry as planned in its strategic and annual performance goals.

**Recommendation FY 2013-9 (Continued FY 2012-8):** AKOSH should re-evaluate its current targeting approach and implement a plan to increase its enforcement presence in the seafood processing industry toward its strategic and annual performance goals.

**Status:** AKOSH conducted 12 seafood processing inspections during the FY 2014 monitoring period, four of which were un-programmed inspections. In addition, the state has targeted the industry for increased consultation efforts by developing a seafood industry safety training which has helped to increase awareness and reduce injury rates in this high hazard industry. OSHA will continue to monitor the number of seafood inspections conducted in FY 2015. **This recommendation is considered completed.**

The status of new observations noted during this period are discussed in Section II of the report and provided in Appendix B. The status of observations noted in the FY 2013 FAME period is noted below:

**Observation FY 2013-OB-1:** AKOSH does not have specific guidelines for penalty reductions given during informal conferences.

**Status:** OSHA continued to observe this activity during the FY 2014 monitoring period and found that AKOSH is not following the FOM and is reducing penalties inappropriately by various methods such as: 1) routinely changing severity and probability after issuance to offer significant penalty reduction, and 2) offering additional penalty reductions in the informal conference that reduce the initial penalties by as much as 80%. In addition, it was found that AKOSH also allows public employers to pay their penalties through program improvement costs (receipts) in lieu of penalty payments to AKOSH. **This observation is converted to two new Findings FY 2014-1 and FY 2014-2.**

**Observation FY 2013-OB-2:** AKOSH does not formally review its targeting goals for effectiveness and improvement outside of SOAR goals. AKOSH should implement a review process to ensure targeting programs are effective in achieving safety presence in the high hazard industries.

**Status:** OSHA continued to observe this activity during the FY 2014 monitoring period and will continue monitoring this activity in FY 2015.

**Observation FY 2013-OB-3:** Unresolved Host rejects and documents in “Draft” form within the AKOSH IMIS system remain high.

**Status:** OSHA continued to monitor this activity during the FY 2014 monitoring period and found that this issue was problematic at various points during the year. At the conclusion of FY 2014, 55 inspections were in draft form status or rejected in the IMIS at the end of the year. **This observation is converted to a new Finding FY 2014-3.**

**Observation FY 2013-OB-4:** During the FY 2013 case file reviews, it was discovered that 30% of the case files were taking up to six months to close from the time both penalty payment and abatements certifications were received. Case files should be immediately closed upon satisfaction of all required abatement items and penalty payments.

**Status:** OSHA will continue to monitor this item during the FY 2015 monitoring period.  
**This observation remains open.**

## Appendix A – New and Continued Findings and Recommendations

### FY 2014 AKOSH Follow-Up FAME Report

FY 2014-#	Finding	Recommendation	FY 20XX-# or FY 20XX-OB-#
FY 2014-1	AKOSH adjusts penalty reductions for purposes of settlement at informal conferences by modifying the initial probability and severity of violations post-issuance, which is not a routinely acceptable practice.	Ensure all penalty adjustments, made for purposes of settlement at informal conferences, are modified appropriately and documented in the inspection case file.	FY 2013-OB-2
FY 2014-2	AKOSH allows public employers to remit cost receipts for safety and health program improvements in lieu of penalty payments.	Ensure only monetary penalties are collected from public employers as appropriate and/or ensure the AKOSH FOM is revised to address this policy.	FY 2013-OB-2
FY 2014-3	The State Plan did not maintain accurate data in IMIS.	Ensure AKOSH data is accurate by training administrative and compliance staff to correct all reject and draft forms and save inspections appropriately as “final” once entered into IMIS and/or OIS.	FY 2013-OB-3
FY 2014-4	In 50% of formal complaint case files reviewed, AKOSH did not ensure letters were sent to complainants providing the results of the inspections.	Ensure all complainants are sent letters regarding the results of formal complaint inspections.	
FY 2014-5	In 21% of case files reviewed, citations were not issued for all violations of hazards observed during the inspection and documented in the case file.	Ensure management conducts a comprehensive and thorough review of all case files prior to issuance of citations.	
FY 2014-6	In 50% of the fatality cases reviewed, condolence letters and inspection results	Ensure next-of-kin are sent condolence letters and inspection results at the completion of	

**Appendix A – New and Continued Findings and Recommendations**  
 FY 2014 AKOSH Follow-Up FAME Report

FY 2014-#	Finding	Recommendation	FY 20XX-# or FY 20XX-OB-#
	were not sent to the next-of-kin in accordance with the AKOSH FOM.	fatality investigations and copies of the letters are maintained in the case file.	
FY 2014-7	The State Plan has not implemented Program Directive 09-02 in that five compliance officers (add % of staff – roughly 45%) have not completed or are not on track to complete eight core development courses through the OSHA Training Institute in their first three years of employment.	Develop and implement a training plan to ensure all compliance staff completes core training within the established three-year timeframe.	
FY 2014-8	In accordance with official end-of-year SAMM data, AKOSH conducted 283 inspections in FY 2014, achieving only 67% of its annual goal of 420 inspections.	Ensure established annual inspection goals are achieved through adequate planning and execution.	
FY 2014-9	In accordance with the AKOSH FOM, it was determined that the state did not perform onsite inspections at two work sites where incidents had occurred, requiring hospitalization of workers.	In accordance with the AKOSH FOM, ensure that inspections include onsite visits to the incident sites. If the incident site is deemed unsafe, then AKOSH should select an alternative site such as the employer’s establishment location.	FY 2013-1  (Revised and Continued FY 2012-1)
FY 2014-10	During FY 2013, AKOSH’s citation lapse times were 83 days for safety inspections and 115 for health inspections; and during FY 2014, it was 88 days for safety inspections	Review the citation issuance process to determine the cause of the high occurrence of lapse time between opening an inspection and issuance of a citation. Develop and implement a	FY 2013-2  (Revised and Continued FY

## Appendix A – New and Continued Findings and Recommendations

FY 2014 AKOSH Follow-Up FAME Report

FY 2014-#	Finding	Recommendation	FY 20XX-# or FY 20XX-OB-#
	and 120 for health inspections.	resolution to ensure citations are issued timely and employers are put on notice to abate hazards in a timely manner.	2012-5)
FY 2014-11	Legal sufficiency of enforcement citation documentation was not in accordance with the AKOSH FOM in that (1) documentation of hazard duration and frequency was found to be assessed incorrectly in 20% of reviewed case files; and (2) in 10% of case files reviewed, the Alleged Violation Description (AVD) did not accurately describe the hazard and location, nor did it correctly separate the AVD into instances in accordance with policy.	Ensure that duration and frequency of hazard exposures are annotated correctly in the case file and AVD are separated out by instance, clearly reflecting the hazard and its respective location according to policy contained in the FOM.	FY 2013-6
FY 2014-12	In 10% of all case files reviewed, abatement was not documented.	Ensure that abatement is received, reviewed, and documented in all case files prior to closure and that all abatements are closed and verified at or prior to the 60-day state negotiated goal.	FY 2013-7
FY 2014-13	Alaska's timely response rate for notification of intent regarding adoption of federal program changes and standards is 43% (4/7).	Ensure responses to OSHA regarding intent of adoption of federal program changes and standards are within the time frame indicated on the Automated Tracking System (ATS) Notice.	FY 2013-8

**Appendix B – Observations Subject to New and Continued Monitoring**  
 FY 2014 AKOSH Follow-Up FAME Report

<b>Observation # FY 2014-OB-#</b>	<b>Observation# FY 20XX- OB-# or FY 20XX-#</b>	<b>Observation</b>	<b>Federal Monitoring Plan</b>	<b>Current Status</b>
n/a	FY 2013-OB-1	AKOSH does not have specific guidelines for penalty reductions given during informal conferences.	OSHA continued to monitor this activity during the FY 2014 monitoring period and found that AKOSH is not following the FOM for appropriately reducing penalties.	Converted to Findings FY 2014-1 FY 2014-2
FY 2014-OB-1	FY 2013-OB-02	AKOSH does not formally review its targeting goals for effectiveness and improvement outside of SOAR goals. AKOSH should implement a review process to ensure targeting programs are effective in achieving safety presence in the high hazard industries.	OSHA will continue monitoring this activity in FY 2015 by encouraging the State Plan to develop and implement its own internal review process for targeting.	Open
n/a	FY 2013-OB-3	Unresolved Host rejects and documents in “Draft” form within the AKOSH IMIS system remain high.	OSHA continued to monitor this activity during the monitoring period and found that this issue was problematic at various points during the year. At the conclusion of FY 2014, 55 inspections were in draft form status or rejected in the IMIS at the end of the year. The State Plan’s own data show there are some inspections which may not be counted for FY 2014 because the data was incorrectly entered and/or saved in IMIS.	Converted to Finding FY 2014-3
FY 2014-OB-2	FY 2013-OB-04	During the FY 2013 case file reviews, it was discovered that a high percentage of the case files reviewed were taking up to 6 months to close from the time both penalty payment and abatements certifications were received. Case files should be immediately closed upon satisfaction of all required abatement items and penalty payments.	The timely closure of case files could impact the discovery of unabated hazards and unpaid penalties. OSHA will continue monitoring this activity in FY 2015 by encouraging the State Plan to develop and implement a method for timely case file review and closure.	Open

**Appendix C - Status of FY 2013 Findings and Recommendations**  
 FY 2014 AKOSH Follow-Up FAME Report

FY 2013-#	Finding	Recommendation	State Plan Response/Corrective Action	Completion Date	Current Status and Date
<b>FY 2013-1</b>	It was determined that the State Plan did not perform onsite inspections at two work sites where incidents had occurred, requiring hospitalization of workers.	In accordance with the AKOSH FOM, ensure that inspections include onsite visits to the incident sites. If the incident site is deemed unsafe, then AKOSH should select an alternative site such as the employer's establishment locations.	Each report of injury is evaluated on the merits of the incident in concert with timeliness of reporting, location of incident and availability of resources, incident scene, evidence and witnesses. AKOSH will continue with the intent to meet the spirit and intent of the FOM by planning to physically respond to all serious injury/fatality incidents.	Ongoing	Open
<b>FY 2013-2</b>	During FY 2013, AKOSH's citation lapse times were 83 days for safety inspections and 115 for health inspections.	Review the citation issuance process to determine the cause of the high occurrence of lapse time between opening an inspection and issuance of a citation. Develop and implement a resolution to ensure citations are issued timely and employers are put on notice to abate hazards in a timely manner.	Once AKOSH has 100% trained /released CSHOs, a significant difference will be noticed in process time. The Program Manager is monitoring efforts to issue A.S.A.P. to reduce process time. Currently 60% of AKOSH CSHOs are new & probationary. We anticipate process times to improve as new CSHO and IH personnel become self-sufficient.	Ongoing	Open
<b>FY 2013-3</b>	A review of documentation in health case files found that	Ensure that health citations conform to	Additional monitoring equipment has been purchased and received.	8/18/14	Completed

FY 2013-#	Finding	Recommendation	State Plan Response/Corrective Action	Completion Date	Current Status and Date
	appropriate industrial hygiene monitoring (air and noise sampling) was not being conducted by health compliance officers during inspections in accordance with policy and guidelines outlines in the industrial hygiene technical manual.	policy on documentation of violations. Conduct industrial hygiene monitoring to confirm violations of health standards.	The equipment is being issued Safety CSHOs, and we are enhancing the available equipment to health Officers.		
FY 2013-4	Penalties were not calculated correctly in accordance with policies and procedures in the AKOSH FOM in that (1) compliance officers were not correctly calculating probability and severity to accurately reflect the most probably injury related to the identified hazard; and (2) in over 10% of all case files reviewed, it was found that “serious” occupational hazards were assessed incorrectly and issued as “other than serious.”	Ensure that penalty calculation factors, such as severity and probability and hazard classification, are calculated in a manner consistent with policy contained in the FOM.	AKOSH is monitoring penalty calculations during the informal process, to ensure compliance with FOM guidelines.	8/15/14	Completed
FY 2013-5	In 10% of all case files reviewed, history and/or good faith reductions were inappropriately applied during violation	Ensure application of inspection penalty reductions such as history and good faith, is	Good faith and injury-illness is monitored and recommended by CSHO and reviewed by AKOSH management prior to citation	8/15/14	Completed

FY 2013-#	Finding	Recommendation	State Plan Response/Corrective Action	Completion Date	Current Status and Date
	processing when calculating the gravity-based penalty where documentation in the case files indicated the employer had history of violation in the previous three years and/or demonstrated a lack of an effective safety and health program.	in accordance with policy as contained in the FOM.	issuance. All adjustments are verified prior to case upon close out.		
<b>FY 2013-6</b>	Legal sufficiency of enforcement citation documentation was not in accordance with the AKOSH FOM in the (1) documentation of hazard duration and frequency was found to be assessed incorrectly in 20% of reviewed case files; and (2) in 10% of case files reviewed, the Alleged Violation Description (AVD) did not accurately describe the hazard and location, nor did it correctly separate the AVD into instances in accordance with policy.	Ensure that duration and frequency of hazard exposures are annotated correctly in the case file and AVD are separated out by instance, clearly reflecting the hazard and its respective location according to policy contained in the FOM.	The frequencies are monitored during process and verified during issuance. The alleged violation description (AVD) will contain the instances, location and description for the employer to identify for abatement prior to the informal process.	Ongoing	Open
<b>FY 2013-7</b>	In 10% of all case files reviewed, abatement was not documented.	Ensure that abatement is received, reviewed, and documented in all case files prior to closure and that all abatements are closed and verified at or	Abatement is verified in the IMIS during the process, and is monitored after citation issuance to ensure that all abatement issues are verified during and after the Informal conference.	Ongoing	Open

FY 2013-#	Finding	Recommendation	State Plan Response/Corrective Action	Completion Date	Current Status and Date
		prior to the 60-day State Plan negotiated goal.			
<b>FY 2013-8</b>	Alaska's timely response rate for notification of intent regarding adoption of federal program changes and standards is 43% (4/7).	Ensure responses to OSHA regarding intent of adoption of federal program changes and standards are within the time frame indicated on the Automated Tracking System (ATS) Notice.	All division staff have been notified to respond within the time frame as per (ATS) notice.	Ongoing	Open
<b>FY 2013-9</b>	In an industry with over 25,000 workers, where injury rates have increased for the third year in a row, only eight inspections were conducted in FY 2013. AKOSH is not effectively targeting the seafood processing industry as planned in its strategic and	AKOSH should re-evaluate its current targeting approach and implement a plan to increase its enforcement presence in the seafood processing industry toward its strategic and	AKOSH goals for seafood industry, will work on tandem inspections with OSH for port established facilities. To date, AKOSH has completed 6 seafood inspections, has 12 on-going inspections. This is ongoing process and we foresee it	8/14/15	Completed

FY 2013-#	Finding	Recommendation	State Plan Response/Corrective Action	Completion Date	Current Status and Date
	annual performance goals.	annual performance goals.	continuing this type of inspection in future fiscal years.		

## Appendix D - FY 2014 State Activity Mandated Measures (SAMM) Report

### FY 2014 AKOSH Follow-Up FAME Report

OSHA is in the process of moving operations from a legacy data system (NCR) to a modern data system (OIS). During FY 2014, federal OSHA case files were captured on OIS, while most State Plan case files continued to be processed through NCR. Alaska opened 283 enforcement inspections in FY 2014. Of those, 283 inspections were captured in NCR, while 0 were captured in OIS. The SAMM Report, which is native to IMIS (a system that generates reports from the NCR), is not able to access data in OIS. Additionally, certain algorithms within the two systems are not identical. These challenges impact OSHA's ability to combine the data.

For FY14 we will use a format very similar to the one used for FY 2013. Below is an explanation of which data OSHA was able to use when calculating each metric.

- a. Measures 1 & 2 will use State Plan data for FY14 as captured in NCR and compared to the State Plan's negotiated number. Any State Plan data from OIS will not be considered due to irregularities in the algorithm between OIS and NCR.
- b. Measures 20a-b, 23, and 24 will use State Plan data for FY14 as captured in NCR and compared to the historical FY2011 national average (FY09-11). Any State Plan data from OIS will not be considered due to irregularities in the algorithm between OIS and NCR.
- c. Measures 5, 9, 11, 17, 19, 21, and 25 will use State Plan data for FY14 as tabulated manually to include both OIS and NCR data and compared to the fixed/negotiated/national numbers associated with them.
- d. Measures 13, 14 and 16 will be extracted from NCR (OIS conversion should not impact). National data will be pulled from WebIMIS for FY12-14.
- e. Measures 18a-e will use State Plan data for FY14 as captured in NCR. Any data from OIS will not be considered due to irregularities in the algorithm between OIS and NCR. Much like FY13, no national data will be available for comparison.
- f. Measure 22 will be excluded from the report (other than as a placeholder to demonstrate that it is one of the agreed upon metrics, but not one we can currently generate).
- g. Measure 4 will use State Plan data for FY 14 as captured in NCR.

<b>U.S. Department of Labor</b>				
Occupational Safety and Health Administration State Plan Activity Mandated Measures (SAMMs)				
State: Alaska			FY 2014	
<b>SAMM Number</b>	<b>SAMM Name</b>	<b>State Plan Data</b>	<b>Reference/Standard</b>	<b>Notes</b>
<b>1</b>	Average number of work days to initiate complaint inspections	9.2	7 days	State Plan data taken directly from SAMM Report generated through IMIS. The reference/standard is a negotiated number for each State Plan.
<b>2</b>	Average number of work days to initiate complaint investigations	0.16	1 day	State Plan data taken directly from SAMM Report generated through IMIS. The reference/standard is a negotiated number for each State Plan.
<b>4</b>	Percent of complaints and referrals responded to within 1 work day (imminent danger)	97.6%	100%	State Plan data taken directly from SAMM Report generated through IMIS.
<b>5</b>	Number of denials where entry not obtained	0	0	State Plan data taken directly from SAMM Report generated through IMIS and Open Inspection OIS Report.
<b>7a</b>	Average number of calendar days from opening conference date to citation issuance - Safety	88	56	State Plan data taken from SAMM Report generated through IMIS.
<b>7b</b>	Average number of calendar days from opening conference date to citation issuance - Health	120	67	State Plan data taken from SAMM Report generated through IMIS.

<b>9a</b>	Average number of violations per inspection with violations by violation type	2.27	SWR: 1.99	State Plan data taken from SAMM Report generated through IMIS and the Inspection Summary Report generated in OIS; national data was manually calculated from data pulled from both IMIS and OIS for Fiscal Years (FY) 2012-2014.
<b>9b</b>	Average number of violations per inspection with violations by violation type	1.33	Other: 1.22	
<b>11</b>	Percent of total inspections in the public sector	13.78%	14.29%	State Plan data taken from SAMM Report generated through IMIS and the Inspection Summary Report generated in OIS. The reference/standard is derived from the FY 14 grant application.
<b>13</b>	Percent of 11c Investigations completed within 90 calendar days	55%	100%	State Plan data taken directly from SAMM Report generated through IMIS; National data was pulled from WebIMIS for FY 2012-2014.
<b>14</b>	Percent of 11c complaints that are meritorious	45.45	24.8% meritorious	State Plan data taken directly from SAMM Report generated through IMIS; National data was pulled from WebIMIS for FY 2012-2014.
<b>16</b>	Average number of calendar days to complete an 11c investigation	103.09	90 Days	State Plan data taken directly from SAMM Report generated through IMIS; National data was pulled from WebIMIS for FY 2012-2014.
<b>17</b>	Planned vs. actual inspections - safety/health	200/83	325/95	State Plan data taken from SAMM Report generated through IMIS and the Inspection Summary Report generated in OIS; the reference standard number is taken from the FY 2014 grant application. The reference/standard is a negotiated number for each State Plan.
<b>18a</b>	Average current serious penalty - 1 -25 Employees	466.3		State Plan data taken directly from SAMM Report generated through IMIS.

<b>18b</b>	Average current serious penalty - 26-100 Employees	426.23		
<b>18c</b>	Average current serious penalty - 101-250 Employees	398.85		
<b>18d</b>	Average current serious penalty - 251+ Employees	1218.04		
<b>18e</b>	Average current serious penalty - Total 1 - 250+ Employees	658.64		
<b>19</b>	Percent of enforcement presence	1.69%	National Average 1.51%	Data is pulled and manually calculated based on FY 2014 data currently available in IMIS and County Business Pattern data pulled from the US Census Bureau.
<b>20a</b>	20a) Percent In Compliance – Safety	15.94	Safety - 29.1	State Plan data taken directly from SAMM Report generated through IMIS; current national data is not available. Reference data is based on the FY 2014 national average, which draws from the collective experience of State Plan and federal OSHA for FY 2009-2011.
<b>20b</b>	20b) Percent In Compliance – Health	13.46	Health - 34.1	
<b>21</b>	Percent of fatalities responded to in 1 work day	100%	100%	State Plan data is manually pulled directly from IMIS for FY 2013.
<b>22</b>	Open, Non-Contested Cases with Abatement Incomplete > 60 Days	n/a		Data not available.
<b>23a</b>	Average Lapse Time - Safety	68.85	43.4	State Plan data taken directly from SAMM Report generated through IMIS; current national data is not available. Reference data is based on the FY 2011

<b>23b</b>	Average Lapse Time - Health	99.89	57.05	national average, which draws from the collective experience of State Plan and federal OSHA for FY 2009-2011.
<b>24</b>	Percent penalty retained	45.72	66	State Plan data taken directly from SAMM Report generated through IMIS; current national data is not available. Reference data is based on the FY 2011 national average, which draws from the collective experience of State Plan and federal OSHA for FY 2009-2011.
<b>25</b>	Percent of initial inspections with employee walk around representation or employee interview	100	100%	State Plan data taken from SAMM Report generated through IMIS and the Inspection Where Workers Involved Report generated in OIS.