FY 2020 Follow-up Federal Annual Monitoring Evaluation (FAME) Report

Indiana Department of Labor Indiana Occupational Safety and Health Administration (IOSHA)



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I. Executive Summary

The primary purpose of this report is to assess the Indiana Occupational Safety and Health Administration's (IOSHA) activities and progress in Fiscal Year (FY) 2020 in resolving outstanding findings from the previous FY 2019 Comprehensive Federal Annual Monitoring Evaluation (FAME) Report. The State Plan was responsive to the previous findings and recommendations.

The SARS-CoV-2 (COVID-19) virus affected all aspects of IOSHA's mission and activities during FY 2020 and remains a challenge. This public health crisis was declared a national emergency on March 13, 2020, just less than six months into the fiscal year. To help reduce the spread of the virus, Indiana's Commissioner of Labor at the time directed staff to pause onsite inspections from March 23 to July 10. Construction staff was permitted to conduct onsite inspections in response to imminent danger and complaints related to emphasis hazards as long as they were able to avoid indoor environments and follow the Center for Disease Control guidelines at the time. At this same time, many Indiana businesses were closed or operated at limited capacity.

IOSHA received and processed significantly more complaints in the second half of FY 2020 than they have ever received for any similar time period. They received over 6,200 complaints during the fiscal year and 5,098 of these were received in the second half of the year. IOSHA received an additional 3,900 complaints that were invalid. All IOSHA staff participated in processing the complaints. With the automation of letters to employers for the COVID-19 complaints submitted online, IOSHA was successful in reducing the average number of days to initiate complaint investigations to 3.31 days, significantly lower than 6.23 days in FY 2019 (SAMM 2a).

IOSHA made progress in addressing the previous 11 findings and four observations from the FY 2019 Comprehensive FAME Report and no new findings or observations were identified. IOSHA implemented corrective actions in an effort to address all 11 findings and the four observations. As a result, 10 of the 11 findings are now awaiting verification and will be reviewed during the onsite case file review as part of the FY 2021 Comprehensive FAME. One related finding remains open regarding IOSHA's in-compliance rate for health inspections continuing to exceed the Further Review Level (FRL) in FY 2020.

The FY 2020 State OSHA Annual Report (SOAR) provides information that outlines the progress made as it relates to IOSHA's five-year Strategic Management Plan (2018-2022). The report was reviewed and analyzed to assess their progress in meeting performance plan goals and was discussed with IOSHA during quarterly monitoring meetings. IOSHA's SOAR is attached to this report as Appendix E.

In April, May and June of 2020, Indiana held teleconferences with many of their 89 Voluntary Protection Program (VPP) worksites to provide support and discuss best practices for protecting workers during the COVID-19 pandemic. IOSHA shared the notes from these discussions with OSHA.

II. State Plan Background

The Indiana Department of Labor, under an agreement with OSHA, administers the Indiana occupational safety and health program in accordance with Section 18 of the Occupational Safety and Health Act of 1970 (OSH Act). IOSHA's plan was initially approved on February 24, 1974, and certified on October 16, 1981. On September 26, 1986, IOSHA received final approval. The mission of the Indiana Department of Labor is to advance the safety, health and prosperity of workers in the workplace. IOSHA performs safety and health inspections and responds to inquiries in the private and public sector, participates in partnerships and alliances, and promotes employer and employee involvement in the Indiana Voluntary Protection Program (VPP). The Indiana Department of Labor's workplace safety and health division, INSafe, administers the private sector on-site consultation program funded under a 21(d) cooperative agreement.

Mr. Joseph Hoage serves as the Commissioner for the Indiana Department of Labor and state plan designee. Mr. Hoage was appointed Commissioner on July 1, 2020, replacing Rick Ruble. Ms. Michelle Ellison is Deputy Commissioner of Labor for IOSHA. IOSHA is comprised of two divisions, General Industry and Construction. A staff of two investigators and one supervisor, working within the General Industry division, conduct whistleblower investigations.

IOSHA adopts all safety and health standards and federal program changes, with some differences when allowed. Indiana state law, IC 22-8-1.1-17.5 does not allow IOSHA's regulations to be more stringent than those of OSHA.

The initial base award to fund the program was \$2,308,000 in federal funds, which Indiana matched. The grant was amended to increase the federal share by \$211,200, which the state also matched, for funding totaling \$5,038,400 in FY 2020. IOSHA did not deobligate any funds during the fiscal year.

The State Plan's benchmark staffing level is 47 safety officers and 23 industrial hygienists. In FY 2020, IOSHA allocated for 29 safety officers and 13 industrial hygienists, six first line supervisors, five managers (two of whom are part-time), two whistleblower investigators, seven support staff (three of whom are part-time), two part-time state and local government consultants and one staff attorney. The grant included full-time equivalent (FTE) staffing of 62.47.

New Issues

IOSHA had two Complaints About State Plan Administration (CASPAs) in FY 2020, including one sensitive and one significant. The sensitive CASPA alleged concerns with inspector training, response to complaints of health hazards, informal conference procedures, dismissing safety orders without adequate evidence from the employer indicating hazard correction, not conducting programmed inspections, and inspectors not being allowed to expand the scope of inspections to address hazards identified in plain view. The significant CASPA alleged concerns with abatement of hazards, including confined spaces and lockout/tagout and with failing to address blatant safety violations during inspections at a company's two locations. Both CASPAs resulted in recommendations to the State Plan. The responses received from IOSHA to the recommendations were thorough and timely for the sensitive CASPA. The response to the significant CASPA has recently been sent to IOSHA and as of the time of this writing, OSHA was awaiting the State Plan's reply.

Maximum Penalties

In accordance with the Bipartisan Budget Bill passed on November 2, 2015, OSHA published a rule on July 1, 2016, raising its maximum penalties. As required by law, OSHA then increased maximum penalties annually, most recently on January 8, 2021, according to the Consumer Price Index (CPI). State Plans are required to adopt both the initial increase and subsequent annual increases within the corresponding six-month timeframe set by regulation. December 2020 marked four years since the first deadline passed for adoption and the Indiana State Plan has not yet completed the legislative changes to increase maximum penalties. However, in April of 2019 Indiana increase became effective on July 1, 2019. Penalties for other types of violations remained the same.

III. Assessment of State Plan Progress and Performance

A. 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 an on-site 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. The analyses and conclusions described in this report are based on information obtained from a variety of monitoring sources, including:

- State Activity Mandated Measures Report (Appendix D)
- State Information Report
- State OSHA Annual Report (Appendix E)
- State Plan Annual Performance Plan
- State Plan Grant Application
- Quarterly monitoring meetings between OSHA and the State Plan

B. Findings and Observations

IOSHA made progress addressing 11 findings and four observations noted in the FY 2019 Comprehensive FAME report and there are no new findings or observations identified in FY 2020. Corrective actions were implemented for all findings and nine are now awaiting onsite verification scheduled as part of the FY 2021 Comprehensive FAME. IOSHA submitted an inspection targeting program for one finding and OSHA has reviewed it. For another finding, IOSHA's incompliance rate for health inspections continues to exceed the Further Review Level (FRL) in FY 2020. Appendix A describes the continued findings and recommendations. Appendix B describes observations subject to continued monitoring and the related federal monitoring plan. Appendix C describes the status of each of the FY 2019 findings and recommendations.

Continued Findings

Finding FY 2020-01 (FY 2019-01) – In 12 of 15 (80%) complaint investigation (non-formal, inquiries) case files reviewed for the FY 2019 comprehensive FAME, letters to employers and complainants were either not sent or maintained in the case files. In nine of 15 (60%) of these case files, a determination was not documented to indicate if the employer's response to the inquiry was adequate. In six of 15 (40%) of the case files, serious injuries were reported and the files were not documented to indicate why no inspection was conducted.

Status: IOSHA created a checklist that supervisors review to ensure all letters to complainants and employers are maintained in the case files. A checklist was also created to ensure responses to serious injury reports are documented in the file. A case file review is necessary to gather the facts needed to evaluate progress on this finding. This finding will be a focus of next year's on-site case file review during the FY 2021 comprehensive FAME and remains open.

Finding FY 2020-02 (FY 2019-02) – In seven of 12 (58%) health case files reviewed for the FY 2019 comprehensive FAME, industrial hygiene sampling was not conducted to address potential health hazards and/or health complaint items.

Status: IOSHA completed an audit of five health case files and determined the need for additional training of supervisors. IOSHA's management, supervisors, and industrial hygienists participated in a training session with staff from OSHA's Cincinnati, Ohio Area Offices in January, 2021. IOSHA's supervisors discuss sampling strategy with industrial hygienists upon inspection assignments. A case file review is necessary to gather the facts needed to evaluate progress on this finding. This finding will be a focus of next year's on-site case file review during the FY 2021 comprehensive FAME and remains open.

Finding FY 2020-03 (FY 2019-03) – IOSHA does not have an inspection targeting system for identifying sites for inspections with specific hazards and/or high injury and illness rates related to National Emphasis Programs (NEPs) and the SST-16.

Status: IOSHA's written targeting system for programmed inspections is under review. However, IOSHA is preparing to begin conducting inspections under OSHA's recent Site-Specific Targeting (SST) inspection program issued in December of 2020. IOSHA also implemented local emphasis programs to target hazards related to falls in general industry and construction, demolition/renovation and residential construction. This finding is awaiting verification.

Finding FY 2020-04 (FY 2019-04) – IOSHA's in-compliance rate for safety inspections was 38.67% and 54.24% for health inspections (in FY 2019). These are both outside the Further Review Levels (FRL) of +/- 20% of 30.30% for safety (24.24%-36.36%) and +/- 20% of 36.12% (28.9%-43.35%) for health. (FY 2019 Appendix D, SAMM 9.)

Status: For FY 2020, the FRL for percent in compliance for safety is +/- 20% of 31.03%, which equals a range of 24.82% to 37.24%. The FRL for percent in compliance for health is +/- 20% of 37.15%, which equals a range of 29.72% to 44.58%. In FY 2020, IOSHA's in-compliance rate for safety inspections was 33.47% and 54.81% for health. The State Plan's in-compliance rate for safety inspections is now within the FRL; however, the in-compliance rate for health inspections

continues to exceed the FRL. In their efforts to improve, IOSHA developed a checklist of plain view hazards and supervisors will ensure all apparent violations are cited during their review of case files. This finding has been amended to reflect the new SAMM data from FY 2020 and remains open.

Finding FY 2020-05 (FY 2019-05) - In 18 of 84 (21.4%) inspection case files for the FY 2019 comprehensive FAME, the general duty clause (Indiana Code 22-8-1.1-2) was cited instead of an OSHA standard; all apparent hazards were not cited; and, sections of 29 CFR 1910.147 (control of hazardous energy, lockout/tagout) were cited incorrectly.

Status: The Construction Division Director and supervisors are reviewing all General Duty Clause violations to ensure there is no applicable standard and that all apparent hazards are cited appropriately. A case file review is necessary to gather the facts needed to evaluate progress on this finding. This finding will be a focus of next year's on-site case file review during the FY 2021 comprehensive FAME and remains open.

Finding FY 2020-06 (FY 2019-06) - In four of five (80%) follow-up case files reviewed for the FY 2019 comprehensive FAME, adequate verification of abatement or abatement documentation specific to the cited hazards was not included in the case file. In three of five follow-up case files, worker interviews were not conducted.

Status: IOSHA's supervisors are ensuring that all abatement for violations is documented in the file. IOSHA created a checklist specifically for follow-up inspections to ensure each hazard item is addressed and that interviews of workers are conducted. A case file review is necessary to gather the facts needed to evaluate progress on this finding. This finding will be a focus of next year's on-site case file review during the FY 2021 comprehensive FAME and remains open.

Finding FY 2020-07 (FY 2019-07) – In four of four (100%) case files reviewed for the FY 2019 comprehensive FAME, procedures for Petition for Modification of Abatement (PMA) were not followed properly.

Status: IOSHA created an audit checklist and conducted an audit of PMA case files. There were issues found and corrections were made. IOSHA will continue to audit PMA files. A case file review is necessary to gather the facts needed to evaluate progress on this finding. This finding will be a focus of next year's on-site case file review during the FY 2021 comprehensive FAME and remains open.

Finding FY 2020-08 (FY 2019-08) – In 25 of 43 (58%) case files reviewed with citations for the FY 2019 comprehensive FAME, informal settlement agreements (ISA) are signed by IOSHA prior to the employer; penalties are reduced greater than 50%; settlement language includes inappropriate statements that indicate IOSHA did not prove there was a violation and citations were deleted without proper justification in the file.

Status: IOSHA reviewed all informal conferences conducted in the first quarter of FY 2021 and found penalties were reduced and documented appropriately. The ISAs were signed by IOSHA after being signed by the employer. A case file review is necessary to gather the facts needed to

completely evaluate progress on this finding. This finding will be a focus of next year's on-site case file review during the FY 2021 comprehensive FAME and remains open.

Finding FY 2020-09 (FY 2019-09): The respondent's defense was not adequately tested in six of the 20 (30%) Whistleblower investigation files reviewed for the FY 2019 comprehensive FAME. The investigation appeared to conclude following receipt of the Respondent's position or the Complainant's failure to provide a rebuttal.

Status: This issue was primarily identified in the files of one investigator who is no longer employed with IOSHA. New investigators are enrolled in upcoming Whistleblower Investigation courses being held virtually at OSHA's Training Institute. A case file review is necessary to gather the facts needed to evaluate progress on this finding. This finding will be a focus of next year's on-site case file review during the FY 2021 comprehensive FAME and remains open.

Finding FY 2020-10 (FY 2019-10): The Whistleblower investigators did not evaluate the evidence and draw conclusions based on the evidence and the law. In the FY 2019 comprehensive FAME, analysis was not evident in nine of the 20 (45%) investigation files reviewed.

Status: IOSHA trained investigators on preparation of analysis. Whistleblower investigators are scheduled to take the Whistleblower Investigation Fundamentals (Course #1421) and Written Communication for Whistleblower Investigators (Course #1631) courses at the OSHA Training Institute in FY 2021. A case file review is necessary to gather the facts needed to evaluate progress on this finding. This finding will be a focus of next year's on-site case file review during the FY 2021 comprehensive FAME and remains open.

Finding FY 2020-11 (FY 2019-11): In the FY 2019 comprehensive FAME, proof of receipt of the determination letters was not evident in ten of the 20 (50%) investigation files reviewed. Appropriate Whistleblower determination letters must be issued to the parties via certified U.S. mail, return receipt requested (or via a third-party commercial carrier that provides delivery confirmation) (WIM Chapter 4.IV.B). Proof of receipt must be preserved in the file with copies of the letters to maintain accountability.

Status: IOSHA investigators have been trained to ensure that proof of delivery and receipt of determination letters is maintained in the file. A case file review is necessary to gather the facts needed to evaluate progress on this finding. This finding will be a focus of next year's on-site case file review during the FY 2021 comprehensive FAME and remains open.

OBSERVATIONS

Continued FY 2019 Observations

Observation FY 2020-01 (FY 2019-OB-01): In the FY 2019 comprehensive FAME, two of the 20 (10%) Whistleblower investigation files reviewed did not contain Reports of Investigation (ROI) signed by the supervisor.

Status: Whistleblower investigators are scheduled to take the Whistleblower Investigation Fundamentals (Course #1421) and Written Communication for Whistleblower Investigators (Course #1631) courses at the OSHA Training Institute in FY 2021. A case file review is necessary to gather the facts needed to evaluate performance in relation to this observation. This observation will be a focus of next year's on-site case file review during the FY 2021 comprehensive FAME. This observation is continued.

Observation FY 2020-02 (FY 2019-OB-02): In eight of the 20 (40%) Whistleblower investigation files reviewed for the FY 2019 comprehensive FAME, complainant interviews were not reduced to a memorandum of interview. Additionally, eight of the 12 administratively closed files reviewed did not contain a memorandum of interview.

Status: Whistleblower investigators are scheduled to take the Whistleblower Investigation Fundamentals (Course #1421) and Written Communication for Whistleblower Investigators (Course #1631) courses at the OSHA Training Institute in FY 2021. A case file review is necessary to gather the facts needed to evaluate performance in relation to this observation. This observation will be a focus of next year's on-site case file review during the FY 2021 comprehensive FAME. This observation is continued.

Observation FY 2020-03 (FY 2019-OB-03): The Report of Investigation (ROI) approval date in OSHA's WebIMIS system was either not entered or inaccurate in nine of the 20 (45%) Whistleblower investigation files reviewed for the FY 2019 comprehensive FAME.

Status: Whistleblower investigators are scheduled to take the Whistleblower Investigation Fundamentals (Course #1421) and Written Communication for Whistleblower Investigators (Course #1631) courses at the OSHA Training Institute in FY 2021. A case file review is necessary to gather the facts needed to evaluate performance in relation to this observation. This observation will be a focus of next year's on-site case file review during the FY 2021 comprehensive FAME. This observation is continued.

Observation FY 2020-04 (FY 2019-OB-04) - In the FY 2019 comprehensive FAME, eight of the 20 (40%) investigation files reviewed did not have documentation that the file was reviewed by a supervisor beyond the initial assignment and prior to docketing.

Status: Whistleblower investigators are scheduled to take the Whistleblower Investigation Fundamentals (Course #1421) and Written Communication for Whistleblower Investigators (Course #1631) courses at the OSHA Training Institute in FY 2021. A case file review is necessary to gather the facts needed to evaluate performance in relation to this observation. This observation will be a focus of next year's on-site case file review during the FY 2021 comprehensive FAME. This observation is continued.

C. State Activity Mandated Measures (SAMM) Highlights

Each SAMM has an agreed upon FRL, which can be either a single number, or a range of numbers above and below the national average. State Plan SAMM data that falls outside the FRL triggers a closer look at the underlying performance of the mandatory activity. Appendix D presents the State Plan's FY 2020 State Activity Mandated Measures (SAMM) Report and includes the FRLs

for each measure. A discussion of SAMM 9, Percent in Compliance was discussed above in Section III.B Findings and Observations (Finding FY 2020-04). The State Plan was outside the FRL on the following additional SAMMs:

SAMM 5 – Average number of violations per inspection with violations by violation type

Discussion of State Plan data and FRL: The FRL for the average number of violations per inspection with violations by violation type is +/- 20% of a three-year national average of 1.79 Serious, Willful, Repeat, or Unclassified (SWRU) violations, which equals a range of 1.43 to 2.15. For Other-than-Serious (OTS) violations, the FRL is +/- 20% of a three-year national average of 0.95 and equals a range of 0.76 to 1.14. IOSHA was below the FRL range for OTS violations at 0.29, and was above the FRL for SWRU violations with an average of 2.46.

<u>Explanation</u>: IOSHA's number of SWRU violations per inspection is higher than the FRL and lower than the FRL for OTS violations per inspection. The rates are very similar to the rates in the previous two fiscal years and are an indicator of the State Plan's consistency in identifying, citing, and properly classifying hazards found. Therefore, this measure is not a concern.

SAMM 6 – Percent of total inspections in state and local government workplaces

<u>Discussion of State Plan data and FRL</u>: The FRL for the percent of total inspections in state and local government workplaces is +/- 5% of 1.54%, which equals a range from 1.47% to 1.62%. In FY 2020, IOSHA conducted 2.40% of the inspections in state and local government workplaces.

Explanation: At 2.40%, IOSHA's percent of inspections in state and local government workplaces is above the FRL. In 2019, IOSHA reduced the number of projected inspections at state and local government sites because historically, they did approximately 18-22 inspections in this sector. In FY 2020, IOSHA conducted 16 inspections at these sites and because of the overall lower number of inspections conducted during this pandemic year, it is slightly more than the FRL and is not a concern.

SAMM 7 – Planned v. actual inspections

Discussion of State Plan data and FRL: The FRL for the planned versus actual inspections is +/-5% of 1,125 safety inspections and +/- 5% of 170 health inspections which equals a range from 1,068.75 to 1,181.25 safety inspections and from 161.50 to 178.50 health inspections. IOSHA conducted 649 of the 1,125 planned safety inspections and 185 of the 170 planned health inspections.

Explanation: During FY 2020, IOSHA reduced the number of planned inspections for FY 2020 due to the COVID-19 pandemic to a total of 867—700 safety and 167 health. IOSHA conducted 834 inspections, 96% of the reduced number of planned inspections. Due to the nature of the pandemic, it was difficult to project reasonable inspection goals.

SAMM 8, 8a, 8b, 8c, 8d – Average current serious penalty in private sector – total (1 to greater than 250 workers); (1-25 workers); (26-200 workers); (101-250 workers); (greater than 250 workers)

<u>Discussion of State Plan data and FRL</u>: The FRL for the average current serious penalty in the private sector is \pm 25% of the three-year national average of \$2,964.86, which equals a range of \$2,223.65 to \$3,706.08. IOSHA's average current serious penalty for establishments with from 1 to greater than 250 workers is \$1,572.82, well below the FRL. The average current penalty for establishments with the number of workers broken down for 1-25, 26-100, 101-250 and greater than 250 was well below the FRL for each.

Explanation: Indiana has still not completed the legislative changes necessary to increase maximum penalties. December 2020 marked four years since the deadline passed for adoption of OSHA's maximum penalty increase. However, in April of 2019 Indiana increased monetary penalties for "willful" or "knowing" violations that lead to a fatality. This increase became effective on July 1, 2019. Penalties for other types of violations remained the same. OSHA will continue to work with Indiana on this issue.

SAMM 10 – Percent of work-related fatalities responded to in one workday

<u>Discussion of State Plan data and FRL</u>: The FRL for the percent of work-related fatalities responded to in one workday is 100%. At 98.33%, IOSHA is slightly below the FRL. <u>Explanation</u>: One of IOSHA's 60 fatalities was not responded to within one day. IOSHA received additional information about this fatality after initially receiving information indicating the victim died of natural causes.

SAMM 14 – Percent of 11(c) investigations completed within 90 days

<u>Discussion of State Plan data and FRL</u>: The FRL for the percentage of 11(c) investigations completed within 90 days was fixed at 100%. IOSHA completed 31% of the 11(c) investigations within 90 days and warranted a closer look.

Explanation: Although IOSHA completed only 31% of 11(c) investigations within 90 days, their average number of calendar days to complete an 11(c) investigation was 102 days. While this is an increase from 86 days in FY 2019, it is still well below the average of 316 days for all state plans. In addition, IOSHA's completion rate was lower than the 39% for all state plans. OSHA will continue to address this issue with IOSHA at quarterly meetings.

SAMM 15 – Percent of 11(c) whistleblower complaints that are meritorious

<u>Discussion of State Plan data and FRL</u>: The FRL for the percentage of 11(c) whistleblower complaints that were meritorious was +/- 20% of the three-year national average of 18%, which equals a range from 14.40% to 21.60%. IOSHA's 11(c) meritorious rate was 5% and warranted a closer look.

<u>Explanation</u>: IOSHA's meritorious rate at 5% may be due to a number of factors including investigator experience and training and investigator turnover. OSHA will continue to discuss this

metric at quarterly meetings and will review discrimination case files as part of the FY 2021 comprehensive FAME.

SAMM 16 – Average number of calendar days to complete an 11(c) investigation

<u>Discussion of State Plan data and FRL</u>: The FRL for the average number of calendar days to complete an 11(c) investigation was fixed at 90 days. IOSHA's average number of calendar days to complete an 11(c) investigation was 102 days.

Explanation: As explained above, although IOSHA's average number of calendar days to complete an 11(c) investigation is greater than the FRL at 102 days, and an increase from 86 days in FY 2019, it is still well below the average of 316 days for all state plans. OSHA will continue to discuss this with IOSHA at quarterly meetings.

SAMM 17 – Percent of enforcement presence

<u>Discussion of State Plan data and FRL</u>: The FRL for the percentage of enforcement presence was +/- 25% of the three-year national average of 1.09%, which equals a range from 0.82% to 1.36%. The percent of enforcement presence describes the number of safety and health inspections conducted compared to the number of employer establishments in the state.

Explanation: IOSHA's percentage of enforcement presence at 0.69% is below the FRL. It is likely due to the COVID-19 pandemic and the decrease in the number of inspections IOSHA was able to conduct. IOSHA's percent of enforcement presence was 0.99% and 0.97% in fiscal years 2018 and 2019, respectively, and was within the FRL during those years.

Appendix A – New and Continued Findings and Recommendations FY 2020 Indiana Follow-up FAME Report

FY 2020-#	Finding	Recommendation	FY 2019-# or FY 2019-OB-#
FY 2020-01	In the FY 2019 comprehensive FAME, 12 of 15 (80%) complaint investigations (non-formal, inquiries) case files reviewed, letters to employers and complainants were either not sent or maintained in the case files. In nine of 15 (60%) of these case files, a determination was not documented to indicate if the employer's response to the inquiry was adequate. In six of 15 (40%) of the case files, serious injuries were reported and the files were not documented to indicate why no inspection was conducted.	 IOSHA should follow Chapter 9 of their FOM to ensure: letters are sent to employers to initiate a complaint inquiry and when an adequate response has been received; letters are sent to the complainant acknowledging receipt of their complaint and when the employer's response to the inquiry is adequate; copies of all letters are maintained in the file; an evaluation is made determining the adequacy of the employer's response to the inquiry and that it is documented in the file; and if a decision is made not to inspect after a serious injury report, the reasons are documented in the file. 	FY 2019-01
FY 2020-02	In seven of 12 (58%) health case files reviewed for the FY 2019 comprehensive FAME, industrial hygiene sampling was not conducted to address potential health hazards and/or health complaint items.	Corrective action complete, awaiting verification. IOSHA should ensure industrial hygienists are following the FOM and properly trained to address all complaint and referral items that allege exposures to health hazards (noise and air contaminants) and conduct industrial hygiene sampling when evidence indicates it should be conducted. Industrial hygienists should investigate health hazards if they are in plain view and if they are covered under National Emphasis Programs (NEP). Complaints with health hazards alleged should be reviewed with a supervisor prior to inspection to discuss sampling strategy. Corrective action complete, awaiting verification.	FY 2019-02
FY 2020-03	IOSHA does not have an inspection targeting system for identifying sites for inspections with specific hazards and/or high injury and illness rates related to OSHA's NEPs and the SST-16.	IOSHA should develop a targeting system for identifying sites for inspection where specific hazards related to OSHA's NEPs that IOSHA has adopted are known to exist. The NAICS lists that have been researched and included with the NEPs can be used to identify work sites to target for inspection. The software and databases that include establishments on these lists can be obtained	FY 2019-03

Appendix A – New and Continued Findings and Recommendations

FY 2020-#	Finding	Recommendation	FY 2019-# or FY 2019-OB-#
		from OSHA's Office of Statistical Analysis. Corrective action complete, awaiting verification.	
FY 2020-04	IOSHA's in-compliance rate for safety inspections is 33.47% and 54.81% for health inspections. The rate for health inspections is outside the Further Review Level (FRL) of +/- 20% of 37.15% (29.72%-44.58%).	IOSHA supervisors should ensure inspection case files with hazards in plain view are thoroughly investigated and all apparent violations are cited during their case file review. IOSHA should also ensure resources are spent in workplaces that are exposing workers to hazards by implementing corrective action in the most hazardous worksites. This finding remains open.	FY 2019-04
FY 2020-05	In 18 of 84 (21.4%) inspection case files for the FY 2019 comprehensive FAME, the general duty clause (Indiana Code 22-8-1.1-2) was cited instead of an OSHA standard; all apparent hazards were not cited and, sections of 29 CFR 1910.147 (control of hazardous energy, lockout/tagout) were cited incorrectly.	IOSHA should ensure that when supervisors review case files, they look for OSHA standards that should be cited in lieu of the general duty clause; they review the investigator's file thoroughly so that all apparent hazards are cited and when OSHA's lockout/tagout standard (29 CFR 1910.147) is cited, the correct section is cited appropriately. Corrective action complete, awaiting verification.	FY 2019-05
FY 2020-06	In four of five (80%) follow-up case files reviewed for the FY 2019 comprehensive FAME, adequate verification of abatement or abatement documentation specific to the cited hazards was not included the case file. In three of five (60%) follow-up case files, worker interviews were not conducted.	IOSHA should ensure that files include documentation on abatement methods observed that are specific to all identified hazards and follow-up inspections include interviews with employees. Corrective action complete, awaiting verification.	FY 2019-06
FY 2020-07	In four of four (100%) case files reviewed for the FY 2019 comprehensive FAME, procedures to Petition for Modification of Abatement (PMA) were not followed properly.	IOSHA should ensure checklists used to approve PMAs are followed properly. IOSHA should conduct periodic audits to ensure signed agreements are in the case file; letters to the employer approving the PMA are in the case file; employers' statements of exceptional circumstances explaining any delay in their request more than one day after the abatement due date are in the case file; and, approval dates on the checklist match dates requested by the employer on the request form. Corrective action complete, awaiting verification.	FY 2019-07
FY 2020-08	In 25 of 43 (58%) case files reviewed with citations for the FY 2019 comprehensive FAME, informal settlement agreements (ISA) are signed by IOSHA prior to the employer; penalties are reduced greater than	IOSHA should audit cases with ISAs on a routine basis to ensure they are executed appropriately: the employer signs the ISA prior to IOSHA; penalties are not reduced to more than 50% of the initial penalty; language	FY 2019-08

Appendix A – New and Continued Findings and Recommendations

FY 2020-#	Finding	Recommendation	FY 2019-# or FY 2019-OB-#
	50%; settlement language includes statements that IOSHA did not prove there was a violation and is not appropriate; and, citations are deleted without proper justification in the file.	included in the ISA does not indicate that IOSHA did not prove there was a violation and citations are not deleted unless proper justification is in the file. Corrective action complete, awaiting verification.	
FY 2020-09			FY 2019-09
FY 2020-10			FY 2019-10
FY 2020-11	Proof of receipt of the determination letters was not evident in ten of the 20 (50%) whistleblower investigation files reviewed for the FY 2019 comprehensive FAME.	IOSHA should ensure that proof of receipt is preserved in the file with copies of the Whistleblower determination letters, as required by WIM Chapter 4.IV.B. Corrective action complete, awaiting verification.	FY 2019-11

Appendix B – Observations and Federal Monitoring Plans FY 2020 Indiana Follow-up FAME Report

Observation # FY 2020-OB-#	Observation# FY 2019-OB-# <i>or</i> FY 2019-#	Observation	Federal Monitoring Plan	Current Status
FY 2020-OB-01	FY 2019-OB-01	Two of the 20 (10%) Whistleblower investigation files reviewed for the FY 2019 comprehensive FAME, did not contain Reports of Investigation (ROI) that were signed by the supervisor.	This observation will be a focus of next year's on- site case file review during the FY 2021 comprehensive FAME.	Continued
FY 2020-OB-02	FY 2019-OB-02	In eight of the 20 (40%) Whistleblower investigation files reviewed for the FY 2019 comprehensive FAME, complainant interviews were not reduced to a memorandum of interview. Additionally, eight of the 12 administratively closed files reviewed did not contain a memorandum of interview.	for the FY 2019 comprehensive FAME, nt interviews were not reduced to a memorandum w. Additionally, eight of the 12 administrativelysite case file review during the FY 2021 comprehensive FAME.	
FY 2020-OB-03	FY 2019-OB-03	The Report of Investigation (ROI) approval date in OSHA's WebIMIS system was either not entered or inaccurate in nine of the 20 (45%) Whistleblower investigation files reviewed for the FY 2019 comprehensive FAME.	This observation will be a focus of next year's on- site case file review during the FY 2021 comprehensive FAME.	Continued
FY 2020-OB-04	FY 2019-OB-04			Continued

FY 2019-#	Finding	Recommendation	State Plan Corrective Action	Completion Date (if Applicable)	Current Status (and Date if Item is Not Completed)
FY 2019-01	In 12 of 15 (80%) complaint investigations (non-formal, inquiries) case files reviewed, letters to employers and complainants were either not sent or maintained in the case files. In nine of 15 (60%) of these case files, a determination was not documented to indicate if the employer's response to the inquiry was adequate. In six of 15 (40%) of the case files, serious injuries were reported and the files were not documented to indicate why no inspection was conducted.	 IOSHA should follow Chapter 9 of their FOM to ensure: letters are sent to employers to initiate a complaint inquiry and when an adequate response has been received; letters are sent to the complainant acknowledging receipt of their complaint and when the employer's response to the inquiry is adequate; copies of all letters are maintained in the file; an evaluation is made determining the adequacy of the employer's response to the inquiry and that 	IOSHA created a checklist that supervisors review to ensure all letters to complainants and employers are in the case files. IOSHA also created a checklist to ensure responses to serious injury reports are documented in the file. A case file review is necessary to gather the facts needed to evaluate progress on this finding. This finding will be a focus of next year's on-site case file review during the FY 2021 comprehensive FAME and remains open.	12/15/2021	Awaiting Verification 12/31/2020

		 it is documented in the file; and if a decision is made not to inspect after a serious injury report, the reasons are documented in the file. 			
FY 2019-02	In seven of 12 (58%) health case files reviewed, industrial hygiene sampling was not conducted to address potential health hazards and/or health complaint items.	IOSHA should ensure industrial hygienists are following the FOM and properly trained to address all complaint and referral items that allege exposures to health hazards (noise and air contaminants) and conduct industrial hygiene sampling when evidence indicates it should be conducted. Industrial hygienists should investigate health hazards if they are in plain view and if they are covered under National Emphasis Programs (NEP). Complaints with health hazards alleged should be reviewed with a supervisor prior to inspection to discuss	IOSHA completed an audit of five health case files and determined additional training of supervisors was needed. IOSHA management, supervisors, and industrial hygienists participated in a training session with staff from one of OSHA's Ohio area offices in January, 2021. IOSHA's supervisors discuss sampling strategy with industrial hygienists when they are assigned to do inspections.	01/27/2021	Awaiting Verification 01/31/2021

		sampling strategy.			
FY 2019-03	IOSHA does not have an inspection targeting system for identifying sites for inspections with specific hazards and/or high injury and illness rates related to OSHA's NEPs and the SST-16.	IOSHA should develop a targeting system for identifying sites for inspection where specific hazards related to OSHA's NEPs that IOSHA has adopted are known to exist. The NAICS lists that have been researched and included with the NEPs can be used to identify work sites to target for inspection. The software and databases that include establishments on these lists can be obtained from OSHA's Office of Statistical Analysis.	IOSHA's written targeting system for programmed inspections is under review. However, IOSHA is preparing to begin conducting inspections under OSHA's recent Site-Specific Targeting (SST) inspection program issued in December of 2020. IOSHA also implemented local emphasis programs to target hazards related to falls in general industry and construction, demolition/renovation and residential construction	05/20/2021	Awaiting Verification 5/20/2021
FY 2019-04	IOSHA's in-compliance rate for safety inspections is 38.67% and 54.24% for health inspections. These are both outside the Further Review Levels (FRL) of +/- 20% of 30.30% for safety (24.24%-36.36%) and +/- 20% of 36.12% (28.9%-43.35%).	IOSHA supervisors should ensure inspection case files with hazards in plain view are thoroughly investigated and all apparent violations are cited during their case file review. IOSHA should also ensure resources are spent in workplaces that are exposing workers to hazards by implementing corrective action in the most hazardous	For FY 2020, the FRL for percent in compliance for safety is +/- 20% of 31.03% which equals a range of 24.82% to 37.24%. The FRL for percent in compliance for health is +/- 20% of 37.15% which equals a range of 29.72% to 44.58%. In FY 2020, IOSHA's in- compliance rate for safety inspections was 33.47% and 54.81% for health. The State Plan's in-compliance rate for safety inspections is within the FRL; however, the in-compliance rate for health inspections continues to exceed the FRL. In their efforts to improve, a checklist of plain view hazards was developed and supervisors will ensure all apparent violations are cited during their	Not Completed	Open 12/31/2020

		worksites.	review of case files.		
FY 2019-05	In 18 of 84 (21.4%) inspection case files, the general duty clause (Indiana Code 22-8-1.1- 2) was cited instead of an OSHA standard; all apparent hazards were not cited and, sections of 29 CFR 1910.147 (control of hazardous energy, lockout/tagout) were cited incorrectly.	IOSHA should ensure that when supervisors review case files, they look for OSHA standards that should be cited in lieu of the general duty clause; they review the investigator's file thoroughly so that all apparent hazards are cited and when OSHA's lockout/tagout standard (29 CFR 1910.147) is cited, the correct section is cited appropriately.	General Duty Clause violations are being reviewed by the Construction Division Director and supervisors to ensure there is no applicable standard and that all apparent hazards are cited appropriately.	12/15/2020	Awaiting Verification 12/31/2020
FY 2019-06	In four of five (80%) follow-up case files reviewed, adequate verification of abatement or abatement documentation specific to the cited hazards was not included the case file. In three of five (60%) follow-up case files, worker interviews were not conducted.	IOSHA should ensure that files include documentation on abatement methods observed that are specific to all identified hazards and follow-up inspections include interviews with employees.	IOSHA's supervisors are ensuring that all abatement for violations is documented in the file.	02/17/2021	Awaiting Verification 02/17/2021
FY 2019-07	In four of four (100%) case files reviewed, procedures to Petition for Modification of Abatement (PMA) were not followed properly.	IOSHA should ensure checklists used to approve PMAs are followed properly. IOSHA should conduct periodic audits to ensure signed agreements are in the case file; letters to	IOSHA created an audit checklist and conducted an audit of PMAs. There were issues found and corrections were made. IOSHA will continue to audit PMA files.	12/04/2020	Awaiting Verification 12/31/2020

		the employer approving the PMA are in the case file; employers' statements of exceptional circumstances explaining any delay in their request more than one day after the abatement due date are in the case file; and, approval dates on the checklist match dates requested by the employer on the request form.			
FY 2019-08	In 25 of 43 (58%) case files reviewed with citations, ISAs are signed by IOSHA prior to the employer; penalties are reduced greater than 50%; settlement language includes statements that IOSHA did not prove there was a violation and is not appropriate; and, citations are deleted without proper justification in the file.	IOSHA should audit cases with ISAs on a routine basis to ensure they are executed appropriately: the employer signs the ISA prior to IOSHA; penalties are not reduced to more than 50% of the initial penalty; language included in the ISA does not indicate that IOSHA did not prove there was a violation and citations are not deleted unless proper justification is in the file.	IOSHA reviewed all informal conferences conducted in the first quarter of FY 2021 and found penalties were reduced and documented appropriately. The ISAs were signed by IOSHA after being signed by the employer.	02/19/2021	Awaiting Verification 02/19/2021
FY 2019-09	The respondent's defense was not adequately tested in six of the 20 (30%) Whistleblower	IOSHA should train or retrain the Whistleblower investigative staff with regard to adequately	This issue was primarily identified in the files of one investigator who is no longer employed with IOSHA. New investigators are enrolled in upcoming Whistleblower Investigation courses being held virtually at OSHA's		

	investigation files reviewed. The investigation appeared to conclude following receipt of the respondent's position or the complainant's failure to provide a rebuttal.	testing the respondent's defense and ensuring that all pertinent information and documentation are pursued prior to concluding the investigation as required by the WIM (Chapter 3.VI.I, Resolve Discrepancies).	Training Institute.	01/26/2021	Awaiting Verification 01/31/2021
FY 2019-10	The Whistleblower investigator did not evaluate the evidence and draw conclusions based on the evidence and the law. Analysis was not evident in nine of the 20 (45%) investigation files reviewed.	The State Plan should retrain Whistleblower staff on preparation of the analysis as well as writing the Report of Investigation (ROI). Attendance at the Writing for WB course #1630 is recommended for investigators when it is available through the OSHA Training Institute.	IOSHA trained investigators on preparation of analysis and investigators are enrolled to attend OSHA's Writing for Whistleblowers course (#1631) scheduled for September, 2021.	01/26/2021	Awaiting Verification 01/31/2021
FY 2019-11	Proof of receipt of the determination letters was not evident in ten of the 20 (50%) whistleblower investigation files reviewed.	IOSHA should ensure that proof of receipt is preserved in the file with copies of the Whistleblower determination letters, as required by WIM Chapter 4.IV.B.	IOSHA investigators have been trained to ensure that proof of delivery and receipt of determination letters is maintained in the file.	01/26/2021	Awaiting Verification 01/31/2021

Appendix D – FY 2020 State Activity Mandated Measures (SAMM) Report FY 2020 Indiana Follow-up FAME Report

	U.S.	Department of	Labor	
Occupationa	l Safety and Health Administr	ation State Plan	Activity Manda	ated Measures (SAMMs)
State Plan: Indiana – IOSHA			FY 2020	
SAMM Number	SAMM Name	State Plan Data	Further Review Level	Notes
1a	Average number of work days to initiate complaint inspections (state formula)	6.81	10	The further review level is negotiated by OSHA and the State Plan.
1b	Average number of work days to initiate complaint inspections (federal formula)	5	N/A	This measure is for informational purposes only and is not a mandated measure.
2a	Average number of work days to initiate complaint investigations (state formula)	3.31	5	The further review level is negotiated by OSHA and the State Plan.
2b	Average number of work days to initiate complaint investigations (federal formula)	3.07	N/A	This measure is for informational purposes only and is not a mandated measure.
3	Percent of complaints and referrals responded to within one workday (imminent danger)	100%	100%	The further review level is fixed for all State Plans.
4	Number of denials where entry not obtained	0	0	The further review level is fixed for all State Plans.
5	Average number of violations per inspection with violations by violation type	SWRU: 2.46	+/- 20% of SWRU: 1.79	The further review level is based on a three-year national average. The range of acceptable data not requiring further review is
		Other: 0.29	+/- 20% of Other: 0.95	from 1.43 to 2.15 for SWRU and from 0.76 to 1.14 for OTS.
6	Percent of total inspections in state and local government workplaces	2.40%	+/- 5% of 1.54%	The further review level is based on a number negotiated by OSHA and the State Plan through the grant application. The

Appendix D – FY 2020 State Activity Mandated Measures (SAMM) Report FY 2020 Indiana Follow-up FAME Report

	U.S.	Department of	of Labor		
7	Planned v. actual inspections – safety/health	S: 649 H: 185	+/- 5% of S: 1,125 +/- 5% of H: 170	range of acceptable data nor requiring further review is from 1.47% to 1.62%. The further review level is based on a number negotiated by OSHA and the State Plan through the grant application. The range of acceptable data nor requiring further review is from 1,068.75 to 1,181.25 for safety and from 161.50 to 178.50 for health.	
8	Average current serious penalty in private sector - total (1 to greater than 250 workers)a. Average current serious penalty in private sector (1-25 workers)	\$1,572.82	+/- 25% of \$2,964.86 +/- 25% of \$1,967.64	The further review level is based on a three-year national average. The range of acceptable data not requiring further review is from \$2,223.65 to \$3,706.08. The further review level is based on a three-year national average. The range of acceptable data not requiring further review is	
	 b. Average current serious penalty in private sector (26-100 workers) c. Average current serious penalty in private sector (101-250 workers) 	\$1,703.23	+/- 25% of \$3,513.45 +/- 25% of \$5,027.02	from \$1,475.73 to \$2,459.55. The further review level is based on a three-year national average. The range of acceptable data not requiring further review is from \$2,635.09 to \$4,391.81. The further review level is based on a three-year national average. The range of acceptable data not requiring further review is from \$3,770.27 to	

Appendix D – FY 2020 State Activity Mandated Measures (SAMM) Report

U.S. Department of Labor					
	d . Average current serious penalty in private sector (greater than 250 workers)	\$3,157.11	+/- 25% of \$6,190.91	The further review level is based on a three-year national average. The range of acceptable data not requiring further review is from \$4,643.18 to \$7,738.64.	
9	Percent in compliance	S: 33.47%	+/- 20% of S: 31.03%	The further review level is based on a three-year national average. The range of acceptable data not	
		H: 54.81%	+/- 20% of H: 37.15%	requiring further review is from 24.82% to 37.24% for safety and from 29.72% to 44.58% for health.	
10	Percent of work-related fatalities responded to in one workday	98.33%	100%	The further review level is fixed for all State Plans.	
11	Average lapse time	S: 49.23 H: 70.41	+/- 20% of S: 50.58 +/- 20% of H: 60.39	The further review level is based on a three-year national average. The range of acceptable data not requiring further review is from 40.46 to 60.70 for safety and from 48.31 to 72.47 for health.	
12	Percent penalty retained	73%	+/- 15% of 67.51%	The further review level is based on a three-year national average. The range of acceptable data not requiring further review is from 57.38% to 77.64%.	
13	Percent of initial inspections with worker walk around representation or worker interview	100%	100%	The further review level is fixed for all State Plans.	
14	Percent of 11(c) investigations completed within 90 days	31%	100%	The further review level is fixed for all State Plans.	
15	Percent of 11(c) complaints that are meritorious	5%	+/- 20% of	The further review level is based on a three-year national average. The	

Appendix D – FY 2020 State Activity Mandated Measures (SAMM) Report

FY 2020 Indiana Follow-up F	AME Report
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	U.S. Department of Labor				
			18%	range of acceptable data not requiring further review is from 14.40% to 21.60%.	
16	Average number of calendar days to complete an 11(c) investigation	102	90	The further review level is fixed for all State Plans.	
17	Percent of enforcement presence	0.69%	+/- 25% of 1.09%	The further review level is based on a three-year national average. The range of acceptable data not requiring further review is from 0.82% to 1.36%.	

NOTE: The national averages in this report are three-year rolling averages. Unless otherwise noted, the data contained in this Appendix D is pulled from the State Activity Mandated Measures (SAMM) Report in OIS and the State Plan WebIMIS report run on November 9, 2020, as part of OSHA's official end-of-year data run.

FISCAL YEAR 2020 STATE OSHA ANNUAL REPORT

Indiana Occupational Safety and Health Administration

For Activities Occurring: October 1, 2019 – September 30, 2020

Report Date: December 1, 2020



Appendix E – FY 2020 State OSHA Annual Report (SOAR) FY 2020 Indiana Follow-up FAME Report

Indiana Department of Labor 402 West Washington Street, Room W195 Indianapolis, Indiana 46204

FY 2020 Indiana Follow-up FAME Report

EXECUTIVE SUMMARY

The Indiana Department of Labor is pleased to provide the State OSHA Annual Report (SOAR) for the Indiana Occupational Safety and Health Administration (IOSHA). The activities described in this report took place during the federal fiscal year 2020 between October 1, 2019 and September 30, 2020.

In mid-November 2020, the Indiana Department of Labor released the Bureau of Labor Statistic's Survey of Occupational Injuries and Illnesses (SOII) 2019 nonfatal occupational injury and illness rates for the state overall and the state's major Hoosier industries. According to Bureau of Labor Statistics, the 2019 nonfatal occupational injury and illness rate remained unchanged at its historic low of 3.3 per 100 full-time workers. Hoosier workplace injuries and illnesses have continued to remain at a historic low for eight years in a row. At the inception of the SOII in 1992, the overall nonfatal workplace injury and illness rate in Indiana was 11.0 per 100 workers. The rate reached a high of 11.3 per 100 workers in 1994 and has declined by more than 70 percent over the last 25 years.

The manufacturing industry in Indiana experienced nearly a ten percent decrease from a rate of 4.1 per 100 fulltime workers in 2018 to 3.7 in 2019. The Hoosier construction industry experienced a slight increase from a historic low rate of 2.6 per 100 in 2018 workers to 2.7 in 2019. Indiana's construction industry; however, is nearly four percent below the national average.

Annually, the Indiana Department of Labor's Quality, Metrics, and Statistics (QMS) division partners with the federal Bureau of Labor Statistics to collect this data from nearly 6,000 Indiana employers. These collection efforts result in the ability to release statewide injury and illness rates.

The Indiana Department of Labor's QMS division also gathers information for the BLS's Census of Fatal Occupational Injuries (CFOI). The 2019 BLS Census of Fatal Occupational Injuries (CFOI) indicates that 146 Hoosier workers lost their lives in a workplace incident. This represents a decrease of more than 15% percent from 2018 (173). Nationwide, the 2019 workplace fatality count from the BLS CFOI was up two percent from the figure reported in 2018. It is important to note that the BLS' CFOI counts include events and activities not covered by the workplace safety and health standards enforced by IOSHA. For example, the BLS CFOI includes self-employed workers. Generally speaking, self-employed individuals are not covered by the Indiana (or federal) Occupational Safety and Health Act (IOSH Act). In 2019, 42 (28.76%) of the 146 workplace fatalities occurred among self-employed workers.

Since the inception of the BLS CFOI in 1992, transportation-related incidents have resulted in the highest number of Hoosier workplace fatalities. This trend continued in 2019 with 55 transportation-related incidents accounting for 37.67% of all Indiana's occupational fatalities. These incidents included roadway incidents involving vehicles (47). Incidents involving highway vehicles, motorized (36) were the leading cause of the fatal transportation incidents, along with nonroadway incidents involving motorized land vehicles (13), and pedestrians struck by vehicles while working (7). While any occupational fatality is tragic, it should be noted that IOSHA does not have lawful authority to investigate or inspect a significant number of the aforementioned incidents.

The Indiana Department of Labor's five-year strategic plan incorporates activities which occur in federal fiscal years 2018 through 2022. The Indiana Department of Labor's current five-year strategic plan identifies three overarching goals:

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

FY 2020 Indiana Follow-up FAME Report

- 2. Strengthen and improve IOSHA and INSafe's infrastructure.
- 3. Promote and support the agency's cooperative programs.

Each of the three overarching goals has sub-goals and objectives to further advance Hoosier workplace safety and health.

The success achieved and the fiscal responsibility demonstrated by IOSHA underscores the Indiana Department of Labor has a quality workplace safety and health enforcement program.

FY 2020 Indiana Follow-up FAME Report

IOSHA PROGRAM NARRATIVE

The Indiana Occupational Safety and Health Administration (IOSHA) is administered by the Indiana Department of Labor. IOSHA received final state plan approval from the federal Occupational Safety and Health Administration (OSHA) on September 26, 1986. IOSHA maintains jurisdiction in both the private and public sector entities. This means state, local, and municipal employees are protected by the same workplace safety and health standards as their private sector counterparts.

The mission of the Indiana Department of Labor is to advance the safety, health, and prosperity of Hoosiers in the workplace. IOSHA plays a key role in the Department's mission by working to assure safe and healthful working conditions for working Hoosiers by promoting worker safety and health at every turn. IOSHA staff largely perform inspections and inquiries, participate in partnerships and alliances, and promote employer and employee involvement in the Indiana Voluntary Protection Program (VPP).

IOSHA's inspections and inquiries are a result of formal and nonformal complaints received, serious injury and workplace fatality reports, programmed/planned inspections, and others.

The Indiana Department of Labor believes that an effective safety and health program is one that is well-balanced and includes both enforcement and voluntary employer compliance elements. This balanced approach is validated by the most recently published nonfatal workplace injury and illness rates provided by the federal Bureau of Labor Statistics' Survey of Occupational Injuries and Illnesses. In November 2020, the Indiana again announced it tied its previous historic low nonfatal occupational injury and illness rate of 3.3 per 100 full-time workers. Nine of the state's major industries experienced reductions in the nonfatal occupational injury and illness rate as well.

IOSHA leadership regularly meets to discuss its internally generated State Activity Mandated Measures (SAMM) report. Exceptions to the SAMM are reviewed throughout the month, discussed, and corrected, if necessary. Other topics discussed during these meetings include position vacancies, recruitment, employee training, and progress made towards its goals.

According to the federal OSHA SAMM during FY 2020, Compliance Safety and Health Officers (CSHOs) and Construction Safety Inspectors conducted a combined 834 inspections. The pre-pandemic inspection goal per the IDOL's Five-Year Strategic Plan was not achieved. However, IOSHA adjusted the annually projected goal during the federal fiscal year 2021 grant application process to 867 due to the global Coronavirus pandemic. IOSHA had to quickly redirect its resources to address the influx of nonformal complaints related to COVID-19 to ensure the best outcome for Hoosier workers.

Ultimately, IOSHA concluded FY 2020 within 3.8 percent of achieving the adjusted number of projected inspections.

IDOL Five-Year Strategic Plan

The current IDOL Five-Year Strategic Plan includes FY 2018 through 2022. The plan outlines three overarching goals of IOSHA:

- 1. Help assure improved workplace safety and health for all workers, as evidenced by fewer hazards, reduced exposures, and fewer injuries, illnesses, and fatalities.
- 2. Strengthen and improve IOSHA and INSafe's infrastructure.

FY 2020 Indiana Follow-up FAME Report

3. Promote and support the agency's cooperative programs.

Training

Training for IOSHA staff continues to be a priority and is emphasized in individual employee goals. Staff were provided an opportunity to attend the 2020 Indiana Safety and Health Conference and Expo in February 2020. This annual conference provides an opportunity for safety and health professionals to learn about the latest advances in engineering and administrative controls as well as the latest in personal protective equipment available. Attendees also had the opportunity to select from more than 50 breakout sessions which featured a variety of safety and health topics.

Both the IOSHA General Industry and Construction Safety Divisions planned and held an in-house meeting and training event during FY 2020. Both events focused on recognizing CSHOs for work well done as well as a variety of applicable presentations. Skills which were practiced included interviewing techniques and understanding and establishing employer/employee relationships, and advancements in the use of technology.

IOSHA team members also attended in-person training at the federal OSHA Training Institute (OTI) early in FY 2020. Upon the cancellation of in-person training provided by OTI in March 2020, team members continued to attend training offered virtually and by webinar. Newer staff members in need of the core curriculum training (e.g. Initial Compliance; Safety, Health, and Construction Standards, Legal Aspects, etc.) were given priority enrollment considerations for OTI training.

Budget

IOSHA is funded by both a federal grant provided by the United States Department of Labor OSHA and monies allocated by the Indiana General Assembly (e.g. state general fund). Both the State of Indiana and federal OSHA provided 50% of the total funding for the program--\$2,519,200. According to the FY 2020 23(g) grant base award levels which accompany the annual grant instructions, the total federal funding for state plans is \$108,575,000 of which only 2.33% is awarded to the Indiana state plan for funding its OSHA program.

IOSHA used all funds made available by both federal OSHA and the State of Indiana in FY 2020. IOSHA did not de-obligate or permit any federal funds to lapse. The Indiana State Budget Agency imposed a 2% budget reserve during FY 2020.

Indiana was also audited by the United States Department of Labor with respect to appropriate expenditure of federal grant dollars. There was only one written comment regarding the submission of reconciliation paperwork. The entire Indiana Department of Labor was audited by the Indiana State Board of Accounts. There were only minor written comments by the state auditors. These minor comments did not even warrant a written reply from the agency.

Legislative Update Affecting Maximum Civil Penalties for "Knowing" Violations

House Enrolled Act No. 1341 established a new maximum of \$132,598 for Knowing violations issued in conjunction with a workplace fatality inspection where the Knowing violation issued could be reasonably be a contributing factor to the incident. The new maximum, which became effective on July 1, 2019, represented nearly a 90% increase over the prior maximum of \$70,000 for a knowing violation.

FY 2020 Indiana Follow-up FAME Report

In FY 2020, IOSHA assessed this increased penalty in inspections related to hazards associated with confined spaces, powered industrial trucks, and trenching and excavation activities.

Severe Violators Enforcement Program

Four Indiana companies were added to the Severe Violators Enforcement Program (SVEP) in FY 2020. This was the first time IOSHA has placed establishments on the SVEP. At the end of FY 2020, these inspections remained in contest.

Highlight of Successes

State Activity Mandated Measures (SAMM)

- SAMM 1a: Average number of days to initiate Complaint inspections (State Formula) is 6.81, which represents a slight uptick from FY 2019, but is still well-below the further review level (FRL) of ten days or less and the national average (federal and state plan) of 8.50 days. This is even more remarkable given the global pandemic and the influx of complaints IOSHA received in FY 2020.
- SAMM 2a: Average number of days to Initiate Complaint investigations (State Formula) in FY 2020 was 3.31, which is nearly half the amount of time in FY 2019 (6.23) and below the FRL of five days or less. IOSHA has made significant strides in reducing this average over the last two years as the FY 2018 average was 23.44 days.
- SAMM 3: Timely Response to Imminent Danger Complaints and Referrals was 100%. The national average for both federal OSHA and other state plan states was 97.05%.
- SAMM 5: Average Violations per Inspection with Violations for serious, willful, and repeat for FY 2020 was 2.46. This measure is above the national (federal and state plan) average of 1.78.
- SAMM 10: Percent of Work-related Fatalities Responded to in 1 Workday was 98.33% for FY 2020. The national average was 87.99%.
- SAMM 11: Average Lapse Time from Inspection Open-Date to Issue-Date is reflective of the work done primarily by the CSHO or Construction Safety Inspector and his or her supervisor. The safety lapse time measure for FY 2020 was 49.23 days and the health lapse time measure is 70.41 days. The national average for the same measures were 55.24 and 65 days, respectively. IOSHA's higher elapsed time for FY 2020 is directly attributed to the global pandemic.
- SAMM 12: Penalty Retention, Percent Penalty Retained: IOSHA retained 73% of the monetary penalties assessed through its inspection enforcement efforts. The national average penalty retention was 68.57%. This also represents an increase from the amount retained by IOSHA in FY 2019 (54.77%). During the informal hearing, the hearing officer may alleviate some monetary penalties and/or reclassify violations in consideration of enhanced abatement or abatement above and beyond the standard requirement to be completed by the employer. This enhanced or above and beyond abatement may include a photo log of worksite operations to ensure compliance with previously identified hazards, additional employee training, or full-facility assessments for a variety of hazards such as machine guarding.

FY 2020 Indiana Follow-up FAME Report

Nonformal Complaint Initiation Time Reduction – SAMM 2a

In FY 2020, IOSHA received an amount of nonformal complaints that was significantly greater than the total amount of nonformal complaints that was received in the last five FYs. The influx of complaints is a direct result of the global pandemic. However, due to the upgrades which included automation of letters to employers from COVID-19 complaints submitted online and improvements made to the process in FY 2019 and an all-hands on deck approach to processing, IOSHA still managed to reduce the Average Number Of Days To Initiate Complaint Investigations (State Formula) to 3.31 days which was a significant improvement from FY 2019. Find additional information about complaints later in this report. *Indiana VPP*

Indiana's VPP is a key component of IOSHA and is supported at the highest level in the state. Currently, there are 89 Hoosier workplaces that actively participate in VPP. These workplaces often exceed OSHA requirements and set new best practices to protect the more than 27,000 Hoosier employees who work at these sites. These sites are safety leaders and have top-level management commitment to and high levels of employee involvement in the workplace safety and health management system.

The Indiana VPP Leaders continually engage this network of safety and health professionals with the goal of cross-promoting company and industry best practices, sharing ideas, and educating one another in matters related to worker safety and health excellence. VPP Leaders conducted 156 outreach site visits collectively in FY 2020. These site visits include providing onsite assistance, follow-up for 90-day item hazard correction, and evaluation readiness visits.

An annual meeting of VPP sites and workplaces who participate in the Indiana Safety and Health Achievement Recognition Program (INSHARP) is held in conjunction with the Indiana Safety and Health Conference & Expo as a way to promote this dialogue, provide an update on matters related to the agency and OSHA standards, and the exchange of information. In addition to this meeting, the team works with VPP and INSHARP sites to host best practice meetings in the fall for the same purposes. In November 2019, three VPP best practice meetings were held in Crawfordsville, Evansville, and Fort Wayne. Due to the pandemic, the scheduled special government employee (SGE) training in July 2020 was cancelled. This was the first time in many years the Indiana VPP team was unable to partner with federal OSHA to host a special government employee (SGE) training in the state.

In FY 2020, three new Indiana worksites achieved VPP certification. The team held teleconferences with nearly all VPP sites in April, May, and June of FY 2020 and during the beginning of the global pandemic. The purpose of these teleconferences was to provide information and support to sites. Best practices for protecting workers during a global pandemic implemented by Indiana VPP sites were shared with federal OSHA Region V for further distribution.

Indiana VPP Leaders also continued to work with the representatives from the University of Notre Dame on its journey in achieving certification in the VPP. The first public sector employer in the state, Community Justice Center of Madison County, achieved VPP 'STAR' certification in December 2019.

The next calendar year will bring challenges to the team as in addition to working with new sites interested in VPP, the team is scheduled to conduct 34 recertification evaluations. This is the most recertifications the VPP team will conduct in any one year. The team is already putting together this evaluation schedule and employing the help of its group of more than 126 SGEs.

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IOSHA Lab

In an effort to increase the number of sampling events and lower health inspection lapsed time rates, IOSHA ordered six direct reading sampling meters to add to the four meters that are currently used. These meters will be used by decentralized field personnel and will help decrease health inspection lapsed times by having meters within their own geographic regions of the state. IOSHA will also be better equipped to handle imminent danger complaints like carbon monoxide and natural gas leaks within eight hours due to the increased availability of four gas direct read instruments.

In addition, IOSHA ordered and received a significant amount of standard equipment for personal sampling to also decrease health inspection lapsed time. The need for the standard equipment update also came from the requirement to use a sampling cyclone for the updated silica National Emphasis Program. Sampling cyclones needed to be standard field equipment for IOSHA industrial hygienists as most of the silica complaints originate from construction sites that are extremely transient by nature. Having the sampling cyclones as a standard piece of equipment will hopefully reduce the amount of times the CSHO will arrive onsite only to find that the job has been completed. IOSHA believes that real-time sampling is necessary to protect the worker from actual known hazard contaminant exposure.

Reorganization of Construction Safety Division

IOSHA's Construction Safety Division went through a major reorganization to allow for better coordination within geographical areas of the state of Indiana. The state is now split under two geographical areas—north and south. IOSHA's two construction supervisors were each assigned an area and all Construction Safety Inspectors working in those areas were assigned to the respective supervisor. This new organization allows for stronger and efficient communication within an area and reduces opportunities for miscommunication.

Another organizational change included the promotion of two experienced Construction Safety Inspectors to the newly developed Lead CSHO positions. These new positions play a major role in the development of newer or less experienced team members. The Lead CSHOs also provide mutual support for important department operations such as abatement processing and tracking. Having two Lead CSHOs helps also better ensure coverage for essential department duties when one of the two Leads are away.

IOSHA's General Industry Division will pursue Lead CSHO designations in FY 2021.

Teambox Talks

This year, the IOSHA Construction Safety team began hosting and participating in brief, biweekly Teambox Talks using the Microsoft Teams platform. This technology has better ensured team members remain connected to each other for the purposes of sharing ideas, asking questions, and receiving instruction. This has been a good way to better ensure good communication in the midst of a global pandemic. These Teambox Talks have also allowed for focused presentations on a variety of topics including winter safety, COVID-19, motor vehicle safety, communications tower safety, fall protection, fire protection, etc.

Challenges

The unprecedented Coronavirus pandemic presented many challenges to Hoosiers and the nation as a whole. The pandemic created a domino effect which impacted IOSHA activities.

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IOSHA received an unprecedented number of complaints in FY 2020, the majority of which were received from March-August. The volume of complaints received in this short amount of time created a backlog in the process. CSHOs, supervisors, and administrative team members actively worked to resolve complaints, as well as conduct work activities the division regularly performs. Additionally, onsite inspection activities were curtailed due to the global pandemic for a period of time.

The COVID-19 pandemic also impacted team member training, and specifically, onsite training at the OSHA Training Institute (OTI). In-person training courses were cancelled beginning in late March 2020 and did not resume during the FY. Participation in other training events provided by other organizations was also cancelled (e.g. VPPPA Region V and National Conferences). IOSHA team members participated in OTI's virtual course offerings and webinars to the extent possible.

The backfilling of critical vacancies including CSHOs and a whistleblower investigator was also negatively impacted during this period. Due to updates in requirements, posting; recruiting; and backfilling vacancies requires pre-approval from the state's strategic hiring committee.

Due to budgetary constraints related to the COVID-19 pandemic, IOSHA was unable to recruit and fill its position for a summer intern. Historically, both IOSHA and the summer intern have mutually benefited from this program. In prior years, the summer intern program has traditionally included a syllabus and curriculum for 420 hours or 11-12 weeks with the approval from Indiana State University and Indiana University. The student receives both college credit in the Occupational Health program and an hourly wage as well. The program historically provided an opportunity for the intern to explore different areas (e.g. intake, whistleblower, construction, and general industry) of IOSHA. In prior years, the summer internship program was a helpful tool in recruiting new CSHOs.

Staff attrition is also a challenge. IOSHA's hiring managers work with human resources to ensure position vacancies are timely posted to the state's job bank. Vacancies are posted on the agency's website, shared via social media (e.g. Facebook and Twitter), promoted at career fairs, advertised in the Department's external newsletter, and sent via email to industry contacts and partners (e.g. Central Indiana American Society of Safety Professionals, Anthony Wayne Chapter of the ASSP, Associated General Contractors of Indiana, Indiana Constructors, Inc., Construction Coalition for Safety, Indiana University, Indiana State University, Purdue University, etc.). In some cases, vacancies are posted multiple times in an effort to generate additional qualified candidates for consideration. Ultimately, IOSHA's goal is to hire the best qualified candidate as timely as possible.

In an additional effort to promote employment with IOSHA, an employee referral program was developed and implemented in July 2019. The referral program provides an incentive to IDOL staff to help recruit for CSHOs, INSafe Consultants, and IOSHA supervisory staff.

As IOSHA continues to further improve its operations and address a high number of complaints and serious injury reports, the division's limited resources will be an ever-increasing issue. To meet goals, staff retention will need to be a focus as IOSHA moves to the future.

IOSHA also has challenges when it comes to its lawful authority to inspect and investigate certain incidents and industries. For instance, IOSHA has very limited jurisdiction in the Hoosier agriculture industry. The Hoosier agriculture, forestry, fishing, and hunting industry is generally among the top three industries with high nonfatal workplace injury and illness rates as well as workplace fatalities. According to the Bureau of Labor Statistics' 2019 Employment Demographics, there are approximately 1,900 agriculture establishments in Indiana which employ about 15,000 workers. This represents less than one percent of the state's nearly three million Hoosier

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workers.

IOSHA also has limited jurisdiction for workplace fatalities as a result of transportation-related incidents. Transportation-related incidents are not only the single highest source of workplace fatalities in Indiana, but also the nation as well.

OSHA Express System

IOSHA continues to use OSHA Express as its data collection system for its day-to-day enforcement activities. OSHA Express has an interface to transmit data for the federal OSHA Information System (OIS). The system has been in place since 2013 and provides a great deal of flexibility in generating real-time data. It also allows for generating reports to manage different performance numbers for IOSHA.

Data collected may be timely generated and analyzed for decision-making purposes.

Complaints

Two intake team members are largely responsible for receiving and processing incoming inquiries, reports of serious injuries, referrals, and complaints. Towards the end of FY 2020, both of the Intake Duty Officer positions turned over. Additional team members filled in to cover these duties during this time. In addition to the turnover of the Intake Duty Officers, IOSHA experienced an influx of complaints, most of which were related to the global Coronavirus pandemic.

In FY 2020, IOSHA received an unprecedented number of complaints—more than 10,600, of which approximately 8,300 were related to COVID-19. Nearly 4,500 complaints were received in the month of April alone. Due to the volume of complaints received and IOSHA's limited resources, the large majority of complaints were processed through the inquiry or investigation process. At the end of FY 2020, approximately 81% of the complaints received during the FY were closed. The team continues to hold complaint stand-down days to review and process employer responses to complaints as frequently as feasible.

IFOM

IOSHA made considerable progress in updating its 2015 IOSHA Field Operations Manual (IFOM). The most current draft is currently undergoing review by the Indiana Department of Labor's General Counsel.

Local Emphasis Programs

IOSHA developed and implemented two new local emphasis programs (LEPs) in FY 2020. The LEPs were developed to reduce workplace injuries and fatalities related to falls in both construction and general industry as well as to address hazards common in demolition and renovation-related jobsites exclusively in the construction industry.

According to the BLS' CFOI between 2014-2018, there were 11 worker fatalities in Indiana suffered by workers in NAICS associated with demolition and renovation activities. Hazards targeted in the LEP include electrical, fall, struck-by/caught-in-between, and airborne contaminants such as asbestos, lead, and silica.

In Indiana between 2014-2018, there were 56 workplace deaths related to falls to a lower level. IOSHA's falls LEP targets fall-related hazards in both general industry and construction.

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Both LEPs became effective on September 3, 2020 and included a 90-day education and outreach component prior to enforcement. Presentations have been made to the Indiana Builders Association, Building and Construction Association, Indiana Constructors, Inc., Coalition for Construction Safety, as well as other key stakeholder groups. A new webpage was created by the agency to feature information regarding national emphasis programs (NEPs) and the newly added LEPs. Enforcement of these new LEPs may begin on or after December 4, 2020.

IOSHA intends to develop additional LEPs or Special Emphasis Programs (SEPs) in the future to continue to advance the safety and health of Hoosiers in the workplace. Additionally, IOSHA will review the effectiveness of the recently developed LEPs regularly and modify programs as appropriate with the goal of reducing workplace injuries, illnesses, and fatalities related to the emphasis areas.

Whistleblower

Indiana is one of the few states that has a statute of limitations to complete a whistleblower investigation. The statute of limitations is 120 days. Indiana presently has two full time whistleblower investigators that perform all whistleblower investigations. Due to the increased number of complaints received in FY 2020, an additional staff member has been reassigned to assist the team.

In FY 2020, IOSHA's Whistleblower Protection Unit received 284 complaints, docketed 115 complaints, and administratively closed 139 complaints. Comparatively, in FY 2019, the team received 193 complaints, docketed 60 complaints, and administratively closed 140 complaints. In FY 2020, the number of complaints received doubled and the number of full field investigations also nearly doubled due to the pandemic.

The Whistleblower Protection Unit completed 58 full field investigative cases during FY 2020 and had 72 pending cases at the end of FY 2020. In FY 2020, the average time to complete a case rose to 102 days from 86 days in FY 2019 due to the significant increase in complaints received that were related to COVID-19.

State Internal Evaluation Plan (SIEP)

Activity/Program Evaluated: Technology Update/Fatality and Catastrophe Files

IOSHA has focused on updating many of its processes and procedures to take advantage of some of the many technologies that are available today. Similarly, the department made moves to solidify a pilot program from its initial electronic inspection filing system.

The advantages of moving forward with modern technology are numerous. One of those includes immediate access to documents and information without the need to either mail files or carry a library of books around. Additional advantages allow for joint reviewing, presenting, and meetings with parties across the state. Aside from these, there is also a reduced administrative and organizational burden as well as the potential for decrease in lapse times. The ability to conduct work-related activities remotely is underscored given the current COVID-19 pandemic, and especially during the Governor's Executive Stay-at-Home Orders.

This update has been implemented in multiple directions throughout the year. One of the first items tackled was to solidify the Electronic Pilot Program (EPP) to the permanent Electronic Case File (ECF) system. The EPP was reviewed and comments were considered from members which included IOSHA's supervisory staff and CSHOs. Staff then applied the minor changes that were appropriate and created a permanent model, the ECF, for the

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standard way electronic files would be maintained. Guidance documents were created to assist the entire IOSHA team in building a consistent file format. This allows for easier reviewing and processing after the CSHO has completed the inspection.

One of the next advancements that was implemented is the creation of the IOSHA Shared Library using Microsoft OneNote. This shared notebook was initially made available to the IOSHA Construction Division. This allowed for the immediate access, from any state device, to hundreds of standards, interpretations, and internally created checklists. Currently, the notebook is being reorganized and moved to the new IOSHA SharePoint site to make it available to the entire IOSHA team including the General Industry Division.

The department also implemented the use of Microsoft Teams for virtual meetings and collaboration. Previously the department had been reliant on a few WebEx accounts to hold virtual meetings. Now, the dynamic has changed to regular and in some instances, daily Teams meetings. This helps everyone to collaborate and share ideas on day-to-day items and provides an easy way for management to direct the team on specific issues or topics. Some of the management have implemented weekly and bi-weekly reoccurring meeting to discuss safety topics, file reviews, and employment related presentations.

Another change the department is currently piloting is the electronic Fatality and Catastrophe (FAT/CAT) file. As FAT/CAT files have a longer retention period than other inspection files. In an effort to get away from physical files and the hassles that are inherent with that type of file management, the IOSHA Construction Division has been piloting an electronic form of the FAT/CAT file.

The development of this program has gone through multiple revisions and taken comments, from not only the Construction Division but similarly the General Industry Division, to help build a workable pilot program that both divisions can use. Microsoft's OneNote program is the carrying vessel for IOSHA's electronic FAT/CAT files. The model has CSHOs building the FAT/CAT files within a OneNote section, and then exporting that section to a specific file location on the IOSHA's Shared network drive. Access to these files is given to not only IOSHA personnel but additionally IDOL's general counsel for review and Access to Public Records Act (APRA) needs. The department has created multiple training videos, a template, and guidance documents to assist affected personnel in creating these files to help ensure consistency and quality.

This new electronic FAT/CAT file system has the potential to improve department operations and procedures by:

- Reduced inspection lapse times by not requiring documents to be mailed to the supervisor from the CSHO.
- Enhanced ability to add documentation to files post-issuance.
- APRA requests on FAT/CAT files will be able to be fulfilled easier with direct access to the files by IDOL's general counsel.
- Internal reviews will also be able to be completed easier with the improved file organization capabilities.
- FAME reviews will be able to be completed easier with improved access abilities that can be provided to reviewers.

Time was also put into procuring hybrid tablet/computers for the next phase in the advancement of technology with IOSHA's operations. Using the touch-screen technology and styluses on these new devices, CSHOs will be able to almost eliminate the use of paper on inspections and document the entire inspection electronically. This will be an additional time saver for organization and reduced administrative work to scan in notes and other information gathered during inspections.

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To summarize, the developments in technology that IOSHA is implementing will help the department conduct business with a higher level of efficiency, accuracy, and provide the ability to do more from the home or office.

SOAR Conclusion

Indiana's overall nonfatal workplace injury and illness rate is at a historic low for the state. Moving forward, further improvements to reduce workplace injuries and illnesses will prove to be even more challenging. IOSHA must be innovative and effective and focus on ways to continue to take Hoosier workplace safety and health to the next level.

IOSHA's future will focus on a balance of strengthening its enforcement responsibilities and expanding cooperative programs which best support the Indiana Department of Labor's mission to advance the safety, health, and prosperity of Hoosiers in the workplace.

Appendix E – FY 2020 State OSHA Annual Report (SOAR) FY 2020 Indiana Follow-up FAME Report INDIANA DEPARTMENT OF LABOR ANNUAL PERFORMANCE PLAN

The Indiana Department of Labor's overriding strategic goal is to reduce occupational injuries, illnesses and fatalities in Indiana, particularly in the high hazard industries that have the greatest number of working Hoosiers.

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 1.1a	Reduce workplace injuries and illnesses in high hazard industries by a combined 15% by the end of federal fiscal year 2022.
Annual Performance Goal 1.1	 Reduce workplace injuries and illnesses in high hazard industries by a combined 3%. Food manufacturing (311) Beverage and tobacco product manufacturing (312) Wood product manufacturing (321) Primary metal manufacturing (331) Metalworking machinery manufacturing (333) Nursing and residential care facilities (623) Hospitals (622) Warehousing and storage (493)
Indicators/Metrics	Bureau of Labor Statistics' (BLS) Survey of Occupational Injuries and Illnesses (SOII) rate for the Indiana high hazard industries identified.
Data Sources	BLS SOII Table 1. Incident Rates of nonfatal occupational injuries and illnesses by industry and case types.
Baseline	 2015 BLS SOII rates for the Indiana high hazard industries: Food Manufacturing (311) 5.9 Beverage and tobacco product manufacturing (312) 6.2 Wood Product Manufacturing (321) 10.4 Primary Metal Manufacturing (331) 4.3 Metalworking Machinery Manufacturing (3335) 8.0 Hospitals (622) 5.8 Nursing and Residential Care Facilities (623) 7.4 Warehousing and storage (493) 4.7
Comments	 IOSHA will prioritize complaints from the industries (NAICS) referenced in <i>Annual Performance Goal 1.1 a.</i> Given the high incident rates, non-formal complaints received by IOSHA in these industries may be upgraded to formal complaint status. INSafe will prioritize onsite consultation, training, and outreach requests from the industries (NAICS) referenced in <i>Annual Performance Goal 1.1 a.</i> "Initial" onsite consultation requests with serious hazards identified in the above referenced industries will require an onsite "Follow-up" visit. INSafe will provide other additional outreach activities specifically aimed at these emphasis industries.

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	2019 BLS SOII rates for the Indiana high hazard industries:
	• Food Manufacturing (311) 4.2 – represents a 28.81% decrease
	from 2015 baseline rate of 5.9
	• Beverage and tobacco product manufacturing (312) 4.3 –
	represents a 30.65% decrease from 2015 baseline rate of 6.2
	• Wood Product Manufacturing (321) 7.3 – represents a 29.81%
	decrease from 2015 baseline rate of 10.4
	• Primary Metal Manufacturing (331) 3.7 – represents a 13.95%
	decrease from 2015 baseline rate of 4.3
	• Metalworking Machinery Manufacturing (3335) 1.4 – represents a
FY 2020 Results	82.50% decrease from 2015 baseline rate of 8.0
	• Hospitals (622) 5.8 – represents no change from 2015 baseline rate of 5.8
	 Nursing and Residential Care Facilities (623) 7.1 – represents a
	4.05% decrease from 2015 baseline rate of 7.4
	• Warehousing and storage (493) 5.3 – represents a 12.77% increase
	from 2015 baseline rate of 4.7
	As of the publication of the 2019 SOII results, this goal was exceeded . The
	SOII numbers, however, are obtained through a survey which can lead to
	volatility in the numbers and wide fluctuations from year-to-year.
	Reduce workplace fatalities within IOSHA's jurisdiction by a combined 10%
Performance Goal 1.1b	in Indiana high fatality industries – transportation and warehousing,
	agriculture, and manufacturing by the end of federal fiscal year 2022.
	Reduce workplace fatalities within IOSHA's jurisdiction by a combined 2%
Annual Performance Goal	in Indiana high fatality industries – transportation and warehousing;
	agriculture; forestry, fishing, and hunting; and manufacturing.
	BLS Census of Fatal Occupational Injuries (CFOI) fatalities for the
Indicators/Metrics	transportation and warehousing; agriculture; forestry, fishing, and hunting;
	and manufacturing and internal tracking of fatalities within IOSHA's
	jurisdiction.
Data Sources	BLS CFOI Table A-1. Fatal occupational injuries by industry and event or
	exposure, Indiana.
	2015 BLS CFOI count for Indiana high fatality industries:
Baseline	• Transportation and warehousing, 27
	• Agriculture, forestry, fishing, and hunting, 23
	• Manufacturing, 12
Comments	IOSHA will give top priority to inspecting fatalities in these high fatality
	industries. INSafe will prioritize outreach efforts in the same industries.
FY 2020 Results	The 2019 BLS CFOI count for Indiana high fatality industries from the
	baseline established in 2015:
	• Transportation and warehousing, 27 – No change from baseline.
	• Agriculture, forestry, fishing, and hunting, <i>18 – 21.73% decrease from</i>
	baseline.
	• Manufacturing, 14 – 16% increase from the baseline.

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	The FY 2020 annual goal was exceeded.
Performance Goal 1.2a	Reduce workplace injuries and illnesses in the construction (NAICS 23) industry by 15% by the end of federal fiscal year 2022.
Annual Performance Goal	Reduce workplace injuries and illnesses in the construction industry by 3%.
Indicators/Metrics	BLS SOII rate for the Indiana construction industry.
Data Sources	BLS SOII Table 1. Incident Rates of nonfatal occupational injuries and illnesses by industry and case types.
Baseline	2015 BLS SOII rate for the Indiana construction industry is 2.8.
Comments	
FY 2020 Results	The 2019 BLS SOII rate for the Indiana construction industry was 2.7 per 100 workers. This was a slight uptick from the 2018 historic low of 2.6 per 100 full-time workers for the construction industry.
Performance Goal 1.2b	The FY 2020 annual goal was not met. Reduce construction industry fatalities within IOSHA's jurisdiction by 10% by focusing efforts on leading causes of worker deaths (i.e. falls, trenching, and scaffolds) by the end of federal fiscal year 2022.
Annual Performance Goal	Reduce construction industry fatalities within IOSHA's jurisdiction by 2% by focusing efforts on leading causes of worker deaths (i.e. falls, trenching, and scaffolds).
Indicators/Metrics	BLS CFOI count for the Indiana construction industry.
Data Sources	BLS CFOI Table A-1. Fatal occupational injuries by industry and event or exposure, Indiana.
Baseline	2015 BLS CFOI count for the Indiana construction industry = 11.
Comments	
FY 2020 Results	The 2019 BLS CFOI count for the Indiana construction industry was 21. While the industry experienced an increase from the 2015 baseline, the 2019 count is ten fewer than the 2018.
Performance Goal 1.3	The FY 2020 annual goal was not met.Develop 15 electronic or printed workplace safety and health education and outreach products or resources which focus on educating and informing Hoosier stakeholders.

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Annual Performance Goal	Develop 3 electronic or printed workplace safety and health education and outreach products or resources which focus on educating and informing Hoosier stakeholders.	
Indicators/Metrics		
Data Sources	Internally tracked.	
Baseline		
Comments		
FY 2020 Results	The following eight outreach and educational materials were developed during FY 2020: IN Review (February 2020), three quarterly newsletters, three INSHARP Newsletters, Interactive Presentation: "On the Record" (February 2020).	
	This goal was exceeded for FY 2020.	
Strategic Goal #2: Strengthen	Strategic Goal #2: Strengthen and improve IOSHA and INSafe's infrastructure.	
Performance Goal 2.1a	Improve IOSHA elapsed time (from opening to citation issuance) by 25% for safety inspections.	
Annual Performance Goal	Improve IOSHA elapsed time (from opening to citation issuance) by 5% for safety inspections.	
Indicators/Metrics	Federal OSHA State Activities Mandated Measures (SAMM) for federal fiscal year-end.	
Data Sources	Federal OSHA SAMM Measure 11.	
Baseline	IOSHA FY 2016 YTD SAMM 11 Safety is 54.67 working days	
Comments	National Average from SAMM 11 will be targeted. FY 2016 = 45 working days.	
FY 2020 Results	FY 2020 lapse time for safety inspections was an average of 49.23 days which exceeded the goal of 46.47 days per the reduction of 5% annually from the baseline. It is important to note that the IOSHA safety inspection lapse time was lower than the national average of 55.24 days and within the further review level (FRL). This goal was not met for FY 2020.	

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Performance Goal 2.1b	Improve IOSHA elapsed time (from opening to citation issuance) by 40% for health inspections.
Annual Performance Goal	Improve IOSHA elapsed time (from opening to citation issuance) by 8% for health inspections.
Indicators/Metrics	Federal OSHA SAMM for federal fiscal year-end.
Data Sources	Federal OSHA SAMM Measure 11.
Baseline	IOSHA FY 2016 YTD SAMM 11 Health is 99.79 working days
Comments	National Average from SAMM 11 will be targeted. FY 2016 = 57 working days.
FY 2020 Results	The FY 2020 lapse time for health inspections was 70.41 days which was better than the strategic plan goal of 75.84 days per the reduction of 5% annually from the baseline. This is also within the FRL of 48.31 to 72.47 days.
	This goal was exceeded for FY 2020.
Performance Goal 2.1c	Increase the number of IOSHA enforcement inspections by 40%.
Annual Performance Goal	Increase number of inspections by 8%.
Indicators/Metrics	Federal Fiscal Year reporting
Data Sources	OSHA Express/OSHA Information System
Baseline	FY 2018 estimated number of inspections = 1025
Comments	
FY 2020 Results	The target number of inspections for FY 2020 was 1,271 inspections. This goal was adjusted during the submission of the FY 2021 annual 23(g) grant application to 867 due to the global Coronavirus pandemic. IOSHA conducted 834 or 96% of the projected inspections.
	This goal was not met.

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Performance Goal 2.1d	Complete IOSHA whistleblower investigations within 80 days for the investigator portion and 120 days total for IOSHA.
Annual Performance Goal	Whistleblower cases completed within 80 days for investigator, 120 total for IOSHA.
Indicators/Metrics	SAMM 14 and 16
Data Sources	OSHA Express/OIS
Baseline	N/A
Comments	
FY 2020 Results	The average number of days for IOSHA to complete the investigation was 102 days. Days for the investigator portion were unavailable due to not being able to generate the appropriate report.
	This goal was met.
Performance Goal 2.2	Improve INSafe consultation request response time (from employer submission of request to onsite visit) by 20%.
Annual Performance Goal	Improve INSafe consultation request response time (from employer submission of request to onsite visit) by 4%.
Indicators/Metrics	OSHA Express
Data Sources	Internal tracking (average) using OSHA Express Visit Lapse Report for closed visits.
Baseline	FY 2016 average consultation request response time (from employer submission of request to onsite visit) = 56 days.
Comments	
FY 2020 Results	Due to scheduling and re-scheduling during the pandemic, the FY 2020 average consultation request response time (from employer submission of request to onsite visit) = 75 <i>days 34% increase</i> .
	This goal was not met .

Respond to formal complaint inspections made to IOSHA within 10 working days.
Respond to formal complaint inspections made to IOSHA within 10 working days.
SAMM 1a
OSHA Express
FY 2016 = 8.93
The average response time to respond to complaints inspections was 6.81 days. This goal was exceeded .
Ensure 95% of non-contested cases have abatement completed within 60 working days of the last abatement due date.
Ensure 95% of non-contested cases have abatement completed within 60 working days of the last abatement due date.
OSHA Express "Unsatisfied Activities" Report.
N/A
105 cases had abatement incomplete greater than 60 days out of 418 cases with citations resulting in 74.88% of non-contested cases with abatement completed within 60 days of due date.
This goal was not met. Provide 10 non-OTI opportunities for IOSHA and INSafe staff to grow professionally and improve technical proficiencies.

Annual Performance Goal	Provide 2 non-OTI opportunities for IOSHA and INSafe staff to grow professionally and improve technical proficiencies.
Indicators/Metrics	Indiana Department of Labor internal tracking.
Data Sources	Internally maintained spreadsheet
Baseline	Provided 2 non-OTI opportunities for IOSHA and INSafe staff to grow professionally and improve technical proficiencies in FY2017.
Comments	
FY 2020 Results	 IOSHA and INSafe staff participated in a variety of training opportunities in addition to core and specialized training at OTI. Non-OTI training included: IOSHA General Industry Meeting/Legal Case Files (November 2019) IOSHA Construction Safety Meeting/Legal Case Files and Interviewing Techniques (January 2020) Indiana Safety and Health Conference & Expo (February 24-26, 2020) IOSHA Construction Safety – masonry/bracing, trenching and excavating, and electrical and scaffold safety (August 3-September 2, 2020) In addition to the training specified above, staff have access to online training made available by the State of Indiana Personnel Department (SPD) LinkedIn Learning accounts. This self-paced training includes instruction on communication, organization, software used, etc.
Strategic Goal #3: Promote an	nd support the agency's cooperative programs.
Performance Goal 3.1	Increase the number of IOSHA's VPP and INSafe's INSHARP sites by 50.
Annual Performance Goal	Increase the number of IOSHA's VPP and INSafe's INSHARP sites by a combined total of 10.
Indicators/Metrics	Indiana Department of Labor internal tracking.
Data Sources	Internally maintained spreadsheet.

Baseline	FY 2016 new INSHARP sites = 6, FY 2016 new VPP sites =10
Comments	
FY 2020 Results	Three new VPP site were certified in FY 2020. Two new INSHARP sites were certified in FY 2020.
	This goal was not met.
Performance Goal 3.2	Coordinate and offer 10 meetings/best practice sessions for IOSHA's VPP and INSafe's INSHARP participants and other interested parties.
Annual Performance Goal	Coordinate and offer 2 meetings/best practice sessions for VPP and INSHARP participants and other interested parties.
Indicators/Metrics	Indiana Department of Labor internal tracking.
Data Sources	Internally maintained spreadsheet.
Baseline	N/A
Comments	
FY 2020 Results	Three regional "Best Practices" meetings/educational events were held in south, central, and southern Indiana for VPP and INSHARP participants in November in FY 2020. In addition to the regional meetings, a "Best Practices" and educational session was hosted in coordination with the annual Indiana Safety and Health Conference & Expo in February 2020. This goal was exceeded .
Performance Goal 3.3	Conduct a combined 600 IOSHA's VPP and INSafe's INSHARP outreach visits.
Annual Performance Goal	Conduct a combined 120 IOSHA VPP and INSafe INSHARP outreach visits.
Indicators/Metrics	Indiana Department of Labor internal tracking.
Data Sources	Internally maintained spreadsheet.

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Baseline	N/A
Comments	
FY 2020 Results	VPP staff conducted a total of 156 visits in FY 2020. Due to the pandemic and the retirement of the INSHARP coordinator, only 11 (previous year = 22) INSHARP visits were conducted in FY 2020. Total outreach activities for FY 2020 were 167.
	This goal was exceeded .
Performance Goal 3.4	Sign five new/renew strategic workplace safety and health partnerships or alliances by the end of federal fiscal year 2022.
Annual Performance Goal	Sign one new strategic workplace safety and health partnership or alliance.
Indicators/Metrics	Indiana Department of Labor internal tracking.
Data Sources	Internally maintained spreadsheet.
Baseline	
Comments	
FY 2020 Results	 Two partnerships were signed in FY 2020. University of Notre Dame – Remick Family Hall (July 2020) Walbridge Construction – McKenna Hall (February 2020) This goal was met.