

FY 2009 New Jersey Public Employee Only State Plan (PEOSH) Enhanced FAME Report  
Prepared by Region II

**Summary of Findings, Recommendations, and Corrective Action Plan**

	Findings	Recommendations	PEOSH Response	Documentation Required with Due Date	Outcome Measures	Status *
1	The baseline special study revealed that IMIS data input and maintenance was not being managed in accordance with NJ OPEOSH and OSHA policy. Rejected forms were not being corrected, standard IMIS reports such as draft forms reports were not reviewed and uplinks and data transfer from the local IMIS to the NCR Host computer was not being ensured. In many instances data was not transferred from OPEOSH to the host resulting in inaccurate data available for evaluation, analysis, and review. (pp. 9-10, 24)	NJ OPEOSH must ensure Compliance Staff and Management complete required IMIS forms and ensure IMIS standard reports are reviewed on a regular basis to ensure proper IMIS database management. Corrective actions should include comprehensive IMIS data entry training. OSHA is prepared to assist NJ OPEOSH with IMIS training. (p.24)	The NJ OPEOSH has requested training from Region 2 for compliance staff in reference to IMIS NCR ongoing problems. PEOSH has also requested that staff be trained on running NCR/IMIS reports.  As of February 2010 NJ OPEOSH is now using and printing OSHA forms 91A, 91B, 92, 93 and 98. The OPEOSH is entering the required data into the IMIS system.	NJ OPEOSH has provided the Region with specific details concerning training requirements. NJ OPEOSH will request that OSHA Region 2 provide training in running management reports as well as a list of recurring problems that NJ OPEOSH is experiencing. NJ OPEOSH will provide detailed training requirements to OSHA Region 2. IMIS training was conducted by OSHA Region 2 on November 29, 2010.	NJ OPEOSH will use management reports to determine whether case files are being closed in a timely manner and that all case files are being transferred to the NCR. SAMM reports will be used to assess the effectiveness of the training and NJ OPEOSH managers will review case files on a weekly basis to assure that the all cases are transferred and closed out within the required time frames.	
2	OPEOSH consultants and management indicated employees are conferred with in all interventions and that they are having problems entering this data	OPEOSH Public Sector Consultation must ensure that consultants conferring with employees properly enter this data into the IMIS system. (p.35)	The NJ OPEOSH Consultation Supervisors are verifying evidence of employee involvement is properly entered into the IMIS system as part of the	As of November 15, 2010 DHSS CSHOs are completing the appropriate OSHA "90" forms, entering the data on the IMIS	Appropriate "90" forms are completed and a copy is in the case file. Supervisor review of case files now	

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	<p>into the IMIS. (p.34)</p> <p>A total of 18 Consultation case files were reviewed, including 10 safety and 8 health files. All safety and health case files reviewed were organized; however, each file lacked employer and employee interview documentation and sampling forms. (p. 65)</p>		<p>formal case file review process. OPEOSH has repeatedly requested training from OSHA Region 2 to help with ongoing NCR/IMIS issues.</p>	<p>and placing a copy of the form in each case file.</p> <p>As of November 15, 2010, the OPEOSH Consultation Supervisors will verify that evidence of employee involvement is properly entered into the IMIS system as part of the formal case file review process.</p> <p>As of November 15, 2010 DHSS consultants are completing the appropriate OSHA "90" form, entering the data on the IMIS and placing a copy of the form in the case file.</p>	<p>includes assuring that appropriate OSHA forms are completed and included in the case file.</p> <p>As of November 15, 2010 all DHSS case files include an OSHA 90 as required.</p>	

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3	The percent of serious hazards verified corrected in original time or on site is 12.77%. Out of the 329 total serious hazards identified, 42 were verified corrected on site and 37 were verified within the original time frame. The reference standard is 65%. (p.35)	OPEOSH Consultation must improve its performance in verifying the abatement of serious hazards in a timely manner. Delaying abatement verification until follow-up visits delays verification of hazards that can be abated quickly. (p.35)	This has been completed. The NJ OPEOSH is using the uncorrected hazard report which is run on a weekly basis, NJ OPEOSH Consultation Supervisors are currently identifying cases where abatement extends beyond established timeframes to ensure timely correction.	As of November 15, 2010 the OPEOSH Supervisors review the uncorrected hazard reports on a weekly basis to identify cases where abatement extends beyond established time frames.	OPEOSH Consultants will be notified as a reminder when abatement dates are exceeded. Consultants will contact the delinquent employers to expedite and verify abatement.	
4	The baseline special evaluation revealed PEOSH case file documentation is lacking, especially in safety cases. Case files reviewed lacked evidence of employee exposure, employer knowledge of the cited hazardous conditions, names and contact information for employee(s) interviewed and documentation addressing affirmative defense issues. In addition many files also did not include narratives or OSHA 1B forms or their equivalent (forms in which violations are documented). (pp. 8, 41)	Provide training to all field staff, including supervisory staff, to ensure that all inspection case file documentation meets the minimum requirements set forth in PEOSH's Field Inspection Reference Manual or Field Operations Manual and institutionalize established documentation requirements. (p.42)	Completed. This is being done.  Following OSHA Region 2 audit the NJ PEOSH management reviewed recommendations with field staff. Suggested changes were implemented and files are maintained with a check list to ensure that complete documentation is contained in each file.  Field staff is currently including the required NCR forms in all case files. NJ OPEOSH has repeatedly requested additional file management training from OSHA Region 2 in addition to NCR training	NJ OPEOSH implemented a procedure which includes a sample case file. This file contains the documents that are required to be turned in with each case. NJPEOSH managers return case files that are incomplete to field staff who are required to resubmit the case with the corrected documentation. OSHA Region 2 will be providing additional training to NJOPEOSH staff in reference to case file documentation. This training is scheduled for January 14, 2011.	Beginning on November 15, 2010 all case files submitted are being reviewed to ensure that they contain OSHA 1Bs (as appropriate), narrative reports documentation of employee exposure. Field staff will attend additional training scheduled for January 14, 2011 that will be provided by OSHA Region 2 in reference to case file documentation.  All case files will be required to contain all documentation outlined during the	

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					training.	
5	<p>A total of 9 fatality case files were reviewed by Region II Team members. A common theme with regard to these inspections is the lack of documentation in the case files. None of the fatality inspections had hard copies of OSHA 36 (Accident Report), or OSHA 170 (Findings of the Accident Investigation) forms.</p> <p>There was no evidence of next of kin letters, or other contact with the families, including notification of enforcement action in any of the fatality files. (p.42)</p>	<p>Provide training to CSHOs to reiterate the policies relating to fatality investigations including the following:</p> <ul style="list-style-type: none"> <li>• Proper procedures relating to making the appropriate communication to the family of victims (i.e. next of kin letters, inspection findings, etc.) and the requirement of documenting such communication in the file.</li> <li>• Implement internal controls to ensure that all fatality investigations are opened within a timeframe established by agency policy.</li> <li>• Provide training to all field staff, including supervisory staff, to</li> </ul>	<p>All next of kin are now notified of fatality investigations. Letters are sent for each file. This was implemented after the NJ PEOSH was notified at the closing conference of these requirements.</p> <p>All fatality investigations are opened within 1 day of the NJ PEOSH becoming aware. There have been no exceptions to this. This has always been the case.</p> <p>The only case in question in the audit was an automobile accident. The NJ OPEOSH responded immediately as soon as news of the fatality was discovered on the internet.</p> <p>This case would not normally be investigated because it was a motor vehicle accident. However, the NJ OPEOSH had concerns with police vehicle safety and therefore looked into the matter.</p>	<p>Immediately following the audit, NJ OPEOSH implemented a procedure that requires that a letter be sent to family of deceased employees. This procedure was implemented in February 2010</p>	<p>Following the audit all fatalities include notification letters to families of victims.</p> <p>NJ OPEOSH and OSHA Region 2 agree that all fatality investigations have been opened within 1 day of notification.</p>	

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		ensure that all accident/fatality investigations meet the minimum requirements of federal OSHA and the OPEOSH FOM or FIRM (i.e. providing detailed narrative documenting the facts that surround the incident, field notes, evidence of employee exposure, evidence of employer knowledge and completion of the appropriate forms (i.e. OSHA 36's and OSHA 170's)). (p.44)	All fatality investigations and reports are reviewed by NJ OPEOSH management. Updates on the status of these reports are completed weekly. All fatality investigations are discussed among management and staff. Comprehensive field notes are included in all files. OSHA 36's and 170's are completed for each file. These forms were not printed previously. Currently hard copies are included in all fatality files. These procedures have been reinforced with all field, management and support personnel.			
6	The state developed a new Strategic Plan that focused on four high hazard areas within the public sector. There were numerous inspections conducted in those specific NAICs codes, but there is no formal policy relating to targeting methodologies. (p.44)	OSHA recommends that OPEOSH develop consistent inspection selection criteria for the selection of sites within targeted NAICs codes for inspections that are opened as a result of unprogrammed activity (e.g., complaints and referrals, etc.) in targeted	The NJ PEOSH has a consistent inspection selection program and focuses on the facilities identified in the 5 year Strategic plan. The NJ OPEOSH prioritizes inspections and responds to complaints, imminent danger and planned inspections are per the methodology fully	NJ OPEOSH has a policy that all facilities identified within specific NAICs codes as listed in the 5 year strategic plan are inspected. Since the audit NJ OPEOSH has instructed field staff that all inspections in targeted industries are	NJ OPEOSH management is monitoring inspection activity and reviewing inspection logs to assure that targeted sites are being prioritized by field staff.	

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		<p>NAICs that have not recently received a comprehensive inspection are expanded to comprehensive inspections under the program. (p.48)</p>	<p>explained in the OPEOSH FIRM and the annual performance plan. Compliance staff focuses on targeted facilities. The NJ OPEOSH internal data base tracks these inspections. OPEOSH publishes a list of most frequently cited violations on a quarterly basis. Targeted inspections are coded by their proper NAICS and logged into the OPEOSH internal data base and IMIS. All targeted inspections are scheduled to be comprehensive. Proper NAICS codes are assigned and tracked in OPEOSH's internal data base.</p>	<p>to be comprehensive.</p>		

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7		<p>OPEOSH should develop a formal policy relating to the industries targeted under its Strategic Plan for FY09-2013 including:</p> <ol style="list-style-type: none"> <li>1) The identification and selection of sites targeted for inspection</li> <li>2) Guidance for CSHOs on conducting inspections of sites targeted (e.g., common hazards that may be causing the high injury and illness rates, when to expand unprogrammed inspections to comprehensive, etc..)</li> <li>3) Proper coding of targeted inspections. (p. 53)</li> </ol>	<p>OPEOSH is developing inspection form guidance for all targeted facilities and will provide field staff with a check list for those specific targeted sites. These lists will identify common hazards in these facilities. In addition, OPEOSH supervision will make copies of all assigned county log books and will direct field staff to target facilities and will monitor these audits weekly. OPEOSH's inspection scheduling criteria is to inspect all targeted facilities within each assigned territory. The policy will be drafted by the end of November.</p>			
8	<p>The baseline special evaluation revealed OPEOSH case file documentation is lacking, especially in safety cases. Case files reviewed lacked evidence of employee exposure, employer knowledge of the cited hazardous conditions, names and contact information for employee(s) interviewed and documentation</p>	<p>Provide additional training to all field staff, including supervisory staff, to ensure that all inspection case file documentation meets the minimum requirements of a prima facie case as set forth by federal OSHA and the State of New Jersey policy (Field Inspection Reference Manual or Field Operations Manual). (p.54)</p>	<p>OPEOSH field staffs have been re-trained to document exposures in all case files. NJ OPEOSH is including printed 1B forms in all files as well as the inspection narrative that documents employee exposures.</p>	<p>As of Nov 15, 2010 field staff has have been retrained to include evidence of employee exposure in each case file. OSHA Region 2 will provide additional case file documentation training scheduled for January 14, 2011</p>	<p>Beginning November 15, 2010 all case files now have documentation of employee exposure , employer knowledge and contain OSHA 1A, 1 B and inspection narrative report.</p>	

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	<p>addressing affirmative defense issues. In addition many files also did not include narratives or OSHA 1B forms or their equivalent (forms in which violations are documented).</p> <p>In 100% of the cases reviewed in which citations were issued, prima facie information regarding evidence of employer knowledge and employee exposure was either inadequate or missing. (p.6)</p>					
9	<p>Employer/employee representative involvement is not documented in the case file notes in both safety and health files. (pp.8, 53)</p>	<p>Provide training to all field staff regarding the agency's policy of Union/Employee Representative involvement during and after inspections and the requirement to properly document compliance with this policy in the case file. (p.54)</p>	<p>100% of all NJ OPEOSH cases have always included employee /union participation. This is documented in each case file. Opening conference check sheets have always included this information. Employee and union representatives have always received copies of all orders to comply and case closing information .This has always been NJ OPEOSH policy and procedure. NJ OPEOSH staff have been retrained to include employee names in</p>	<p>As of February 2010 there is a requirement that all opening conference documents include the name of employee / union representatives. Field staffs have been instructed to also include employee/employer names in interview notes. OPEOSH has always been in compliance with the requirement to include employer/employee representation at all</p>	<p>NJ OPEOSH management will continue to monitor all enforcement case files to assure that each file contains the pertinent employee/ employer representative information.</p>	

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			interview notes and include these as part of the inspection file. All files reviewed by the audit team contained the name of the union rep. The only criticism dealt with names to be included on field notes. This has been corrected since the audit.	inspections. Employee representatives are always copied on all orders to comply, extension requests, informal conferences and file close out letters. SAMM reports have always indicated the NJ OPEOSH was in compliance with this requirement.		
10	The baseline special evaluation revealed OPEOSH case file documentation is lacking, especially in safety cases. Case files reviewed lacked evidence of employee exposure, employer knowledge of the cited hazardous conditions, names and contact information for employee(s) interviewed and documentation addressing affirmative defense issues. In addition many files also did not include narratives or OSHA 1B forms or their equivalent (forms in which violations are documented).  In 100% of the cases	Provide training to all field staff, including supervisory staff, to ensure that all inspection case files contain all of the documentation required by Federal OSHA FIRM and the equivalent requirements of the State of New Jersey FIRM. Implement internal controls to ensure that all cases are reviewed on a supervisory level to make certain that all violations issued meet the prima facie requirements. Prima Facie documentation includes evidence of employee exposure to a hazard, evidence of employer knowledge, an assessment of the severity of the injury/illness resulting from	All case files currently include hard copies of OSHA 1B's and narrative reports. These were always formerly completed, but not printed out and placed in the case files. Since the audit, case file documentation has been augmented to include evidence of exposure and employer knowledge. NJ OPEOSH has completed a model case file and uses this as a template for all current cases. NJ OPEOSH supervision reviews and signs off on each submitted case and maintains its case file status through its internal data base.	See item 4.		

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	reviewed in which citations were issued, prima facie information regarding evidence of employer knowledge and employee exposure was either inadequate or missing. (p.6)	exposure to the hazard, and the probability of that exposure. (p.58)				
11	In both the health and safety cases reviewed; the overwhelming majority of violations in which abatement periods granted were given 60 day abatement periods. In many cases, given the nature of the violations, the abatement time period assessed was excessive. (pp.9, 58-59)	<p>Provide additional training to all field staff, including supervisory staff, to ensure that abatement issues are handled in accordance with established policy including:</p> <ul style="list-style-type: none"> <li>• Ensure appropriate abatement periods are assigned for unabated violations.</li> <li>• Ensure that all abatement information accepted satisfies the order to comply prior to closing the case.</li> <li>• For cases with CDI, ensure that the file documents the method of abatement and that the CSHO observed the abatement.</li> <li>• Implement internal controls to ensure</li> </ul>	<p>NJ OPEOSH is revisiting this issue and will reassess shorter time periods for abatements and also encourage abatement during inspection whenever possible.</p> <p>NJ OPEOSH verifies abatement for all Orders to Comply. (LWD) conducts 100% follow up inspections to verify abatement).</p> <p>NJ OPEOSH management will monitor PMA. NJ PEOSH has asked for additional NCR training from Region 2 in order to aid with this process.</p> <p>NJ OPEOSH has a process for failure to abate. A second penalty order to comply establishing penalties is issued in these cases.</p>	OPEOSH is currently reviewing shorter abatement periods. OPEOSH discussed this with OSHA Region 2 and concluded that shorter abatement periods are in most cases attainable. Abatement extensions will be handled appropriately through the use of PMA's and interim abatement documentation.	OPEOSH is currently reviewing abatement periods and will provide OSHA Region 2 with a final document outlining abatement time frames for serious and other than serious violations. OPEOSH will provide this documentation to OSHA Region 2 by January 14, 2011.	

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		<p>that all Petitions for Modification of Abatement (PMA) dates are reviewed on a supervisory level to ensure that all required information is contained in the request prior to granting the PMA.</p> <ul style="list-style-type: none"> <li>• Ensure that Failure To Abate Notices are issued where appropriate.</li> </ul> <p>Additional recommendations related to Abatement taken from the Summary of Recommendations (p.12) in the Enhanced FAME Report:</p> <p>Internal controls should be developed to ensure that appropriate OPEOSH staff tracks the status of abatement for every citation issued by OPEOSH. OSHA recommends that staff reviews IMIS generated abatement status reports to identify citations with pending or overdue</p>	<p>NJ OPEOSH tracks all outstanding orders to comply. NJ OPEOSH offered to review this data base with Region 2 during the audit. Employers are required to submit abatement documentation prior to the abatement date. This information is kept in each file.</p> <p>Employers are required to submit PMA information in a timely manner and to supply NJ OPEOSH with interim procedures prior to sending extensions.</p> <p>Compliance staffs are required to enter abatement information into IMIS when abatement occurs. Since the audit NJ OPEOSH management is monitoring to assure that this is occurring. NJ OPEOSH has asked OSHA Region 2 for additional IMIS training in this area.</p> <p>NJ OPEOSH maintains an internal data base that tracks all inspections and abatements. During the audit, OSHA</p>		interim abatements.	

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		<p>abatement dates. Prior to the abatement due date OPEOSH personnel should follow up with employers requesting the required abatement information and re-emphasizing the abatement due date. If at that time, the employer needs additional time, a timely and proper PMA can be submitted to OPEOSH.</p> <p>Internal controls should be developed to ensure that abatement is reviewed and entered into IMIS as soon as possible once it is received and determined to be sufficient. The date entered into IMIS as completion of the abatement should either be the date that the employer has certified the abatement was completed, or absent that information, the date that OPEOSH received the information, not the date the information was reviewed.</p>	Region 2 did not review this data base.			
12	Based on case file reviews it was determined that appropriate informal conference notes were not maintained in the files thus	Relating to informal conferences, OPEOSH representatives must thoroughly document the following in the case file:	Informal conferences are attended by field staff and NJ OPEOSH managers. All informal conferences include documentation of	As of February 2010 the requirement that all penalty case files include informal conference notes and	All informal conference notes are kept with penalty case files. Penalty case files are filed	This issue will be reviewed after OIS deployment and corrective

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	it was not possible to determine whether correct procedures were followed. No documentation was included in the files indicating who was present or what was discussed. (p.59)	The fact that notification to the parties was made (employee and/or employee representative notification) and the date such notification was made, time and location the informal conference was held; at the conclusion of the informal conference, all main issues and potential courses of action must be summarized and documented in accordance with OPEOSH policy. (p.60)	employee involvement and the outcome of the meeting. Each file contains the outcome and any further actions that were a result of the conference. This was not evident to the audit team as NJ OPEOSH maintains separate files for penalty cases. The failure to abate files will be combined with the penalty files to eliminate this problem. Since penalty cases are not entered into the NCR (separate orders are issued) No tracking exists in the NCR for these cases	document that informal conferences are attended by field staff as well as OPEOSH managers has been reiterated to the field staff.	separately and original case files are combined with them. This procedure was instituted following the audit.	action required at that time. At a minimum OPEOSH may need to develop an internal system of tracking penalty case data as its process differs from the standard OSHA procedure.
13	The baseline special study revealed that IMIS data input and maintenance was not being managed in accordance with OPEOSH and OSHA policy. Rejected forms were not being corrected, standard IMIS reports such as draft forms reports were not reviewed and uplinks and data transfer from the local IMIS to the NCR Host computer was not being ensured. In many instances data was not transferred	Provide IMIS Administration training for OPEOSH IT personnel, Supervisors, CSOs, Consultants and Compliance Assistance Specialists and ensure appropriate IMIS management is implemented. Federal OSHA Region II is willing to assist in providing retraining for OPEOSH personnel who use and manage the IMIS system. (p.62)	NJ OPEOSH continues to work with NCR issues and has asked OSHA Region 2 for training in this area. NJ OPEOSH has repeatedly requested training from OSHA Region 2 on printing out monitoring reports as well. NJ PEOSH continues to work with the antiquated NCR system and continues to find issues with downloading reports from the lap top ORACLE to the NCR.	OPEOSH continues to have issues with the interface of the laptop ORACLE application and downloading files from the ORACLE to the NCR.	IMIS/NCR training was conducted on November 29, 2010	

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	from OPEOSH to the host resulting inaccurate data available for evaluation, analysis, and review. (pp.9, 61-62)		NJ OPEOSH needs OSHA Region 2's help with these issues and works with the help desk to resolve problems as they occur. NJ OPEOSH continues to experience long delays in correcting NCR issues with the help desk.			
14	Prior to the study, Region II identified eight ( <i>discrimination</i> ) cases which indicated an inordinate number of days open. The cases indicated the number of days pending from 377 days to 1896 days. A review of this matter revealed that the eight cases entered into the IMIS system were duplicates/triplicates that were created erroneously. (p.66)	It is recommended that supervisors continue to review IMIS Reports in order to eliminate duplicate discrimination case reporting. (A procedure has already been put in place to address this concern.) (p.68)	NJ OPEOSH has cleared up this matter. Again issues with the IMIS would not allow NJ PEOSH managers to go into these files and remove old cases which appeared to be active when they were not.		OPEOSH cleared up the problem with cases that appeared to be open for an extended period. This was an IMIS issue and was rectified with help from OSHA Region 2.	
15	At the time of the study there were two investigators assigned to investigate complaints within the entire state of New Jersey. One investigator has just been promoted to Assistant Chief, leaving only one investigator assigned to handle discrimination complaints. (p.67)	It is recommended that the state plan review the number of discrimination investigators that are qualified and assigned to handle discrimination investigations and adjust staffing based on demand throughout the state. (p.68)	NJ OPEOSH is asking for additional training for discrimination officers. OTI has limited offerings and NJ PEOSH has asked the Region to help with this. The newly appointed Assistant Chief is continuing to handle discrimination cases as part of his duties.		There are currently no openings for the whistle blower training at OTI. OPEOSH has asked OSHA Region 2 for help in this matter. OPEOSH is committed to having the discrimination investigators trained and provided that the	

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	For several years the New Jersey State Plan has been unable to send Safety and Health Compliance and discrimination investigation personnel to the OSHA Training Institute for technical training. The lack of training is directly attributed to the New Jersey Department of Labor and Workforce Development's (LWD) policy that precludes state funds from being expended for employees to travel outside the state due to budgetary restrictions. (p.67)				budget allows and courses are offered will send staff the appropriate OTI classes as they become available. In addition OSHA Region 2 will work with OPEOSH to attempt to find effective alternatives to training at OTI.	
16		It is recommended that the State Plan ensure discrimination investigators assigned to the program are properly trained. Means to send investigators to required training should be developed. (p.68)	OTI has limited offerings so NJ OPEOSH has decided to use local resources to bring in new training opportunities. NJ OPEOSH attends all courses offered through OSHA Region 2 and has sent compliance staff to OTI. Additional staff will be attending OTI in the fall of 2010 for legal aspects training. Again OTI has a limited number of course offerings and NJ OPEOSH has asked OSHA Region 2 to provide training whenever possible.			
17	There is a lack of consistency with the methods and procedures followed for the investigation of discrimination complaints. -	It is recommended that the State Plan adopt a case file organization system such as the system which is outlined in the discrimination investigators	NJ OPEOSH follows OSHA's discrimination file organization form outline while conducting whistleblower investigations. PEOSH has	As of February 2010 NJ OPEOSH is following the case file organization as per the discrimination investigation manual.	NJ OPEOSH implemented the Federal case file organization procedures immediately	

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	(p.67) The plan utilizes a “Discrimination Complaint Form” which is filled out by the complainant, is signed and dated and then mailed to the Office of Public Employee Safety. This form initiates the start of an investigation. The Complaint Form aside there is no formal documentation of interviews with either complainants, witnesses or other involved or interested parties. The plan does not use written or recorded statements or memorandums to file to document the underlying elements of a discrimination complaint. The plan does not use the Case Activity Log or any other means to document the flow of investigative activity with respect to each case. (p.68)	manual. (p.68)	2 discrimination officers and following the audit, both are following the OSHA format.		following the audit.	
18		It is recommended that the state plan use either a statement form or a memorandum to file to document statements made by complainants, witnesses or other interested parties; and utilize the Case Activity Log and the Final Investigative Report format. (p.68)	NJ OPEOSH is following the format as indicated by OSHA Region 2 in its assessment of the NJ OPEOSH whistleblower program. Both discrimination investigators are <i>following</i> the same format in case files.		As of February 2010 OPEOSH implemented the Federal case file organization procedures immediately following the audit.	
19	The study found that for several years OPEOSH has not sent Safety and Health CSHOs or their supervisors to the OSHA Training Institute or any other out of state location for technical training. This is directly	It is recommended that the OPEOSH resolve the budgetary restrictions which prohibit investigators from attending courses at The OSHA Training Institute and the Annual Discrimination Investigator	NJ OPEOSH Staffs are attending OTI and local and regional training when offered. OTI has severely limited course offerings and NJ OPEOSH is sending staff to available courses in the summer and	OPEOSH is currently sending field staff to training at OTI and is also using Rutgers University to provide updated training for field/management staffs.	LWD is approving training requests for OPEOSH staff to attend training at OTI as the budget allows and classes are made available.	

\* All Corrective Action items are subject to further Federal review and monitoring, and submission of documentation on all actions taken, including revised procedures and training of PEOSH staff.

**FY 2009 New Jersey Public Employee Only State Plan (PEOSH) Enhanced FAME Report**

	Findings	Recommendations	PEOSH Response	Documentation Required with Due Date	Outcome Measures	Status *
	attributed to a State policy that prohibits state funds from being used for employee travel outside the state (ostensibly due to budgetary restrictions). (p.5)	Training Conference should be lifted. (p. 75)	fall of 2010. OPEOSH is using local training sources and attending courses put on by OSHA Region 2.	Staff are also signed up to attend Legal Aspects Training during the winter of 2010	OTI continues to have limited course offerings and OPEOSH has asked OSHA Region 2 to help with local training .	
20	There are several CSHOs who did not receive mandatory training, for example; 50% of the enforcement staff (both safety and health) did not have Legal Aspects training. (p.5)	Develop and implement a comprehensive training plan to provide mandatory training to CSHOs and their supervisors to bring them up to the minimum training standards established in OSHA Instruction TED-01-00-018 “Initial Training Program for OSHA Compliance Personnel” and to provide adequate training for discrimination investigators. PEOSH must also ensure the allocation of necessary funding to accomplish the training plan. (p.75)	OTI has limited course offerings and NJ PEOSH is reaching out to local providers to bring all staff up to speed on new standards and other training. OPEOSH will schedule staff for training required by TED 01-00-018. A training plan for PEOSH staff and supervisors that identifies the minimum training standards required by OSHA Instruction TED-01-00-018 “Initial Training Program for OSHA Compliance Personnel” is being implemented. Since there are limited class openings PEOSH will prioritize the training plan based on staff training needs available space and program needs. The training plan will be put in place by the end of November 2010.		LWD is approving training requests for NJ OPEOSH staff to attend training at OTI.  OTI continues to have limited course offerings and OPEOSH has asked OSHA Region 2 to help with local training .	

\* All Corrective Action items are subject to further Federal review and monitoring, and submission of documentation on all actions taken, including revised procedures and training of PEOSH staff.