

FY 2014 Follow-up Federal Annual Monitoring and Evaluation (FAME) Report

**State of Michigan
Michigan Occupational Safety and Health Administration (MIOSHA)**



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I. Executive Summary

A. State Plan Activities, Themes, and Progress

The purpose of this follow-up Federal Annual Monitoring Evaluation (FAME) Report is to assess the State Plan's progress towards achieving performance goals established in their federal fiscal year (FY) 2014 Annual Performance Plan, and to review the progress in resolving outstanding findings and recommendations from previous FAME reports, with a focus on the FY 2013 Comprehensive FAME Report.

The Michigan Occupational Safety and Health Administration (MIOSHA) continues to consistently strive to meet all criteria for an effective State Plan. MIOSHA is generally responsive and expedites correction of any deviation from OSHA. As can be ascertained from previous FAME reports, MIOSHA continues to partner with OSHA, and is innovative in their approach to safety and health.

MIOSHA has corrected all findings from the FY 2013 Comprehensive FAME and they continue to seek better ways to conduct the business of safety and health. MIOSHA strongly encourages employers to be proactive and not reactive by developing a comprehensive safety and health program, and provides many incentives such as, but not necessarily limited to, penalty reductions; easy payment plans; expedited abatement incentives; training; and access to Consultation Education and Training (CET).

B. State Plan Introduction

MIOSHA functions under an Operational Status Agreement with the Occupational Health and Safety Association (OSHA). Mike Zimmer is the Director of Licensing and Regulatory Affairs (LARA). Martha B. Yoder is the Director of MIOSHA and Barton G. Pickelman is the Deputy Director.

The mission of MIOSHA is to help protect the safety and health of Michigan workers. The vision of MIOSHA is to enhance the quality of life and contribute to the economic vitality in Michigan. MIOSHA extends its protection to private, public, and municipal workers within the state. The program also covers non-Indian employers within Indian reservations and Indian employers outside the territorial boundaries of Indian reservations. MIOSHA does not have jurisdiction over federal agencies, United States Postal Service, maritime workers, household domestic workers, mine workers, and employers who own or operate businesses located within the boundaries of Indian reservations who are enrolled members of Indian tribes. Additionally, the State Plan does not cover commercial airline crew under specific standards such as, Hazard Communication, Blood-borne Pathogens, and Hearing Conservation as established by memorandum of understanding (MOU) with the Federal Aviation Administration.

MIOSHA divisions include: Administration, Technical Services Division, General Industry

Safety and Health Division, Construction Safety and Health Division, Consultation Education and Training Division, and MIOSHA Appeals Division. In FY 2013, MIOSHA was augmented by the Radiation Safety program. The Technical Services Division is responsible for standards adoption, information technology and laboratory operations. The General Industry Safety and Health Division (GISHD) is responsible for Compliance Program administration through conducting enforcement inspections in general industry workplaces. The Worker Discrimination Section is also included in the General Industry Safety and Health Division. The Construction Safety and Health Division (CSHD) is responsible for the administration of the Compliance Program through enforcement inspections related to construction. The Consultation Education and Training Division provides direct assistance and outreach to employers. The MIOSHA Appeals Division represents the agency in contested cases, and the Radiation Safety Section is responsible for safety compliance and outreach concerning radioactive sources used in the workplace. The MIOSHA Radiation Safety Section and Wage and Hour Programs are funded separately and receive 100% state funding.

In FY 2014, the State Plan's 23(g) grant included state and federal funds totaling \$20,452,650. MIOSHA overmatched the federal grant by \$728,250. The State Plan's current enforcement staff consists of 39 safety compliance officers, which is 81% of benchmark levels, and 26 industrial hygienists, which is 58% of benchmark levels, both of which show an increase in health of 4%, and essentially no change in safety from FY2013, which was 80% and 62% respectively. This data reflects July 2014 staffing levels. Since this data was submitted, the State Plan has been hiring additional staff, which will be accounted for in the next FAME.

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 case file review associated with a comprehensive FAME. This strategy allows the State Plan to focus on correcting deficiencies identified in the most recent comprehensive FAME.

On February 12, 2015, a limited onsite review of MIOSHA case files was conducted to verify MIOSHA's corrective actions taken to address Findings and Recommendations documented in the FY 2013 FAME Report. A total of 20 safety and health case files were selected for review, and included programmed and complaint inspections.

D. Findings and Observations

The FY 2013 FAME identified three findings and five observations, all of which have been corrected. A complete list of the FY 2013 findings and observations, as well as MIOSHA's progress in addressing each, is found in Appendix C, Status of FY 2013 Findings and Recommendations, and Appendix B, Observations Subject to New and Continued Monitoring.

There were no new findings or observations in this year's evaluation, and the State Plan has

shown continuous improvement in areas that were not findings or observations, but have potential to manifest into larger problems on future evaluations.

Of special note is the State Plan's progress on Observation FY 2013-OB-05 relating to MIOSHA lacking a procedure for developing Local Emphasis Programs (LEPs). MIOSHA has instituted a Residential Construction Initiative, which includes a Local Emphasis Program that covers the top five hazards in the industry. This program has had a major impact in reducing accidents in residential construction and increasing training and awareness for employers and workers alike. MIOSHA has implemented numerous other initiatives and emphasis areas and has adopted OSHA's emphasis programs when applicable.

MIOSHA's whistleblower program has made progress towards improvement on minor documentation issues found during the FY 2013 FAME Report through improved management of cases and potential cases.

II. Assessment of State Plan Performance

A. Major New Issues

None.

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

FY 2014 is the first year of the MIOSHA Five-Year Strategic Plan which spans FY 2014 - 2018. Information provided by MIOSHA has been reviewed and analyzed to assess their progress in meeting performance plan goals. The following summarizes the activities and/or accomplishments for each of the FY 2014 performance goals.

Strategic Goal #1

Help assure improved workplace safety and health for all workers, as evidenced by fewer hazards, reduced exposures, and fewer injuries, illnesses and fatalities.

Performance Goal 1.1: Reduce the rate of worker injuries and illnesses in 10 high-hazard industries by 15% (3% per year).

Results: See table below.

Discussion: In the first year, MIOSHA's Strategic Plan Emphasis 1.1a was a reduction of 15% (3% per year) injury and illness rates for 10 high-hazard industries. Six industries met their goal for a 3% reduction; two industries remained unchanged. Fabrication Metal Product Manufacturing saw a 1.6% increase.

MIOSHA developed a one-year local emphasis program for primary metals, which

resulted in a 50% decrease in injury and illness rates. OSHA suggests the development of a one-year local emphasis program for Fabricated Metal Product Manufacturing

Goal #	Industry	Baseline	Results	Comments
1.1A-1	Beverage and Tobacco Product Manufacturing	13.2	7.3	Decrease of 44.7%. First year goal was met.
1.1A-2	Primary Metals Manufacturing	10.2	5.1	Decrease of 50%. First year goal was met.
1.1A-3	Fabricated Metal Product Manufacturing	6.4	6.5	Increase of 1.6%. First year goal was not met.
1.1A-4	Machinery Manufacturing	5.4	5.4	No change from baseline. First year goal was not met.
1.1A-5	Transportation Equipment Manufacturing	7.0	6.8	Decrease of 2.9%. First year goal was not met.
1.1A-6	Support Activities for Transportation	4.2	3.8	Decrease of 9.5%. First year goal was met. **
1.1A-7	Warehousing and Storage	5.7	3.8	Decrease of 33.3%. First year goal was met.
1.1A-8	Hospitals	7.5	7.5	No change from baseline. First year goal was not met.
1.1A-9	Nursing and Residential Care Facilities	9.6	8.2	Decrease of 14.6%. First year goal was met.**
1.1A-10	Accommodations	4.7	4.3	Decrease of 8.5%. First year goal was met. **

** Goal is 3% reduction per year.

Performance Goal 1.2: Reduce by 15% (3% percent per year) the rate of worker injuries, illnesses, and fatalities in workplaces experiencing high rates or with targeted hazards or exposures not covered by Emphasis 1.1.

Results: Goal was partially met.

Discussion: This was a two-part goal.

- Part 1 was to reduce the incidence rate and total recordable cases (TRC) per 100 full-time workers by 15%. An 8.6 % reduction from 5.8 to 5.3 was obtained.
- Part 2 was to reduce the number of fatalities by 15%. There were five manufacturing fatalities for CY 2013. There was no change from baseline.

Goal #	Industry	Baseline	Results	Comments
Rate of Injuries & Illnesses	Manufacturing	5.8	5.3	Decrease of 8.6%. First year goal was met.**
# of Fatalities	Manufacturing	5	5	No change from baseline. First year goal was not met.

** Goal is a 3% reduction per year.

Performance Goal 1.3A: Decrease fatalities in the construction industry by 2% per year (10% total over five years).

Results: This goal was not met.

Discussion: A five-year average (CYs 2008-2012) of 8.10 fatalities/100,000 workers for Michigan was used as the baseline. CY 2013 had a fatality rate of 9.06, which is a 12% increase from the baseline. This does not meet the first year goal.

Performance Goal 1.3B: Reduce injuries and illnesses in the construction industry by 1% per year (5% total over five years).

Results: This goal was not met.

Discussion: The days away, restricted, transferred (DART) rate for CY 2012 was 1.9/200,000 hours. The DART rate for CY 2013 was 1.9. There was no change from the baseline.

Strategic Goal #2

Promote employer and worker awareness of, commitment to, and involvement with safety and health to effect positive change in the workplace culture.

Performance Goal 2.1: Safety and Health Management Systems (SHMSs) will be promoted during 100% MIOSHA visits. Sixty percent of employers in general industry that receive a subsequent MIOSHA visit will have a fully implemented SHMS or will have improved their SHMS.

Results: This goal was met.

Discussion: MIOSHA promoted the safety and health management system on 100% of the MIOSHA visits conducted. In FY 2014, CET consultants re-evaluated 21 companies; 20 of the 21 companies showed improvement. Of the 21, two had fully implemented SHMS.

Performance Goal 2.2: Increase awareness and participation in the MIOSHA Training Institute (MTI).

Results: This goal was met.

Discussion: MIOSHA wanted to increase the number of Level 2 certificate holders by 10% each year. In FY 2013, there were 43 new Level 2 certificate holders. In FY 2014, there were 48. This is an increase of 12%.

Performance Goal 2.3: Increase participation in MIOSHA cooperative programs.

Results: See table below.

Discussion: MIOSHA continued to promote their Cooperative Programs through press releases, media advisories, MIOSHA News and seminars. Two of four cooperative programs met the goal for the first year. Renewals and re-evaluations of cooperative programs exceeded their goal for the first year. The results of their activities are noted below.

	2014 Goal	2014 Results	Comments
MVPP	3	0	Did not meet goal
MVPP renewals	3	6	Exceeded goal
New CET			Did not meet

Awards	6	2	goal
Michigan Challenge	1	1	Met goal
New Alliances	1	1	Met goal
Alliances Renewals	2	1	Did not meet goal
MSHARPS	2	3	Exceeded goal
MSHARPS Renewals	2	9	Exceeded goal
Partnerships	1	4	Exceeded goal

Performance Goal 2.4: Communicate the benefits of workplace safety and health through initiatives and communication with employers and workers.

Results: This goal was met.

Discussion: Michigan industries (including state and local government) had a DART of 2.0 and TRC of 4.1 (BLS, 2012). In FY 2014, customer comment card satisfactory response rate was 98.2% useful. Michigan DART of 1.8 and TRC of 3.8 (BLS, 2013) equals a 10% decrease and a 7.3% decrease, respectively, for year one.

Strategic Goal #3

Strengthen public confidence through continued excellence in the development and delivery of MIOSHA’s programs and services.

Performance Goal 3.1A: Internal – Implement strategies that nurture collaboration among all MIOSHA team members to enhance effective communication and staff development.

Results: No data collected.

Discussion: MIOSHA last conducted an Organizational Culture Inventory (OCI) in 2009, a year ahead of the scheduled strategy. The next OCI is scheduled for 2015. The Internal Assessment of Management Strategies (IAMS) for Objective 3.1A of the Strategic Plan will be conducted in FY 2015. The purpose of the survey is to evaluate the key result areas of management strategies within MIOSHA. The survey consisted of 12 multiple choice questions. Each question contained a space to provide additional information and comments.

Performance Goal 3.1B: External – 95% of employers and workers who provide

customer service feedback rate their overall MIOSHA intervention(s) as useful in identifying and correcting workplace safety and health hazards.

Results: This goal was met.

Discussion: MIOSHA received 578 Comment/Suggestion Cards during Fiscal Year 2014. Results included the following:

1. 98.2% “Useful” on “How would you rate your overall experience with MIOSHA?”
2. 99.6% “Yes” on “Did you find the staff to be knowledgeable about worker safety and health issues?”
3. 99.8% “Yes” on “Did the staff explain how to correct the safety and health hazards they identified?”

Performance Goal 3.2A: Respond to 97% of complaints within 10 working days of receipt by MIOSHA.

Results: This goal was met.

Discussion: MIOSHA responded to 480 out of 483 complaints within 10 days (99.4%).

Performance Goal 3.2B: Ensure that 95% of non-contested cases have abatement complete within 60 workdays of the last abatement due date.

Results: Data is not available at the time of compiling this report.

Discussion: No baseline data is available because this is a new measure with data supplied by OSHA.

Performance Goal 3.2C: Respond to 95% of all Freedom of Information Act requests within five days.

Results: This goal was not met.

Discussion: For FY 2014, 606 of 682 Freedom of Information Act Requests, or 88%, were responded to within five working days.

Performance Goal 3.2D: Establish a priority and deadline for all standards assigned for promulgation. Promulgate 100% of standards required by OSHA within six months and 80% of the other standards within deadlines established by an annual standards promulgation plan.

Results: This goal was not met.

Discussion: MIOSHA did not promulgate any required standards within six months. The delay in promulgation was a result of a continued backlog of work within the Department of Licensing and Regulatory Affairs, and the Office of Regulatory Reinvention, which is outside the control of MIOSHA. It is anticipated the backlog will be eliminated in FY 2015.

MIOSHA promulgated 37% of all other standards within the deadlines established by annual standards promulgation plan. The delay in promulgation was a result of a continued backlog of work within the Department of Licensing and Regulatory Affairs, and the Office of Regulatory Reinvention, which is outside the control of MIOSHA. It is anticipated the backlog will be eliminated in FY 2015.

Performance Goal 3.3A: Assess the information systems necessary to collect performance data, acquire related IT equipment, and provide appropriate hardware and software training for all agency programs.

Results: This goal was met.

Discussion: All staff members are outfitted with a computer with a valid warranty. Monitor upgrades have been made and are being deployed. The analyst position is in the process of posting. Training was provided for the use of OIS. Reference materials were provided for the migration to Windows 7. Field staff has been outfitted with smart phones. Both Consultation and Enforcement reports are now deployed in OIS. Support for existing data systems is ongoing.

Performance Goal 3.3B: Assess options to provide new and better ways to deliver MIOSHA information and services to the public, and other agencies through the use of information technology such as the internet and mobile technologies. Make appropriate recommendations to agency administration and staff to implement the improvements.

Results: This goal was met.

Discussion: MIOSHA considered six different ways to meet this performance goal. They researched opportunities for outside vendors to create applications for the MIOSHA webpage for the public to utilize. MIOSHA looked at areas that could be shifted from paper to electronic communications. They looked to increase followers on Facebook and Twitter. MIOSHA moved its quarterly publication (MIOSHA News) to an electronic format and they looked to expand promotion of their emerging social media with the public and outside agencies. Finally, MIOSHA monitors responses to social media questions and comments and provides appropriate feedback to customers.

Performance Goal 3.4A: Connect MIOSHA to industry by increasing collaboration and communication to create collective ownership for workplace safety and health.

Results: This goal was met.

Discussion: MIOSHA’s goal was to develop and implement two new activities with external groups, external material or staff training sessions each year. MIOSHA implemented two staff training courses: “Valuing Differences” and “Building Bridges through Respect.” MIOSHA held seven “Coffee with MIOSHA” events. MIOSHA held one “Take a Stand day” event. MIOSHA launched a new “Residential Construction Initiative” which includes a Local Emphasis Program for safety enforcement, new webpage, letters to the home building industry, “Safety in Residential Construction” training seminars, a new residential inspection construction checklist, a “Building up Residential Safety Day” and new tool box packages delivered during inspections.

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

Data from the FY 2014 State Activity Mandated Measures (SAMM) Report was reviewed for deficiencies and notable changes. No significant deficiencies were identified during SAMM data review. Positive trends identified included increases in the average penalty per serious violation (SAMM # 18) and a decrease in the percent in compliance - health (SAMM # 20b).

While SAMM # 18 indicators are below the three year national average across all categories, the data shows that MIOSHA’s average penalties per serious violation are increasing. The average penalty per serious violation for employers with one to 250 workers increased from \$531.68 in FY 2013 to \$596.35 in FY 2014. Additionally, the average penalty per serious violation for employers with 251 or more workers increased from \$1313.45 in FY 2013 to \$1611.72 in FY 2014.

The SAMM # 20b decreased from 42.59% in FY 2013 to 32.48% in FY 2014, bringing MIOSHA’s percent in compliance for health inspections below the national average of 34.1%.

A complete listing of SAMM data is found in Appendix D, *FY 2014 State Activity Mandated Measures (SAMM) Report*.

III. Assessment of State Plan Corrective Actions

MIOSHA corrected all of the findings and observations identified in the FY 2013 FAME Report. There were no new findings in this year’s evaluation.

Finding 13-01: The date of receipt for complaints entered into the IMIS was determined to be the date the administrative staff received the complaint, not the actual day the complaint was received by MIOSHA. In accordance with OSHA Instruction ADM 1-1.31, “The IMIS

Enforcement Data Processing Manual,” Chapter IV, paragraph B.1, complainant information must be processed upon initial receipt of all complaints, except discrimination complaints.

Status: Completed. MIOSHA is currently processing all complaints upon initial receipt of all necessary information.

Finding 13-02: The verified abatement date was not being entered into IMIS in item 22 of the OSHA-1B. As a result, State Activity Mandated Measure #6, “Percent of Serious/Willful/Repeat Violations Verified,” did not reflect any hazards as being abated.

Status: Completed. MIOSHA is now entering the date abatement was verified in the OIS.

Finding 13-03: Documentation that worker representatives were given an opportunity to participate in all phases of workplace inspections was not included in all case files reviewed in accordance with Section 29(4) of the Michigan Occupational Safety and Health Act.

Status: Completed. All MIOSHA enforcement staff members were retrained on documentation procedures to indicate that worker representatives were given the opportunity to participate in all phases of workplace inspections.

Observation FY 2013-OB-01: Next-of-Kin letters were not consistently included in the case file in accordance with MIOSHA FOM, Chapter VI, paragraph I.B.2.e.

Status: Closed. MIOSHA is now ensuring that fatality case files adhere to their FOM.

Observation FY 2013-OB-02: The review of the whistleblower file found one instance where a “no jurisdiction” determination was incorrectly applied. The complainant was the co-worker, rather than the worker, injured and reporting the on-the-job injury. There were two instances of improperly applied “work refusal” and one instance of improper recording of multiple complainants, respondents and one versus two complaints. Discrimination cases were not always screened following MIOSHA’s policies and procedures.

Status: Closed. MIOSHA is now ensuring that whistleblower files follow the Intake and Screening and Work Refusal provisions identified in of CPL 02-03-003 and 29 CFR 1977.12(b)(2).

Observation FY 2013-OB-03: Six of the nine “settled or settled other” determination whistleblower files reveal deviation from the provisions of CPL 02-03-003, Chapter 6.

Status: Closed. MIOSHA is now ensuring that whistleblower files follow the settlement provisions identified in CPL 02-03-003 and 29 CFR 1977.12(b)(2).

Observation FY 2013-OB-04: One whistleblower case file contained a memo of a telephone conversation with the complainant that strongly suggested the complainant should consider withdrawing the complaint.

Status: Closed. MIOSHA is now ensuring that they follow the intake provisions identified in CPL 02-03-003 and 29 CFR 1977.12(b)(2).

Appendix A – New and Continued Findings and Recommendations

FY 2014 FY 2014 Michigan Follow-up FAME Report

FY 2014-#	Finding	Recommendation	FY 20XX-# or FY 20XX-OB-#
	None		

Appendix B – Observations Subject to New and Continued Monitoring

FY 2014 Michigan Follow-up FAME Report

Observation # FY 2013-OB-#	Observation	Federal Monitoring Plan	Current Status
FY 2013-OB-01	Next-of-Kin letters were not consistently included in the case file in accordance with MIOSHA FOM, Chapter VI, paragraph I.B.2.e.	OSHA will review fatality case files to ensure they adhere to their FOM.	Closed
FY 2013-OB-02	The review of the whistleblower file found one instance where a “no jurisdiction” determination was incorrectly applied. The complainant was the co-worker, rather than the worker, injured and reporting the on-the-job injury. There were two instances of improperly applied “work refusal” and one instance of improper recording of multiple complainants, respondents and one versus two complaints. Discrimination cases were not always screened following MIOSHA’s policies and procedures.	OSHA will review files to ensure they follow the Intake and Screening and Work Refusal provisions identified in of CPL 02-03-003 and 29 CFR 1977.12(b)(2).	Closed
FY 2013-OB-03	Six of the nine “settled or settled other” determination whistleblower files reveal deviation from the provisions of CPL 02-03-003, Chapter 6.	OSHA will review files to ensure they follow the settlement provisions identified in CPL 02-03-003 and 29 CFR 1977.12(b)(2).	Closed
FY 2013-OB-04	One whistleblower case file contained a memo of a telephone conversation with the complainant that strongly suggested the complainant should consider withdrawing the complaint.	OSHA will review files to ensure they follow the intake provisions identified in CPL 02-03-003 and 29 CFR 1977.12(b)(2).	Closed
FY 2013-OB-05	MIOSHA had not developed a procedure to approve Local Emphasis Programs, which includes but is not necessarily limited to a rationale, selection process, industries covered, and an evaluation for effectiveness of the program. When developing targeting programs, MIOSHA should include a formal policy to develop, approve, implement, and evaluate the targeted areas.	OSHA will review MIOSHA LEPs to determine if MIOSHA has included all the necessary elements to develop, implement and evaluate an effective targeting system.	Closed

Appendix C - Status of FY 2013 Findings and Recommendations

FY 2014 Michigan Follow-up FAME Report

FY 2013-#	Finding	Recommendation	State Plan Response/Corrective Action	Completion Date	Current Status and Date
13-01	The date of receipt for complaints entered into the IMIS was determined to be the date the administrative staff received the complaint, not the actual day the complaint was received by MIOSHA. In accordance with OSHA Instruction ADM 1-1.31, "The IMIS Enforcement Data Processing Manual," Chapter IV, paragraph B.1, complainant information must be processed upon initial receipt of all complaints, except discrimination complaints.	Process all complainant information upon receipt of complaint. Enter the actual date the complaint was received by MIOSHA into IMIS. Reevaluate the complaint process to reduce delays in processing complaints.	MIOSHA is currently processing all complaints upon receipt of all necessary information.	October 1, 2013	Completed
13-02	The verified abatement date was not being entered into IMIS in item 22 of the OSHA-1B. As a result, State Activity Mandated Measure #6, "Percent of Serious/Willful/Repeat Violations Verified," did not reflect any hazards as being abated.	Ensure the date abatement was verified is entered into the IMIS.	MIOSHA is now entering the date abatement was verified in the OIS.	October 1, 2014	Completed

Appendix C - Status of FY 2013 Findings and Recommendations
 FY 2014 Michigan Follow-up FAME Report

13-03	Documentation that worker representatives were given an opportunity to participate in all phases of workplace inspections was not included in all case files reviewed in accordance with Section 29(4) of the Michigan Occupational Safety and Health Act.	Document that “worker representatives,” as defined in the MIOSHA FOM Chapter V, Section 23, paragraph (a), are given an opportunity to participate in all phases of workplace inspections.	All MIOSHA enforcement staff members were retrained on documentation procedures to indicate that worker representatives were given the opportunity to participate in all phases of workplace inspections.	October 1, 2014	Completed
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Appendix D - FY 2014 State Activity Mandated Measures (SAMM) Report

FY 2014 Michigan 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. Michigan opened 4,738 enforcement inspections in FY 2014. Of those, 3,926 inspections were captured in NCR, while 812 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 FY13. 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.

U.S. Department of Labor				
Occupational Safety and Health Administration State Plan Activity Mandated Measures (SAMMs)				
State Plan: Michigan			FY 2014	
SAMM Number	SAMM Name	State Plan Data	Reference/Standard	Notes
1	Average number of work days to initiate complaint inspections	6.57	10 days	State Plan data taken directly from SAMM report generated through IMIS. The reference/standard is a negotiated number for each State Plan.

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

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2	Average number of work days to initiate complaint investigations	4.88	8 days	State Plan data taken directly from SAMM report generated through IMIS. The reference/standard is a negotiated number for each State Plan.
4	Percent of complaints and referrals responded to within 1 work day (imminent danger)	100.0%	100%	State Plan data taken directly from SAMM report generated through IMIS.
5	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.
9a	Average number of violations per inspection with violations by violation type	1.77	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.
9b	Average number of violations per inspection with violations by violation type	1.18	Other: 1.22	
11	Percent of total inspections in the public sector	1.94%	2.10%	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.
13	Percent of 11c Investigations completed within 90 calendar days	62%	100%	State Plan data taken directly from SAMM report generated through IMIS; National data was pulled from webIMIS for FY 2012-2014.
14	Percent of 11c complaints that are meritorious	22.44	24.8% meritorious	State Plan data taken directly from SAMM report generated through IMIS; National data was pulled from webIMIS for FY 2012-2014.

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

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16	Average number of calendar days to complete an 11c investigation	107.66	90 Days	State Plan data taken directly from SAMM report generated through IMIS; National data was pulled from webIMIS for FY 2012-2014.
17	Planned vs. actual inspections - safety/health	3788/950	3455/592	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.
18a	Average current serious penalty - 1 - 25 Employees	a. 270.70		State Plan data taken directly from SAMM report generated through IMIS.
18b	Average current serious penalty - 26-100 Employees	b. 656.09		
18c	Average current serious penalty - 101-250 Employees	c. 937.44		
18d	Average current serious penalty - 251+ Employees	d. 1611.72		
18e	Average current serious penalty - Total 1 - 250+ Employees	e. 596.35		
19	Percent of enforcement presence	2.70%	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.
20a	20a) Percent In Compliance – Safety	Safety - 30.21	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 Plans and federal
20b	20b) Percent In Compliance – Health	Health 32.48	Health - 34.1	

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

FY 2014 Michigan Follow-up FAME Report

				OSHA for FY 2009-2011.
21	Percent of fatalities responded to in 1 work day	90%	100%	State Plan data is manually pulled directly from IMIS for FY 2014.
22	Open, Non-Contested Cases with Abatement Incomplete > 60 Days	n/a		Data not available.
23a	Average Lapse Time - Safety	36.55	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 national average, which draws from the collective experience of State Plans and federal OSHA for FY 2009-2011.
23b	Average Lapse Time - Health	50.58	57.05	
24	Percent penalty retained	58.19	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 Plans and federal OSHA for FY 2009-2011.
25	Percent of initial inspections with employee walk around representation or employee interview	99.76%	100%	State Plan data taken from SAMM report generated through IMIS and the Inspection where Workers Involved report generated in OIS.