# FY 2024 Follow-up Federal Annual Monitoring Evaluation (FAME) Report

Virgin Islands Division of Occupational Safety and Health (VIDOSH)



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##  Executive Summary

The purpose of this report is to assess the Virgin Islands Division of Occupational Safety and Health (VIDOSH) program’s activities for Fiscal Year (FY) 2024, and its progress in resolving outstanding findings from previous Federal Annual Monitoring Evaluation (FAME) reports.

Since September 2019, OSHA’s New York City (NYC) Regional Office (formerly Region 2) substantially increased its monitoring of VIDOSH due to concerns about program performance. OSHA established mandatory activities for VIDOSH to complete during the first quarter of the FY 2020 performance period, but VIDOSH did not sufficiently address these activities. Therefore, on March 2, 2020, VIDOSH was designated as a high-risk grantee in accordance with 2 Code of Federal Regulations (CFR) 200.207 and placed conditions on the FY 2020 grant. At the end of the FY 2020 performance period, VIDOSH did not meet all the mandatory grant activities. As a result, VIDOSH’s high-risk grantee status was continued, and OSHA began including an addendum of mandatory grant activities with corresponding deadlines in its subsequent grant approval letters. These conditions on VIDOSH’s grant have continued through FY 2025.

During the FY 2024 performance period, VIDOSH experienced several major changes: the program director who had been with VIDOSH for many years, resigned. On January 29, 2024, VIDOSH appointed a new program director, Gregoreese Willocks, to oversee and manage enforcement, consultation, and whistleblower activities in the State Plan. She was formerly employed as VIDOSH’s safety and health consultant. VIDOSH also lost one of its experienced compliance safety and health officers (CSHOs). In February 2024, the NYC Region arranged for an experienced manager from the Virginia State Plan to serve as a mentor to assist VIDOSH. This mentor works with the VIDOSH management team through virtual meetings to assist with CSHO training, program administration training for the new director, state plan monitoring issues, the whistleblower case backlog, the open inspection backlog, and the open violation abatement backlog, among other activities. In summer 2024, the Virgin Islands Commissioner of Labor, VIDOSH Director, and two CSHOs visited Virginia State Plan offices to meet staff, observe operations, and conduct joint field inspections. This mentoring relationship continues in FY 2025.

In FY 2024, VIDOSH was required to submit monthly reports to OSHA’s NYC Regional Office to report its progress in meeting their mandatory grant activities. Since hiring the new director in January 2024, VIDOSH has been more responsive in submitting monthly reports timely, providing more complete updates, and actively working to meet its mandatory activities. To further improve communication and keep the Region aware of its activities, the VIDOSH director voluntarily began sending weekly updates to the Region regarding the status of enforcement, consultation, and whistleblower activities. These weekly updates have improved communication and dialogue between VIDOSH and the regional staff.

Out of the four mandatory activities as part of its high-risk designation, VIDOSH met two activities and partially met the remaining two activities. The grant activities that were not met related to abatement documentation and safety lapse time. The new VIDOSH director inherited a backlog of overdue abatement from citations that were predominately issued prior to FY 2024. Before the director took this position, VIDOSH made minimal effort to acquire abatement documentation from employers. VIDOSH, during FY 2024, began issuing dunning letters for past due abatement, meeting with the commissioners of the agencies with overdue abatement, and conducting follow-up inspections.

VIDOSH conducted 56 total inspections, 41 health and 15 safety inspections, or approximately 124% of its inspection goal of 45 inspections for the fiscal year. VIDOSH’s average citation lapse time for health was below the Federal Review Level (FRL), but the safety lapse time was slightly above the FRL for the evaluation period.

VIDOSH’s consultation program conducted 12 consultation visits in FY 2024, meeting its mandatory grant activity for consultation visits. This was a significant accomplishment because after January 2024, the VIDOSH director was performing both director and consultant functions. Prior to her promotion, the director was VIDOSH’s sole consultant.

During FY 2024, VIDOSH received no whistleblower complaints for processing. VIDOSH aggressively worked on addressing the backlog of approximately 16 whistleblower cases that were received and not processed prior to FY 2024, closing 14 of these cases before the end of FY 2024 (VIDOSH SOAR, FY 2024). This achievement is noteworthy as VIDOSH had no personnel trained in handling whistleblower complaints when the new VIDOSH director assumed her role. She arranged for herself and other members of her staff to attend whistleblower courses at the OSHA Training Institute (OTI) to acquire the knowledge necessary to effectively process these complaints. The VIDOSH director also consulted with the NYC Regional Whistleblower staff to discuss individual whistleblower cases, ensuring that the cases were processed correctly.

The State Plan made progress to address the previous 13 findings and four observations from the FY 2023 Comprehensive FAME Report. One finding from last year’s FY 2023 comprehensive FAME was completed. One finding was converted to an observation. One observation was closed based on the OSHA Information System (OIS) reports. OSHA identified seven new observations. Therefore, this year’s FAME resulted in VIDOSH having a total of 11 findings and 10 observations.

 II. State Plan Background

Historical Background

The Virgin Islands State Plan was initially approved on August 31, 1973, completed all the State Plan developmental steps, and was certified as structurally complete on September 22, 1981. Pursuant to Section 18(e) of the OSH Act and procedures at 29 CFR 1902, OSHA determined that the Virgin Islands program met all requirements and, in actual operation, was at least as effective (ALAE) as the federal program. The Virgin Islands State Plan was granted final approval on April 17, 1984, and OSHA relinquished federal enforcement authority (49 FR 16766). The Virgin Islands Department of Labor (VIDOL) is the designated agency for administering the OSHA funded enforcement program in the Virgin Islands through VIDOSH.

On November 13, 1995, OSHA announced that the Virgin Islands State Plan was no longer ALAE and other 18(e) requirements were no longer being met. In response to this finding, the Virgin Islands Commissioner of Labor agreed to voluntarily relinquish the State Plan's final approval status under Section 18(e). This reasserted concurrent OSHA enforcement authority and jurisdiction and required VIDOSH to undertake necessary corrective action to regain final approval status (60 FR 56950).

The 1995 decision to reinstate concurrent jurisdiction allowed OSHA to exercise concurrent enforcement authority to assure worker protection, while allowing the Virgin Islands time and assistance to improve its performance. However, between 1995 and 2003, VIDOSH was unable to institute improvements to its staffing and operational performance. A series of meetings between OSHA Region II (currently NYC Region) and then Virgin Islands Governor, Charles W. Turnbull, was initiated to discuss these outstanding performance issues and next steps.

Pursuant to Governor Turnbull’s May 12, 2003, letter, OSHA revised 29 CFR 1952 and 29 CFR 1956 in July 2003 to reflect the Virgin Islands decision to exclude private sector employment from coverage under the plan while retaining coverage of state and local government (SLG) employment. The new plan applies to SLG only. State Plan coverage of all private sector employers and employees was terminated effective July 1, 2003, and OSHA resumed full jurisdiction over private sector employment in the Virgin Islands. This action made it possible for OSHA to devote its resources to providing safety and health protection in Virgin Islands workplaces, rather than expending its resources in a possibly lengthy and complex proceeding under 29 CFR 1955 to formally terminate State Plan approval.

The agreement allowed the Virgin Islands to qualify for enhanced funding under a provision of the Omnibus Insular Areas Act of 1977 (48 U.S.C. Section 1469 (d)), which authorizes OSHA to waive the requirement for Territorial matching funds for grant amounts under $200,000. A new subpart H to 29 CFR part 1956 was added and codified the Virgin Islands State Plan as a developmental plan under 29 CFR part 1956, to allow the Territory to make certain adjustments to its (SLG) employee program structure, and to revise its State Plan document to reflect its more limited scope. This change also terminated the private sector consultation services that were provided under the 23(g)-grant funding. To address this, OSHA provided funding for a new 21(d) private sector consultation program for the Virgin Islands.

Current Background

The Virgin Islands State Plan is currently administered by VIDOSH which is part of VIDOL. VIDOL Commissioner Gary Molloy oversees VIDOSH which has offices on St. Croix and St. Thomas. These offices cover all safety and health enforcement and consultation activities for SLG workers in the Virgin Islands. All private sector and federal government agency complaints are forwarded to OSHA’s Puerto Rico Area Office for appropriate action.

In late January 2024, VIDOSH appointed a new program director, Gregoreese Willocks, to oversee and manage enforcement, consultation, and whistleblower activities in the State Plan. She was formerly employed as VIDOSH’s safety and health consultant. This staffing change left no staff designated to perform consultation visits. This position remained vacant throughout FY 2024. The director performed both consultation visits and oversaw the State Plan throughout FY 2024. The consultation position has now been filled, and the consultant is being trained to conduct visits.

At the beginning of calendar year 2025, VIDOSH’s current staff included one director, one assistant director, two administrative support staff, one safety CSHO, one health CSHO, and one consultant. There is a vacant safety CSHO position on the organizational chart, but this position is 100% state funded.

The Virgin Islands Occupational Safety and Health (VI-OSH) Act provides for the adoption of federal standards applicable to SLG employers, with issuance on the effective date specified in the federal standard. The VI-OSH Act contains provisions for the issuance of failure-to-abate monetary penalties for those SLG employers found not to be in-compliance with applicable standards on a first instance basis. VIDOSH’s review procedures are handled through a hearing examiner with the right to appeal to the Commissioner of Labor and the Virgin Islands Superior Court in lieu of the Review Commission as is the case in the federal program.

VIDOSH continued its high-risk grantee status in FY 2024. VIDOSH did not meet all its mandatory grant activities in FY 2024; therefore, the State Plan was required to deobligate $50,782 of its $283,200 in federal funding under Section 23(g) of the Occupational Safety and Health Act (OSH Act). VIDOSH did not lapse any funds in FY 2024, which was a significant improvement in its management of federal funds.

Prior to FY 2024, lapsing federal funds became a consistent trend for VIDOSH over the last nine years, highlighting the program administration’s inability to manage the federal funding it received. VIDOSH’s program administration lapsed federal funding in seven of the last nine fiscal years. In FY 2015, VIDOSH lapsed $7,071; $5,605 in FY 2017; $76,517 in FY 2018; $19,787 in FY 2020; $11,767 in FY 2021; $3,035 in 2022; and $35,524 in FY 2023 – totaling $159,223 in federal funds.

**New Issues**

**Grantee High-Risk Designation**

VIDOSH’s high-risk designation continued in FY 2024 since all four of the mandatory grant activities were not met in FY 2023. The four mandatory grant activities for FY 2024 were:

1. VIDOSH will conduct 45 enforcement inspections in FY 2024.
2. VIDOSH will ensure that abatement is achieved, and case files are closed according to the schedule for activity.
3. VIDOSH will conduct 12 consultation visits for FY 2024.
4. The average lapse time for safety and health individually will not be higher than 20% of the national reference level.

High-risk designation is continued in FY 2025. VIDOSH has struggled to meet activity #2b, which requires addressing abatement overdue 60 calendar days through a follow-up inspection, petition for modification of abatement, or marking the violation as corrected.

## III.  Assessment of State Plan Progress and Performance

### Data and Methodology

OSHA established a two-year cycle for the FAME process. FY 2024 is a follow-up year and as such, OSHA was not required to perform an on-site evaluation and case file review. However, due to the Virgin Islands State Plan being designated as a high-risk grantee in FY 2024, and this status being continued into FY 2025, OSHA reviewed select case files to continue to closely monitor the status of previously identified problematic areas as well as progress made to address these areas. Additionally, the Virgin Islands State Plan expressed the desire to be removed from high-risk grantee status in FY 2026. The case file review provided additional information to determine whether this status should be continued or discontinued into FY 2026.

An OSHA team consisting of the State Plan Monitor and five compliance assistance (CA) staff conducted a full case file review of the enforcement and consultation files. A whistleblower case file review was not conducted.

The NYC Region initially requested 12 enforcement files for review to evaluate VIDOSH’s progress in addressing the findings and observations identified in the FY 2023 FAME report. During the initial file review, it was noted that VIDOSH issued failure-to-abate violations with monetary penalties for unsupported citations that were issued during the original and subsequent follow-up inspections. One of the mandatory grant activities for both FY 2024 and FY 2025 required that abatement be documented for files with abatement more than 60 days past due. The NYC Region was withholding money from VIDOSH for not ensuring that abatement was documented. It was determined that additional files needed to be reviewed to further evaluate the follow-up inspection process and determine the status of open inspections. Therefore, the file review was expanded, and additional personnel were recruited to assist with the review of these additional files.

The enforcement and consultation case file reviews were conducted during the timeframe of February 5 to March 7, 2025. A total of 32 enforcement cases, two consultation files, and nineteen unprogrammed activities were reviewed and referenced in this report. Additionally, there were 14 enforcement cases that were opened prior to FY 2024 that were reviewed to assist in determining the merits of the subsequent follow-up inspections that were conducted in FY 2024. These cases were not referenced in the findings or observations listed in this report.

The safety and health enforcement inspection files referenced in this report were selected from both open and closed inspections conducted during the evaluation period (October 1, 2023, through September 30, 2024). The consultation files were selected from opened files during this same evaluation period to review correction of the hazards identified during the visit. The selected population included the following:

* Four safety complaints
* Fourteen health complaints
* One health referral
* Four safety follow-ups
* Nine health follow-ups
* Two consultation visits

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

* State Activity Mandated Measures (SAMM) Report
* State Information Report (SIR)
* Mandated Activities Report for Consultation (MARC)
* OSHA Information System (OIS)
* State OSHA Annual Report (SOAR)
* State Plan Annual Performance Plan (APP)
* State Plan Grant Application
* Quarterly monitoring meetings between OSHA and the State Plan
* Weekly Reports prepared by VIDOSH
* New York Region Whistleblower Dashboard
* Full case file review

### Findings and Observations

#### Findings (Status of Previous and New Items)

VIDOSH made some progress to address the previous 13 findings and four observations from the FY 2023 Comprehensive FAME Report. This follow-up FAME report contains 11 findings and 10 observations (three continued and seven new). One finding was completed and another was converted to an observation. One observation was closed from last year’s FAME. Appendix A describes the new and 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 FY 2023 finding and recommendation in detail.

**Completed Findings**

**Finding FY 2023-01 (FY 2022-01, FY 2021-01, FY 2019-01, FY 2018-01):** **OSHA Information**

**System (OIS)**

VIDOSH conducted 39 inspections during FY 2023. Only seven of these 39 (18%) case files were closed in OIS and available for review when OSHA requested them in November 2023. The Open Inspection Report, run on February 19, 2024, identified 17 case files open more than 180 days (OIS Open Inspection Report). VIDOSH did not utilize OIS reports to ensure proper monitoring and closure of the case files.

**Status:** The Open Inspection Report run on February 18, 2025, showed 66 open cases. These cases included 31 pending abatement, 29 pending issuance of citations, three contest files, two open cases, and one case awaiting a penalty payment. Under the tab on this report that identified the 29 inspections with pending citations, there were no cases with citations that were pending more than 180 days listed. VIDOSH under its Act cannot issue citations more than 180 calendar days from the opening conference.

VIDOSH has struggled for several years with a backlog of inspections with citations pending over 180 calendar days, contrary to statutory requirements. This issue persisted even after being placed under high-risk grantee status. However, for the first time since being designated as a high-risk grantee, VIDOSH has successfully met the mandatory grant activity requirement of eliminating inspections with pending citations past 180 days (VI SOAR, FY 2024).

As of April 2024, VIDOSH eliminated the backlog of inspections with pending citations over 180 days. Inspections with citations pending for more than 180 days after the opening conference date were not issued. Instead, Hazard Alert Letters (HALs), where appropriate, were issued to the employer. The director reviewed each inspection file, issued close out letters to each employer, and closed the files in OIS (VI SOAR, FY 2024).

Since April 2024, VIDOSH has not had any inspections with citations that have not been issued within 180 calendar days from the opening conference. VIDOSH forwards a weekly report to OSHA that provides an update on the status of citations issued and inspections closed.

To ensure that a backlog does not recur, VIDOSH is tracking open inspections on a weekly basis (VI SOAR, FY 2024). This finding is being marked as completed because there are no inspection files currently open with citations pending over 180 calendar days from the opening conference. There are files that remain open due to abatement that has not been received. This issue is being covered under Finding 2024-06 which is continued.

**Continued Findings**

**Finding FY 2024-01(FY 2023-02):Addressing Complaint Items**

In FY 2023, in three of the four (75%) of the complaint inspection files reviewed, the evaluation of the complaint items was not adequate. In one file, the complainant was forwarded a letter stating that the employer was taking corrective actions; however, there was no inspection conducted because the business was closed and undergoing mold remediation. A return to the site to evaluate other two complaints alleged hazards related to odors and indoor air quality issues. In both cases, concerns were raised about the source of the odors being related to construction work taking place outside the building. These exposures were not evaluated with air sampling. VIDOSH forwarded complaint letters to complainants who had provided their information at the conclusion of the inspections.

**Status:** In FY 2024, in six of 18 (33%) of the inspections with related unprogrammed activities reviewed, the files lacked evidence either in the narrative or with citations that the complaint items were evaluated. VIDOSH should consider adding a description of the evaluation of each complaint item in the narrative. Many of the complainants who file complaints with VIDOSH request not to receive results letters. This finding will be amended to reflect the current case file review and is continued.

**Finding FY 2024-02 (FY 2023-04, FY 2022-04, 2021-05, FY 2020-04)*:* Lack of Case File Documentation**

In FY 2023, six of seven (86%) of the files reviewed did not contain field notes. Three of the four (75%) complaint files were missing evidence that the OSHA 300 logs for the last three years and current year were reviewed or a statement that logs were not required.

**Status:** In FY 2024, ten of the 32 (31%) files reviewed did not contain field notes and/or a narrative. Seven of the 32 files (22%) were missing evidence that the OSHA 300 logs for the last three years and current year were reviewed or a statement that logs were not required. This finding will be amended to reflect the current case file review and is continued.

**Finding FY 2023-03 (FY 2022-05, FY 2021-06, FY 2020-05, FY 2019-05, FY18-OB-01):Adequate Evidence to Support Violations**

In FY 2023, there were two sets of citations issued in the seven closed files that were reviewed. Both files lacked adequate employer knowledge documentation on the worksheets. The worksheets identified “exposing” as the evidence to support employer knowledge of the hazards. One of two (50%) had a worksheet in the case file that had no information for worksheet details.

**Status:** In FY 2024, in 12 of 23 (52%) of files reviewed, the files lacked adequate employer knowledge documentation on the worksheets. In nine of 23 (39%) of the files reviewed, files were missing adequate employee exposure documentation to support the citation.

VIDOSH is issuing citations under the hazard communication and not documenting the chemicals that are present and how employees are exposed. The inspection files do not contain Safety Data Sheets. Citations are being issued for not having an eyewash station and the files do not contain evidence that employees are exposed to corrosive chemicals. Citations are being proposed under the respiratory protection standards for the required use of respirators and air sampling has not been conducted showing that respirators are required. Citations are being issued under the 1910.157, Portable Fire Extinguishers, and the employer’s policy on the use of fire extinguishers is not being documented to determine applicability of the standard. There is no indication in the files if the employer has established an emergency action plan. This finding will be amended to reflect the current case file review and is continued.

**Finding FY 2024-04 (FY 2023-06, FY 2022-07, FY 2021-07, FY 2020-07, FY 2019-07, 2018-03): Adequate**

**Verification or Evidence of Abatement**

In FY 2023, in three of three (100%) of follow-up inspections reviewed, the follow-up either did not document how the hazards were abated or accepted abatement that was inadequate. In one inspection, the follow-up consisted of asking for a copy of the hospital’s written respiratory program and then concluding the inspection. The citation issued was for development and implementation of a respiratory protection program. The implementation of this program was not evaluated and confirmed through the inspection process.

**Status:** In FY 2024, in six of 13 (46%) of follow-up inspections, the follow-up either did not document how the hazards were abated or accepted abatement that was inadequate. In one instance, future abatement of adding a second egress was proposed but assurance of completion was not in the file prior to accepting the abatement. In another instance, abatement for not developing and implementing a hazard communication program was accepted without documentation of a written program and completed training. The follow-up inspection included a photo of a book of Safety Data Sheets as abatement. In another instance, the photo log in the follow-up stated that work had not been completed. The follow-up inspection was closed as an incompliance and then the initial inspection closed. Abatement for hazard communication violations including a written program, Safety Data Sheets and training was documented with pictures of consumer sized cleaning products. Consumer products are exempted under 1910.1200(b)(6)(viii). This finding will be amended to reflect the current case file review and is continued.

**Finding FY 2024-05 (FY 2023-07, FY 2022-05, FY 2021-09, FY 2020-08, FY 2019-08, FY 2018-04):**

**Overdue Abatement**

The OIS Open Inspection Report run on February 18, 2025, showed that there were 30 inspection files with overdue abatement, ranging from 19-1299 days, past the abatement date specified in the citations or an approved petition for modification of the abatement date.

**Status:** In January of FY 2024, VIDOSH sent out a letter to all Commissioners and Agency Heads with overdue abatement, informing them of the status of their abatement and listing the number and type of citations overdue for each department/agency. The letter emphasized that uncorrected OSHA violations pose serious safety and health risks for employees and can cost employers significantly more in the long run. The letter also urged Commissioners and Agency Heads to budget for safety on a yearly basis, ensuring funds are available for necessary workplace repairs and hazard corrections (VI SOAR, FY 2024).

Since the issuance of this letter, the VIDOSH director forged several alliances with high-level government staff administrators to prioritize the completion of overdue hazard abatement within various departments. VIDOSH continues to actively work on and conduct several abatement measures. VIDOSH has encountered instances where abatement and mitigation measures remain open due to the unforeseen obstacles posed by the complex Federal Emergency Management Agency (FEMA) hazard mitigation process. Despite these challenges, VIDOSH remains steadfast in its commitment to resolving outstanding abatements (VI SOAR, FY 2024).

The issuance of the letter in January of FY 2024 served as a catalyst for securing consultation requests from SLG employers in the islands. VIDOSH is actively conducting follow-up inspections and issuing Failure to Abate violations. VIDOSH is providing OSHA with weekly updates on the status of inspection activity and lists the status of all overdue abatement inspections in the monthly deliverable report. However, as the recent OIS report indicates there is still abatement that is overdue and needs to be documented in OIS. This finding will be amended to reflect the current case file review and is continued.

**Finding FY 2024-06 (FY 2022-10 2021-10 (FY 2020-09, FY 2019-09):** **Petition for Modification of Abatement (PMA)**

One of the files reviewed in the 2021 FAME contained a PMA. This PMA was granted even though it lacked the steps taken to correct the hazard during the correction period and used future tense “will” to describe interim steps. No certification of posting was provided. There was no indication in the diary sheet or in the file that VIDOSH responded to the PMA request from the employer.

This PMA issued was based on previous inspection #1448354 where a citation was issued for this same hazard alleged and documented in inspection #1508132. The correction was noted in OIS for the same hazard that a PMA was being requested under inspection #1508132. Multiple attempts to obtain a copy of inspection #1448354 were made to VIDOSH with no success.

**Status:** During this FY 2024 file review, two files with PMAs were reviewed. VIDOSH has developed a template requesting form and a certificate posting form to distribute to the employer to assist in requesting a PMA. The PMA requesting form that was sent to the employer for inspection #1731076 did not include a section to complete to document the required interim steps. Therefore, the interim steps were not identified to protect employees against this hazard while abatement was occurring. The PMA was approved with a letter that was issued less than 15 working days following the posting of the PMA as required by 1903.14(a). The approval letter in the file was for approval of two citations, but a request for only citation 2-1 was found in the OIS documents tab.

For the second PMA file reviewed, the request was received on January 26, 2024, and approved on February 2, 2024, prior to the required posting period. This finding will be amended to reflect the current case file review and is continued.

**Finding FY 2024-07 (FY 2023-09, FY 2022-10, FY 2021-11, FY 2020-OB-02, FY 2019-OB-04) Worker Involvement – Inspection Process**

In FY 2023, documentation was lacking in three of the six (50%) case files reviewed as to why union representatives were not involved in the inspection process (opening conference, walkaround, and closing conference).

In FY 2023, in five of seven (71%) of the files reviewed, there was no documentation to show that workers were interviewed. SAMM #13 (percent of initial inspections with worker walk around representation or worker interview) was reported at 89.74%. The FRL is 100%.

**Status:** In 10 of the 32 (32%) of the files reviewed from FY 2024, there was no documentation to show that workers were interviewed. SAMM #13 (percent of initial inspections with worker walk around representation or worker interview) was reported at 92.86% for FY 2024. The FRL is 100%**.**

The case files reviewed identified that either a union representative was asked to participate in the inspection process or participated. This finding will be continued to address the documentation that was lacking employee interviews during inspections.

**Finding FY 2024-08 (FY 2023-09, FY 2022-11, FY 2021-12, FY 2020-10, FY 2019-10, FY 2018-OB-03): Worker Notification of Inspection Results**

In FY 2023, six of the seven case files reviewed had unions. Of those six case files, only one case file had citations issued. This file lacked documentation that the union was provided a copy of these citations.

**Status:** In 12 of 19 (63%) of inspections identified with a union and issued citations from the FY 2024 files reviewed, there was no evidence in the case contact sheets or the documents uploaded, that the union representative received a copy of the citations issued. In the files containing evidence that the union representative received a copy of the citations, there was a notation in the case contact sheet identifying the person that the tracked package was being forwarded to. VIDOSH does not forward cover letters with the citations to the union representatives. This finding will be amended to reflect the current case file review and is continued.

**Finding FY 2024-09 (FY 2023-11, FY 2021-13, FY 2020-11, FY 2019-11): Standards and Federal Program Changes (FPCs)**

VIDOSH’s adoption of federal standards and FPCs has been not timely for all required entries into the State Plan Application (SPA) in FY 2023 and FY 2024.

**Status:** For the FPC Log, VIDOSH needs to input all required information into the SPA to specify its intention to adopt the directive on the Process Safety Management of Highly Hazardous Chemicals. Adoption dates need to be entered into the SPA for the National Emphasis Falls Program, National Emphasis Program on Warehousing and Distribution Center Operations, and the Consultation Policies and Procedures Manual. VIDOSH has indicated that they will be adopting these federal program changes identically.

For the Standards Log, the Virgin Islands State Plan needs to input all required information into SPA for the Final Rule to Improve Tracking of Workplace Injuries and Illnesses and the Final Rule on the Department of Labor Civil Penalties for Inflation Adjustment Act for 2023. Additionally, promulgated and effective dates need to be entered for the Final Rule on the Hazard Communication standard. VIDOSH has indicated that they will adopt this standard identically. There has been progress made on updating SPA for the overdue entries and ensuring that the SPA account remains active, but there is still work to be done.

VIDOSH has established a goal for FY 2025 to examine SPA to review and adopt relevant OSHA standards and Compliance Directives (CPLs) into the VIDOSH state plan, aligning with VIDOSH's notice of intent to adopt. Additionally, to implement the designated standards and CPLs to effectively address specific hazards in the SLG sector of the Virgin Islands (VI SOAR, FY 2024). This finding is continued.

**Finding FY 2024-10 (FY 2023-12, FY 2022-14): Whistleblower Complaints**

As of February 21, 2025, VIDOSH has two pending whistleblower complaints that were received in FY 2022 that are still under investigation.

**Status:** In FY 2024, the whistleblower program was placed under the supervision of the new Director of VIDOSH. Since July 2023, this position has been vacant, with the former Assistant Director serving as Interim Director/Whistleblower Investigator following the resignation of the previous director (VI SOAR, FY 2024).

The VIDOSH director and both enforcement staff attended whistleblower courses at OTI in FY 2024. The courses attended included the OTI 1421, Whistleblower Investigation Fundamentals and OTI 1611, Interviewing Techniques for Whistleblower Investigators (VI SOAR, FY 2024).

*V*IDOSH had approximately 16 pending whistleblower cases in either the Occupational Information System (OIS) or the older OITSS system, awaiting screening or investigation as of February 2024. By the end of FY 2024, all these cases were screened. After the initial screening, the cases were either administratively closed, dismissed, or docketed. There are two docketed investigations that remain open as of February 21, 2025, and are being actively investigated (VI SOAR, FY 2024 and New York City Regional Whistleblower Dashboard). These files have been open for either 1,092 or 1,195 calendar days. VIDOSH is attempting to resolve both cases but is struggling to get responses from the employer involved in both whistleblower complaints. VIDOSH has been encouraged by the Regional Supervisory Whistleblower Investigator to inquire through its legal department if they can obtain subpoenas to require the employer to respond to expediate the process.

VIDOSH received a whistleblower complaint on November 7, 2024, and as of February 21, 2025, this case was still pending screening. This is the only whistleblower complaint that was received in FY 2024 or calendar year 2024. As of March 24, 2025, this complaint was screened, docketed and dismissed for untimely finding.

The Virgin Islands State Plan has made significant process to resolve the open whistleblower cases from previous years, but two cases received in FY 2022 remain open. Additionally, the only whistleblower complaint received in the last year is pending an initial screening after 111 days as of February 21, 2025. This finding is continued pending the resolution of the open pending whistleblower docketed cases and assurance that the program has a procedure in place to effectively screen new whistleblower complaints timely.

**Finding FY 2024-11 (FY 2023-13, FY 2022-13, FY 2021-15, FY 2020-13, FY 2019-13):Correction of**

**Serious Hazards**

The OIS Hazard Detail report run on February 26, 2025, showed 33 serious hazards that were past due for correction in consultation visit reports that were issued from October 1, 2023, through September 30, 2024.

**Status:** In FY 2024, VIDOSH tried to obtain correction of serious hazards from employers with overdue hazards by conducting follow-up inquiries, issuing dunning letters, requesting and approving correction extension requests, and conducting follow-up visits on all consultation visits with overdue serious hazards. The two consultation files with overdue abatement reviewed for this report showed that the State Plan had been more aggressive after February 2024 under the leadership of the new director, in trying to obtain correction of overdue serious hazards.

Despite these efforts, VIDOSH was not able to obtain documentation of correction on all overdue serious hazards from previous consultation visits. The Virgin Islands State Plan is reluctant to refer employers to the enforcement program for inspection because they feel that this action will impact its ability to secure future consultation requests. They are also concerned that since one of the mandatory grant activities is related to conducting one consultation visit per month that its release of funds will be reduced due to fewer requests.

In two of the consultation files reviewed, the files contained letters dated May 29, 2024, requesting documentation of correction by a specific date of the serious hazards, and warning of a referral to enforcement if the correction documentation was not received by a specified date. VIDOSH did not follow through with submitting referrals to enforcement even though correction was not obtained. The most serious hazard that was noted in August 2023 was a locked exit gate at an office building with only one other exit to escape in a fire. As of February 27, 2025, this hazard has not been corrected even though VIDOSH has conducted two follow-up visits. The employer has not submitted a request for an extension or any evidence that steps are being taken to correct the hazard.

This finding is continued because there are serious uncorrected hazards from consultation visits that need to be verified and documented as corrected in OIS.

**New FY 2024 Findings**

None

**Closed FY 2023 Observations**

**Observation FY 2023-OB-04: Issuing Consultation Reports**

In the closed consultation file reviewed, the consultation report to the employer was not issued within 20 federal working days of the closing conference date in accordance with CSP 02-00-005, Consultation Policies and Procedures Manual.

**Status:** A OIS Visit Metrics and Lapsed Days Report run on February 27, 2025, showed that all but one of the 12 consultation visits conducted in FY 2024 issued the report to the employer within 20 federal working days of the closing conference date. VIDOSH did not delay the closing conferences to allow the program additional time to issue the reports. This observation is closed.

**Continued FY 2023 Observations**

**Observation FY 2024-OB-01 (FY 2023-OB-01, FY 2022-OB-01, FY 2020-OB-01, FY 2019-OB-01): Inspection Coding**

An OIS Scan Summary Report was run on February 27, 2024, to list the details of inspections with an opening conference date between October 1, 2023, to September 30, 2024. This report identified six inspections conducted in industries covered by the VIDOSH FY 2024-2029 Five Year Strategic Plan. These inspections were not coded in OIS as inspections covered by a State Strategic Initiative.

**Status:** This observation will be continued and monitored quarterly using applicable OIS reports. Although this is the fifth year this has been identified as an observation, it will not be converted to a finding because OSHA believes it will be resolved in FY 2025.

**Observation FY 2024-OB-02 (FY 2023-OB-02): Unprogrammed Activity Auditing Report**

The OIS Unprogrammed Activity Auditing Report, run on February 28, 2025, showed two complaints received in FY 2023 assigned for an inspection that were not related to an inspection. There was no evidence in OIS that an inspection had been conducted to evaluate these complaints. The complaints indicated in OIS that an inspection was pending.

**Status:** This report additionally indicated under the tab, Complaint or Referral Awaiting Other Action, 19 complaints received in FY 2024 requiring further action to process. This observation will be continued and monitored quarterly using applicable OIS reports.

**Observation FY 2024-OB-03 (FY 2023-OB-03, FY 2022-OB-02, FY 2021-OB-01): Timeliness of State Plan Response to Complaints**

During this evaluation period, VIDOSH responded to complaints with an average response time of 8.20 workdays from receipt which was above the FRL of five workdays.

**Status:** The FRL for average number of workdays to initiate complaint inspections in FY 2024 was exceeded. The Virgin Islands State Plan received 25 complaints assigned for inspection in FY 2024. In FY 2023, VIDOSH received 27 complaints and responded within an average of 9.74 workdays to initiate the complaint inspection. VIDOSH performs onsite inspections for all complaints received regardless of the severity of the allegations. Therefore, they processed no complaints through the investigation process and SAMM measure 2a is marked as N/A. VIDOSH did not classify any complaints as imminent danger during this period.

Although this is the fourth year this was observed, the new SAMMs, beginning in FY 2025, will report the average number of workdays to initiate complaint inspections as two separate measures based on the severity assigned to the complaint allegations. The Region has negotiated new FRL’s for these two SAMM measures which are higher than the current FRL for SAMM measure 1a. Therefore, this observation will not be converted to a finding and the Region will continue to monitor the issue quarterly using the FY 2025 SAMM measures and the new negotiated FRLs. This observation is continued.

**New FY 2024 Observation**

**Observation FY 2024-OB-04:****Safety Lapse Time**

VIDOSH’s average lapse time for safety in FY 2024 was 70.50 workdays which was above the FRL.

**Federal Monitoring Plan:** The Region will continue to monitor this issue with the SAMM Report quarterly.Maintaining average lapse time within the FRL for both safety and health is a mandatory grant activity, tracked monthly, and reported by VIDOSH.

**Discussion:** The FRL for SAMM 11a, average safety lapse time is +/- 20% of 56.02 which is based on a three-year national average. The range of acceptable data not requiring further review is from 44.82 to 67.23. VIDOSH’s average safety lapse time is at 70.50 days which is above the FRL and could be a cause for concern. OSHA will monitor this situation as an observation. VIDOSH’s high average lapse time for safety can be contributed to the inexperience of the staff and the time that was devoted to attending training courses.

**Observation FY 2024-OB-05: *Classification of Hazard Notices for Consultation Visits***

During this FAME review, two of two (100%) open consultation files with overdue abatement included serious hazard notices requiring correction for regulatory hazards such as posting the OSHA poster and not maintaining injury/illness logs. These hazards should be correctly classified as other-than-serious (OTS) hazards and relevant information provided during the visit. An OTS hazard does not require tracking of the correction in OIS.

**Federal Monitoring Plan:** The Region will continue to monitor this issue using OIS reports and quarterly discussions. During the next comprehensive FAME review, more consultation files will be reviewed to determine if this is a trend requiring further evaluation.

**Discussion:** Additionally, a serious notice was issued under 1910.151(b) for expired pain relivers and other first aid supplies for employees working in an office. This standard is applicable if a hospital or other medical clinic is not near the facility. It is unknown if there is a medical facility nearby or not and if a first aid kit is required or recommended.

The Consultation Policies and Procedures references the definition of serious hazard that is contained in the OSHA Field Operations Manual (FOM). A serious hazard is defined in the Field Operations Manual as a hazard where there is a substantial probability that death or serious physical harm could result from the condition which exists in the workplace.

**Observation FY 2024-OB-06: *Incorrect Standard Being Issued for Hazard Notices for Consultation Visits***

In two of two (100%) consultation files reviewed, VIDOSH wrote serious hazard notices under 1910.22(a)(1) for vent covers containing dust. The presence of dust on a vent cover in an office does not constitute a serious hazard. The standard 1910.22(a)(1) is for walking-working surfaces and not applicable to vent covers in the ceiling.

**Federal Monitoring Plan:** The Region will continue to monitor this issue using OIS reports and quarterly discussions. During the next comprehensive FAME review, more consultation files will be reviewed to determine if this is a trend requiring further evaluation.

**Discussion:** Additionally, this same standard was also being used as a serious hazard notice for the presence of mold on ceilings. The standard 1910.22(a)(1) is for walking-working surfaces and not applicable to ceilings.

**Observation FY 2024-OB-07: *Evidence of Hazards in Files Not Addressed***

In eight of 32 (25%) of the files reviewed, there was evidence in the files of hazards either pictured or noted that were not addressed through citations or a notation that a citation was not appropriate.

**Federal Monitoring Plan:** The Region will continue to monitor this issue using OIS reports and quarterly discussions. During the next comprehensive FAME review, this issue will be reviewed further to determine if this trend requires further evaluation.

**Discussion:** The following observations were noted in the files reviewed:

Inspection #170381-Photo #6 identified an electrical splice that was not made inside of a junction box. This should have been an additional citation for electrical splices not being made within a junction box or for exposed live parts.

Inspection #1777267-The photo log in OIS showed an electrical outlet that is missing a cover; however, a citation for this hazard was not issued.

Inspection #1718630-Photo 12 showed open exposed electrical parts in an electrical panel in

janitorial closet.

Inspection #1729847-The field notes discussed vermin present in the kitchen, but a citation was not issued.

Inspection #1731646- The photos in the file related to citation 5-1 showed an electrical panel blocked by combustibles and two apparent gasoline cans stored inside. These hazards were not addressed in the file.

Inspection #1744759-Photo sheet noted instances of electrical panels with incomplete labeling/identification. Additionally, pictures showed multiple routes to exit doors that may not have maintained the required minimum 28" width for egress.

Inspection #1777267- The photo log in OIS showed an electrical outlet that was missing a cover; however, a citation for this hazard was not issued.

Inspection 1756809-This follow-up inspection noted that a heat illness prevention program had not been implemented, and some employees were exposed to high temperatures.

**Observation FY 2024-OB-08: *Issuing Incorrect Citations***

In nine of 23 (39%) of the files reviewed, VIDOSH issued serious and failure-to abate citations for the wrong standard.

**Federal Monitoring Plan:** VIDOSH should ensure that the correct citations are issued to the employer by utilizing the resources available on the OSHA website and through technical inquires. VIDOSH should review the pending open cases, determine if these violations have been issued, retrain staff, and take appropriate actions after this review.

**Discussion:** VIDOSH issued multiple citations under 1910.22(a)(1) related to surfaces such as walls and ceilings that are not walking/ working surfaces. This standard applies only to both horizontal and vertical surfaces that employees walk and walk on. Additionally, a citation was issued under 1910.120, Hazardous Waste and Emergency Response, for a solid waste hauler. The scope of this standard covers clean-up operations required by a governmental body, whether Federal, state, local, or other involving hazardous substances that are conducted at uncontrolled hazardous waste sites (including, but not limited to, the EPA's National Priority Site List (NPL), state priority site lists, sites recommended for the EPA NPL, and initial investigations of government identified sites which are conducted before the presence or absence of hazardous substances has been ascertained).

VIDOSH also issued citations under 1910.305(a)(2) for permanent electrical fixtures. This standard only applies to temporary installations.

**Observation FY 2024-OB-09: *Investigating Fatalities***

Two sanitation workers were shot and killed while in work status in FY 2023. VIDOSH did not perform an investigation or inspection of these deaths. There were no reported fatalities in FY 2024.

**Federal Monitoring Plan:** OSHA will monitor progress quarterly on the completion of the FOM.

**Converted from Finding FY 2023-03:** Two sanitation workers were shot and killed while in work status in FY 2023. VIDOSH did not perform an investigation or inspection of these deaths. OSHA could not determine if VIDOSH was informed of these deaths by the employer, but the deaths received significant media coverage. One death occurred after the sanitation worker was street cleaning following the annual adult carnival parade in St. Thomas.

**Discussion:** In FY 2024, VIDOSH did not investigate any fatalities for SLG workers. No reports of fatalities were received. An internet search for articles related to deaths of workers in Virgin Islands did not yield any reports. VIDOSH has confirmed that there have been no reports of fatalities in FY 2024 or FY 2025 to date.

The two fatalities reported in FY 2023 were related to criminal acts and local law enforcement requested that VIDOSH not jeopardize their investigation by initiating an inspection. VIDOSH will include language in Chapter 15, Legal Issues, and Chapter 11, Imminent Danger, Fatality, Catastrophe and Emergency Response, on how VIDOSH will handle requests from law enforcement to not interfere with a criminal investigation in their FOM being drafted. It will reference OSHA Instruction CPL 02-01-058, Enforcement Procedures and Scheduling for Occupational Exposure to Workplace Violence.

On September 10-12, 2024, the VIDOSH director and the safety CSHO took the OTI Course 1230 Accident/Incident Investigation, to learn how to effectively investigate incidents.

**Observation FY 2024-OB-10:** **Development of VIDOSH’s Field Operations Manual (FOM)**

VIDOSH has not established its own FOM. VIDOSH has been using the federal FOM for reference but not all chapters in this manual are applicable to VIDOSH operations.

**Federal Monitoring Plan:** OSHA and VIDOSH have agreed on a proposed timeline of September 30, 2025, to finalize the FOM and begin training of staff on the manual. OSHA and VIDOSH will review progress quarterly during quarterly meetings.

**Discussion:** VIDOSH has been actively working on drafting chapters for its own FOM. OSHA has received drafts of all the proposed chapters in this manual. However, Chapters 4, 8, and 15 includes sections that reference specific laws in place in the Virgin Islands that are being researched by the legal staff currently. OSHA has started the review process and will work with VIDOSH to ensure that the FOM is at least as effective as the federal FOM.

### 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 2024 SAMM Report and includes the FRLs for each measure.

It should be noted that OSHA is transitioning to new SAMM measures in FY 2025. Therefore, OSHA will not be relying on SAMMs 14, 15, or 16 in their evaluation of the State Plans whistleblower programs for FY 2024. PEOSH docketed five new whistleblower cases and administratively closed 19 cases. There was three whistleblower cases open at the end of FY 2024.

VIDOSH was outside the FRL on the following SAMMs:

**SAMM 1a-Average Number of Workdays to Initiate Complaint Inspections**

**Discussion of State Plan Data and FRL:** The FRL for the average number of workdays to initiate complaint inspections is five days. The Virgin Islands State Plan’s average number of workdays to initiate complaint inspections in FY 2024 was 8.20 days. This was above the FRL.

**Explanation:** See Observation FY 2024-OB-03

The FRL for average number of workdays to initiate complaint inspections in FY 2024 was exceeded. The Virgin Islands State Plan received 25 complaints assigned for inspection in FY 2024. In FY 2023, VIDOSH received 27 complaints and responded within an average of 9.74 workdays to initiate the complaint inspection. VIDOSH performs onsite inspections for all complaints received regardless of the severity of the allegations. Therefore, they processed no complaints through the investigation process and SAMM measure 2a is marked as N/A. VIDOSH did not classify any complaints as imminent danger during this period.

In FY 2025, the new SAMM measures will report the average number of workdays to initiate complaint inspections as two separate measures based on the severity assigned to the complaint allegations. The Region has negotiated new FRL’s for these two SAMM measures which are higher than the current FRL for SAMM measure 1a. These measures will be evaluated quarterly throughout FY 2025.

**SAMM 5a and 5b-Average Number of Violations Per Inspection with Violations by Violation Type Serious, Willful, Repeat and Unclassified (SWRU) and Other-than Serious (OTS)**

**Discussion of State Plan Data and FRL:** The FRL for average number of violations per inspection by violation type (SWRU) was +/-20% of 1.74. VIDOSH’s average number of violations per inspection by violation type (SWRU) was 3.40 which was above the FRL. The range of acceptable data not requiring further review was from 1.39 to 2.08 for SWRU.

The FRL for average number of violations per inspection by violation type (OTS) is +/- 20% of .94. VIDOSH’s average number of violations per inspection by violation type (OTS) was .30 which was below the FRL. The range of acceptable data not requiring further review is from 0.75 to 1.12 for OTS.

**Explanation:** The average number of violations per inspection for both SWRU and OTS citations was outside the acceptable range of data not requiring further review. This indicated that VIDOSH issued more SWRU violations than the three-year national average. The data for OTS violations indicated that VIDOSH was issuing less OTS violations than the three-year national average and classifying more citations as serious than OTS.

**SAMM 7a & 7b – Planned vs. Actual Inspections**

**Discussion of State Plan Data and FRL:** The FRL for planned vs. actual safety inspections was

 +/- 5% of the inspection number negotiated in the grant application (25) which equaled a range of 24 to 26. VIDOSH completed 15 safety inspections during FY 2024. The FRL for planned vs. actual health inspections was +/- 5% of the inspection number negotiated in the grant application (20) which equaled a range of 19 to 21. VIDOSH completed 41 health inspections during FY 2024 which was 51% higher than the projected inspection goal for the year. VIDOSH completed a total of 56 inspections and exceeded its mandatory grant activity of 45 total inspections.

**Explanation:** In FY 2023, VIDOSH conducted 14 safety and 25 health inspections to total 39 inspections for the year. VIDOSH completed a total of 56 inspections and met its mandatory grant activity of 45 total inspections in FY 2024. VIDOSH exceeded their total inspection goals and not meeting the inspection goal for safety inspections is not a concern. Additionally, in FY 2025, under the new SAMM measures, the FRL for planned inspections will +/- 20% of the inspection goal.

VIDOSH conducted 25 complaint inspections or about 44% of the completed inspections in FY 2024 were initiated in response to complaints. The remaining inspections were based on follow-ups that were required to document correction of previously cited hazards.

**SAMM 9a & 9b-Percent Incompliance (Safety) and (Health)**

**Discussion of State Plan Data and FRL:** The percent incompliance for safety was reported at 0% which was below the acceptable range of data of 26.27% to 39.40%. The percent incompliance for health was reported at 30.0% which was below the acceptable range of data of 35.34% to 53.01%.

**Explanation:** Both the percent incompliance for safety and health inspections was lower than the acceptable range of data requiring further review. These numbers indicated that VIDOSH was issuing less incompliance inspections than the three-year national average, which is a positive outcome.

**SAMM 11a-Average Lapse Time (Safety)**

**Discussion of State Plan Data and FRL:** VIDOSH’s average lapse time for safety in FY 2024 was 70.50 workdays which was above the FRL.

**Explanation:** VIDOSH’s high average lapse time for safety can be attributed to the inexperience of the staff and the time that was devoted to attending training courses. See Observation FY 2024-OB-04.

**SAMM 13-Percent of Initial Inspections with Worker Walk-around Representation or Worker Interview**

**Discussion of State Plan Data and FRL:** The FRL for percent of initial inspections with worker walk-around representation or worker interview was 100%. VIDOSH’s percentage for worker walk-around representation was 92.86% which was below the FRL (see Finding FY 2024-08).

**Explanation:** VIDOSH did not ensure that employee representatives participated in the walk-around or employees were interviewed in 100% of the inspections conducted in FY 2024.

### Appendix A – New and Continued Findings and Recommendations

FY 2024 Virgin Islands State Plan Follow-up FAME Report

|  |  |  |  |
| --- | --- | --- | --- |
| **FY 2024-#** | **Finding** | **Recommendation** | **FY 2023-# or** **FY 2023-OB-#** |
| FY 2024-01  | **Addressing Complaint Items**In six of 18 (33%) of the inspections with related unprogrammed activities reviewed, the files lacked evidence either as discussed in the narrative or with the issuance of citations that the complaint items were evaluated. Many of the complainants that file complaints with VIDOSH are requesting that the results letters not be forwarded. | VIDOSH must ensure that all complaint items and other alleged hazards found during inspections are adequately documented and evaluated. VIDOSH should consider adding a description of the evaluation of each complaint item in the narrative.  | FY 2023-02 |
| FY 2024-02  | **Lack of Case File Documentation**In 10 of the 32 (31%) of the files reviewed did not contain field notes and/or narrative. Seven of the 32 (22%) files were missing evidence that the OSHA 300 logs for the last three years and current year were reviewed or a statement that logs were not required.  | VIDOSH must ensure the case files include the required documentation in accordance with its FOM. | FY 2023-04FY 2022-04FY 2021-05FY 2020-04 |
| FY 2024-03 | **Adequate Evidence to Support Violations**In 12 of 23 (52%) of files reviewed, the files lacked adequate employer knowledge documentation on the worksheets. In nine of 23 (39%) of the files reviewed, files were missing adequate employee exposure documentation to support the citation. | VIDOSH must ensure that case files include the required documentation in accordance with its FOM. | FY 2023-05FY 2022-05FY 2021-06FY 2020-05FY 2019-05FY18-OB-01 |
| FY 2024-04 | **Adequate Verification or Evidence of Abatement**In five of 13 (38%) of follow-up inspections, the follow-up either did not document how the hazards were abated or accepted abatement that was inadequate. In one instance, future abatement of adding a second egress was proposed but assurance of completion was not in the file prior to accepting the abatement. In another instance, abatement for not developing and implementing a hazard communication standard was accepted without documentation of a written program and training conducted. The follow-up inspection included a picture of a book of Safety Data Sheets as abatement.  | VIDOSH must ensure that case files include the required documentation in accordance with its FOM. | FY 2023-05 FY 2022-07FY 2021-07FY 2020-07FY 2019-07FY 2018-03 |
| FY 2024-05 | **Overdue Abatement**The OIS Open Inspection Report, run on February 18, 2025, showed that there were 30 inspection files with overdue abatement ranging from 19-1299 days past the abatement date specified in the citations or an approved petition for modification of the abatement date. | VIDOSH must utilize strategies such as follow-up inspections, FTA citations, and 29 CFR 1903.19 provisions to ensure that abatement of cited hazards is achieved in a timely manner. | FY 2023-07FY 2022-05FY 2021-09FY 2020-08FY 2019-08FY 2018-04 |
| FY 2024-06 | **Petition for Modification of Abatement (PMA)**During this FY 2024 file review, two files with PMAs were reviewed. The PMA requesting form that was sent to the employer for inspection #1731076 did not include a section to document the required interim steps; therefore, the interim steps were not identified to protect employees against this hazard while abatement was occurring. The PMA was approved with a letter that was issued less than 15 working days following the posting of a PMA as required by 1903.14(a). The approval letter in the file was for approval of two citations, but a request for only citation 2-1 was found in the OIS documents tab. For the second PMA file reviewed, the request was received on January 26, 2024, and approved on February 2, 2024, prior to the required posting period. | VIDOSH must ensure that procedures as stated in the Federal FOM Chapter VII (1903.14(a)) are followed for any PMA requested. | FY 2023-07 FY 2022-10FY 2021-10 FY 2020-09FY 2019-09 |
| FY 2024-07 | **Worker Involvement – Inspection Process**In 10 of the 32 (32%) of the files reviewed from FY 2024, there was no documentation to show that workers were interviewed. SAMM #13 (percent of initial inspections with worker walk around representation or worker interview) was reported at 92.86% for FY 2024. The FRL is 100%. The case files reviewed identified that either a union representative was asked to participate in the inspection process or participated. | VIDOSH must ensure employee representatives and workers are involved in the inspection process. | FY 2023-09FY 2022-10FY 2021-11FY 2020-OB-02FY 2019-OB-04  |
| FY 2024-08 | **Worker Notification of Inspection Results**In 12 of 19 (63%) of inspections identified with a union and citations issued from the FY 2024 files reviewed, there was no evidence in the case contact sheets or the documents uploaded that the union representative received a copy of the citations issued. In the files that contained evidence that the union representative received a copy of the citations there was a notation in the case contact sheet identifying the person that the tracked package was being forwarded to. VIDOSH does not forward copy letters with the citations to the union representatives. This finding will be continued. | VIDOSH must ensure that a copy of the citation is sent to the union representative as required in its FOM. | FY 2023-09FY 2022-11FY 2021-12FY 2020-10FY 2019-10FY 2018-OB-03): Worker Notification of Inspection Results |
| FY 2024-09 | **Standards and Federal Program Changes (FPCs)**For the FPC log, the Virgin Islands State Plan needs to input all required information into the SPA to specify their intention to adopt the directive on the Process Safety Management of Highly Hazardous Chemicals. Adoption dates need to be entered into the SPA for the National Emphasis Falls Program, National Emphasis Program on Warehousing and Distribution Center Operations and the Consultation Policies and Procedures Manual. The Virgin Islands State Plan has indicated that they will be adopting these federal program changes identically. | VIDOSH must respond to all standards and FPCs within the established timeframe. VIDOSH must maintain their account on the OSHA IT Support System so that they can update the SPA timely. | FY 2023-11FY 2021-13FY 2020-11FY 2019-11 |
| FY 2024-10 | **Whistleblower Complaints**As of February 21, 2025, VIDOSH has two pending whistleblower complaints that were received in FY 2022 that are still under investigation. | VIDOSH needs to resolve these two open whistleblower cases. | FY 2023-12FY 2022-14 |
| FY 2024-11 | **Correction of Serious Hazards**The OIS Hazard Detail report run on February 26, 2025, showed 33 serious hazards that were past due for correction in consultation visit reports that were issued from October 1, 2023, through September 30, 2024. | VIDOSH must ensure that the consultant follows procedures and completes case files in accordance with CSP 02-00-005, Consultation Policies and Procedures Manual. | FY 2023-13FY 2022-13FY 2021-15FY 2020-13FY 2019-13 |

### Appendix B – Observations Subject to Continued Monitoring

FY 2024 Virgin Islands State Plan Follow-up FAME Report

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Observation #****FY 2024-OB-#** | **Observation#****FY 2023 OB-# *or* FY 2023-#** | **Observation** | **Federal Monitoring Plan** | **Current Status** |
| FY 2024-OB-01 | FY 2023-OB-01FY 2022-OB-01 FY 2021-OB-01 FY 2020-OB-01 | **Inspection Coding**An OIS Scan Summary Report was run on February 27, 2024 to list the details of inspections with an opening conference date between October 1, 2023, to September 30, 2024. This report identified six inspections conducted in industries covered by the VIDOSH FY 2024-2029 Five-Year Strategic Plan. These inspections were not coded in OIS as inspections covered by a State Strategic Initiative. | During the next FAME year, a limited number of case files will be selected randomly and reviewed to determine if these are isolated instances or if this represents a trend that requires further review. | Continued |
| FY 2024-OB-02 | FY 2023-OB-02FY 2023-OB-03FY 2022-OB-02FY 2021-OB-02 | **UPA Tracking**The OIS Unprogrammed Activity Auditing Report, run on February 28, 2025, showed two complaints received in FY 2023 assigned for an inspection that were not related to an inspection. There was no evidence in OIS that an inspection had been conducted to evaluate these complaints. The complaints indicated in OIS that an inspection was pending. | The Region will continue to monitor this issue by utilizing the SAMM Report quarterly. | Continued |
| FY 2024-OB-03 |  | **Timeliness of Complaint Response**In 2024, VIDOSH did not respond to complaints within an average of five workdays from receipt. | The Region will continue to monitor this issue by utilizing OIS reports. | Continued |
|  | FY 2023-OB-04 | **Issuing Consultation Reports**In the closed consultation file reviewed, the consultation report to the employer was not issued within 20 federal working days of the closing conference in accordance with CSP 02-00-005, Consultation Policies and Procedures Manual. | The Region will continue to monitor this issue by utilizing OIS reports. | Closed |
| FY 2024-OB-04 |  | **Safety Lapse Time**The FRL for average lapse time for safety was +/-20% of the FRL of 56.02 workdays which equals a range of 44.82 to 67.23 workdays for safety. VIDOSH’s average lapse time for safety in FY 2024 was 70.50 workdays which was above the FRL. | The Region will continue to monitor this issue by utilizing the SAMM Report quarterly. | New |
| FY 2024-OB-05 |  | **Classification of Hazard Notices for Consultation Visits**During this FAME review, OSHA reviewed two of the open consultation files with overdue abatement. The review found that VIDOSH is issuing serious hazard notices requiring correction for regulatory hazards such as posting the OSHA poster and not maintaining injury/illness logs. These hazards should be correctly classified as other-than-serious (OTS) hazards and relevant information provided during the visit. An OTS hazard does not require tracking of the correction in OIS. Additionally, a serious notice was issued under 1910.151(b) for expired pain relivers and other first aid supplies for employees working in an office. This standard is applicable if a hospital or other medical clinic is not near the facility. It is unknown, if there is a medical facility nearby or not and if a first aid kit is required or recommended.  | The Region will continue to monitor this issue using OIS reports and quarterly discussions. During the next comprehensive FAME review, more consultation files will be reviewed to determine if this is a trend requiring further evaluation. | New |
| FY 2024-OB-06 |  | **Incorrect Standard Being Issued for Hazard Notices for Consultation Visits**In two of the two consultation files reviewed, VIDOSH wrote serious hazard notices under 1910.22(a)(1) for vent covers containing dust. The presence of dust on a vent cover in an office does not constitute a serious hazard. The standard 1910.22(a)(1) is for walking-working surfaces and not applicable to vent covers in the ceiling. Additionally, this same standard was also being used as a serious hazard notice for the presence of mold on ceilings. The standard 1910.22(a)(1) is for walking-working surfaces and not applicable to ceilings. | The Region will continue to monitor this issue using OIS reports and quarterly discussions. During the next comprehensive FAME review, more consultation files will be reviewed to determine if this is a trend requiring further evaluation. | New |
| FY 2024-OB-07 |   | **Evidence of Hazards in Files Not Addressed** In seven of 32 (22%) of the files reviewed, there was evidence in the files of hazards either pictured or noted that were not addressed through citations or a notation that a citation was not appropriate.  | The Region will continue to monitor this issue using OIS reports and quarterly discussions. During the next comprehensive FAME review, this issue will be reviewed further to determine if this trend, requires further evaluation. | New |
| FY 2024-OB-08 |  | **Issuing Incorrect Citations**In nine of the 23 (39%) of the files reviewed, VIDOSH issued serious and failure-to abate citations for the wrong standard.  | VIDOSH should ensure that the correct citations are issued to the employer by utilizing the resources available on the OSHA website and through technical inquires. VIDOSH should review the pending open cases, determine if these violations have been issued, retrain staff, and take appropriate actions after this review.  | New |
| FY 2024-OB-09 |  | **Investigating Fatalities** Two sanitation workers were shot and killed while in work status in FY 2023. VIDOSH did not perform an investigation or inspection of these deaths. There were no reported fatalities in FY 2024.  | OSHA will monitor progress quarterly on the completion of the FOM. | New |
| FY 2024-OB-10 |  | **Development of VIDOSH’s Field Operations Manual (FOM)**VIDOSH has not established its own FOM. VIDOSH has been using the federal FOM for reference but not all chapters in this manual are applicable to VIDOSH operations. | OSHA and VIDOSH have agreed on a proposed timeline of September 30, 2025, to finalize the FOM and begin training of staff on the manual. OSHA and VIDOSH will review progress quarterly during quarterly meetings. | New |

### Appendix C - Status of FY 2023 Findings and Recommendations

FY 2024 Virgin Islands State Plan Follow-up FAME Report

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FY 2023-#** | **Finding** | **Recommendation** | **State Plan Corrective Action** | **Completion Date** | **Current Status** **and Date** |
| FY 2023-01 | **OSHA Information System (OIS)**VIDOSH conducted 39 inspections during FY 2023. Only seven of these 39 (18%) case files were closed in OIS and available for review when OSHA requested them in November 2023. The Open Inspection Report, run on February 19, 2024, identified 17 case files open more than 180 days (OIS Open Inspection Report). VIDOSH did not utilize OIS reports to ensure proper monitoring and closure of the case files. | VIDOSH must utilize OIS reports as a tool to effectively manage both the program and work product of its staff. This ensures proper monitoring and closure of case files in accordance with the adopted policy in its Field Operations Manual (FOM). | For FY 2024, the VIDOSH staff has been utilizing OIS reports for the effective monitoring and closure of case files in accordance with the FOM. OIS reports are being run on a weekly basis to provide information that will allow VIDOSH to accomplish this goal. By the end of FY 24, all open inspections with pending abatement will be scheduled for follow-up inspections. All open inspections with citations that were not previously issued will be issued.VIDOSH will review all open inspections with a closing conference date and evaluate if there are pending actions that need to be taken before the inspection can be closed in OIS. All inspections that either have no violations issued or the violations have been abated will be closed out in OIS by December 31, 2024.  | September 30, 2024 | Completed |
| FY 2023-02 | **Addressing Complaint Items**In three of the four (75%) of the complaint inspection files reviewed, the evaluation of the complaint items was not adequate. | VIDOSH must ensure that all complaint items and other alleged hazards found during inspections are adequately evaluated. For example, utilizing air sampling to evaluate airborne hazards. VIDOSH should enroll staff in the OTI 2340 or 2341 Biohazards course because numerous complaints related to mold and indoor air quality issues were received. Due to the weather conditions on the island, these issues are prevalent in many buildings.  | VIDOSH will ensure that all complaint items and other alleged hazards found during inspections are adequately evaluated. VIDOSH CSHOs will utilize an Inspection Worksheet Form to ensure that all items are addressed during inspections including all complaint items. The supervisor will review each case to ensure that the evaluation of the complaint items are properly addressed during the inspection and with the proper abatement documentation. When appropriate, VIDOSH will utilize air sampling to evaluate airborne hazards. VIDOSH will enroll staff in the OTI 2340 or 2341 Biohazards course as complaints related to mold and indoor air quality issues are numerous and more prevalent due to weather and historical building limitations.  | Not Completed | Open (As of March 15, 2025) |
| FY 2023-03 | **Investigating Fatalities**VIDOSH did not perform a fatality investigation after two sanitation workers were shot and killed while in work status. | VIDOSH must ensure that all state and local government workplace fatalities are investigated. | VIDOSH will ensure that all state and local government workplace fatalities are investigated. On September 10-12, 2024, the VIDOSH director and safety CSHO took the OTI course 1230 Accident/Incident Investigation. Upon completion of the course, staff will be fully equipped and trained to manage fatality investigations. All fatalities that are reported or referred by the media will be investigated. | September 12, 2024 | Converted to Observation |
| FY 2023-04 | **Lack of Case File Documentation**In six of seven (86%) of the files reviewed, there were no field notes. Three of the four (75%) complaint files were missing evidence that the 300 logs for the last three years and current year were reviewed or a statement that logs were not required. | VIDOSH must ensure the case files include the required documentation in accordance with its FOM. | VIDOSH is committed to improving case file documentation of conducted inspections. CSHOs are receiving in-house training on the components of case file documentation. VIDOSH managerial staff will use a case file review form to check for adequate case file documentation and field notes (based on Virginia State Plan case file review form). In addition, CSHOs are utilizing the OIS training module’s training video for case file documentation. A list of what documents are required to complete a hard copy case file has been provided to assist CSHOs. VIDOSH initiated a mentoring relationship with the Virginia State Plan to further improve case file documentation and issue progress improvements.VIDOSH’s director will attend the OTI course 9450, Advanced Legal Aspects for OSHA Managers course in FY 2025. The two new CSHOs completed the Legal Aspects course at OTI in FY 2023. | Not Completed | Open (As of March 15, 2025) |
| FY 2023-05 | **Adequate Evidence to Support Violations**Two sets of citations issued in the seven closed files were reviewed. Both files lacked adequate employer knowledge documentation on the worksheets. The worksheets identified “exposing” as the evidence to support employer knowledge of the hazards. One of two (50%) had a worksheet in the case file that had no information for worksheet details. | VIDOSH must ensure that case files include the required documentation in accordance with its FOM. | VIDOSH is committed to improving case file documentation of conducted inspections. CSHOs are receiving in-house training on the components of case file documentation. VIDOSH managerial staff will use a case file review form to check for adequate case file documentation (based on the Virginia State Plan form). The CFR form will be used for personnel evaluations and will not be uploaded to OIS. In FY 2025, VIDOSH inspectors are scheduled to attend several OTI courses to enhance their inspection techniques and improve case files documentation.In FY 2025, VIDOSH CSHOs are scheduled for training in the following OTI courses:•1310 - Investigative Interviewing Techniques•2721 – Whistleblower Complaint Resolution•2220 – Respiratory Protection•2451 – Evaluation of Safety and Health Programs•1230 – Accident / Incident Investigation •9450 – Advance Legal Aspects for OSHA Managers•1080 – Health Hazards Awareness for Safety Officers•2340 – Biohazards•1631 – Written Communication for Whistleblower InvestigatorsVIDOSH’s director will attend the OTI course 9450, Advanced Legal Aspects for OSHA Managers course in FY 24. The two new CSHOs completed the Legal Aspects course at OTI in FY 2023. | Not Completed | Open (As of March 15, 2025) |
| FY 2023-06 | **Adequate Verification or Evidence of Abatement**In three of three (100%) follow-up inspections reviewed, the follow-up either did not document how the hazards were abated or accepted abatement that was inadequate. In one inspection, the follow-up consisted of asking for a copy of the hospital’s written respirator program and then concluding the inspection. The citation issued was for development and implementation of a respiratory protection. The implementation of this program was not evaluated and confirmed through the inspection process. | VIDOSH must utilize strategies such as follow- up inspections, failure to abate (FTA) citations, and 29 CFR 1903.19 provisions to ensure that abatement of cited hazards is achieved in a timely manner and improve case file documentation of abatement. |  | Not Completed | Open (As of March 15, 2023) |
| FY 2023-07 | **Overdue Abatement**The OIS Open Inspection Report run on February 19, 2024 showed that there were 22 inspection files with overdue abatement ranging from 28-917 days. | VIDOSH must utilize strategies such as follow-up inspections, FTA citations, and 29 CFR1903.19 provisions to ensure that abatement of cited hazards is achieved in a timely manner. | VIDOSH is conducting follow-up inspections, issuing Failure-to-Abate citations where appropriate, and 29 CFR 1903.19 provisions as needed to ensure that abatement of cited hazards is achieved in a timely manner.During the 3rd and 4th quarters of FY 2024, VIDOSH conducted follow-up inspections of cases with pending abatement and will continue doing so into FY 2025 until all such cases have received a follow-up inspection. | Not Completed  | Open (As of March 15, 2025) |
| FY 2023-08 | **Petition for Modification of Abatement**One of the files reviewed in the 2021 FAME contained a PMA. This PMA was granted even though it lacked the steps taken to correct the hazard during the correction period and used future tense “will” to describe interim steps. No certification of posting was provided. There was no indication in the diary sheet or in the file that VIDOSH responded to the PMA request from the employer.This PMA issued was based on previous inspection #1448354 where a citation was issued for this same hazard alleged and documented in inspection #1508132. Correction was noted in OIS for the same hazard that a PMA was being requested under inspection #1508132. Multiple attempts to obtain a copy of inspection #1448354 were made to VIDOSH with no success.This finding will remain open because there were no PMAs that were available to review during this evaluation period. | VIDOSH must ensure that procedures as stated in the Federal FOM Chapter VII (1903.14(a)) are followed for any PMA requested | VIDOSH will ensure that procedures as stated in FOM Chapter VII (1903.14(a)) are followed for any Petition for Modification of Abatement (PMA) requested. VIDOSH reviewed PMA procedures with the Virginia State Plan mentor and has issued a PMA during FY 2024 that complies with FOM requirements. | Not Completed | Open (As of March 15, 2025) |
| FY 2023-09 | **Worker Involvement – Inspection Process**Documentation was lacking in three of the six (50%) case files reviewed as to why unionrepresentatives were not involved in the inspection process (opening conference, walkaround, and closing conference).In five of seven (71%) of the files reviewed, there was no documentation to show that workers were interviewed. SAMM #13 (percent of initial inspections with worker walk around representation or worker interview) was reported at 89.74%. The FRL is 100%. | VIDOSH must ensure employee representatives and workers are involved in the inspection process. | VIDOSH will ensure that workers are involved in all required aspects of the inspection and that case filed documentation reflects the participation or non-participation of employer/employee representatives during the inspection. When arriving on site, a union representative is requested. When none is available, VIDOSH will contact the union office to alert them of the inspection being conducted. When employee representatives choose not to participate it will be noted in the file. Worker interviews will be conducted for all inspections and workers will be consulted during the walkaround portion of the inspection.As a result of VIDOSH’s mentoring relationship with the Virginia State Plan, Virginia will be providing CSHO training on interviewing techniques for employees and supervisors to be completed by the end of the 4th quarter of FY 2024. VOSH worker interview forms have been revised and adopted by VIDOSH. Worker interview forms will be color coded, like VOSH forms, to indicate whether the interview statement is from a supervisor or a worker and will be used to conduct worker interviews for all inspections. A copy of the Worker Interview Forms will be sent to the New York Region along with the CAP. | Not Completed | Open (As of March 15, 2023) |
| FY 2023-10 | **Worker Notification of Inspection Results**In FY 2023, six of the seven case files reviewed showed union representation. Of those six case files, only one case file had citations issued. This file lacked documentation that the union was provided a copy of these citations. | VIDOSH must ensure that a copy of the citation is sent to the union representative as required in its FOM. | VIDOSH will ensure that a copy of the citation is sent to the union representative as required in the VIDOSH FOM. When citations packages are certified mailed to the employer, a copy of the citations is also certified mailed to the union(s). A copy of the letter is uploaded in the OIS case file, as well as the hard copy case file. | Not Completed | Open (As of March 15, 2025) |
| FY 2023-11 | **Standards and Federal Program Changes (FPCs)**VIDOSH’s adoption of federal standards and FPCs is not timely. There are 16 changes identified that required a response. VIDOSH has not made an entry into the State Plan Application (SPA) module to indicate their intention on adoption of two federal standards and three federal program changes. | VIDOSH must respond to all standards and FPCs within the established timeframe. VIDOSH must maintain their account on the OSHA IT Support System so that they can update the SPA timely. | VIDOSH will respond to all standards and FPCs in SPA within the established timeframe. VIDOSH will maintain their SPA account on the OSHA IT Support System so that they can update SPA timely. The VIDOSH director received training from the Virginia State Plan Regulatory Coordinator on SPA procedures on July 12, 2024. VIDOSH will address the overdue entries in the SPA to ensure that all entries are current. | Not Completed | Open (As of March 15, 2025) |
| FY 2023-12 | **Whistleblower Complaints**During FY 2022, VIDOSH received five whistleblower complaints for processing. These cases still have not been processed and investigated per the Federal Whistleblower Investigations Manual which VIDOSH agreed to adopt. OIS was not updated to reflect the status of these cases, and all documents were not uploaded into the system. Electronic files were not maintained per directive CPL 02-03-009, “Electronic Case File (ECF) System Procedures for the Whistleblower Protection Program” which was adopted by VIDOSH. In FY 2023, VIDOSH received three new whistleblower complaints. As of February 14, 2024, these complaints had not been entered into OIS. There is no evidence that these complaints have been screened. VIDOSH has no qualified staff to perform screening of whistleblower cases. VIDOSH is not operating a whistleblower protection program that is at least as effective (ALAE) as OSHA.   | VIDOSH staff must review and become familiar with the federal Whistleblower Investigations Manual. VIDOSH staff assigned to investigating whistleblower cases must take the required series of whistleblower courses offered at the OSHA Training Institute, review available archived OSHA webinars, attend any WB training offered throughout the year, and create electronic work folders per the directive. Until VIDOSH has trained staff to investigate whistleblower complaints effectively, VIDOSH must consider other options available to handle complaints, including referring them to the Virgin Islands Public Employee Relations Board. | VIDOSH will review the open Whistleblower complaints and contact each of the complainants to determine the status of the investigation. VIDOSH is consulting with the regional staff and the Virginia State Plan mentor for guidance in handling these complaints. VIDOSH staff will attend Whistleblower classes at OTI and virtually on Blackboard. The assigned investigators will receive guidance and training from the Virginia State Plan mentor on investigative procedures. VIDOSH closed out two WB cases on September 6 by dismissing the cases because they were not submitted timely. There are two open WB cases under investigation.  | Not Completed | Open (As of March 15, 2025) |
| FY 2023-13 | **Correction of Serious Hazards**The MARC Report, run on February 22, 2024 for Measure #4A (percent of serious hazards corrected timely [<=14 days of latest correction due date]), was recorded at 57.14%. The reference standard is 100%. The report for Measure #5 identified 10 cases with overdue correction more than 90 days overdue. | VIDOSH must ensure that the consultant follows procedures and completes case files in accordance with CSP 02-00-005, Consultation Policies and Procedures Manual. | VIDOSH will ensure that the consultant follows procedures and completes case files in accordance with CSP 02-00-005, Consultation Policies and Procedures Manual. VIDOSH’s plan to obtain correction of hazards from employers with overdue hazards is to conduct follow-up inquiries, follow-up inspections on all consultation visits with overdue hazards, dunning letters and where necessary, referral to VIDOSH enforcement for an inspection. | Not Completed | Open (As of March 15, 2025) |

### Appendix D – FY 2024 State Activity Mandated Measures (SAMM) Report

FY 2024 Virgin Islands State Plan Follow-up FAME Report

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SAMM Number** | **SAMM Name** | **State Plan Data** | **Further Review Level** | **Notes** |
| 1a | Average number of workdays to initiate complaint inspections (state formula) | 8.20 | 5  | The further review level is negotiated by OSHA and the State Plan. |
| 1b | Average number of workdays to initiate complaint inspections (federal formula) | 5.40 | N/A | This measure is for informational purposes only and is not a mandated measure. |
| 2a | Average number of workdays to initiate complaint investigations (state formula) | N/A | 1 | The further review level is negotiated by OSHA and the State Plan. |
| 2b | Average number of workdays to initiate complaint investigations (federal formula) | N/A | 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) | N/A | 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. |
| 5a | Average number of violations per inspection with violations by violation type (SWRU) | 3.40 | +/- 20% of1.74 | The further review level is based on a three-year national average. The range of acceptable data not requiring further review is from 1.39 to 2.08 for SWRU.  |
| 5b | Average number of violations per inspection with violations by violation type (other) | 0.30 | +/- 20% of 0.94 | The further review level is based on a three-year national average. The range of acceptable data not requiring further review is from 0.75 to 1.12 for OTS. |
| 6 | Percent of total inspections in state and local government workplaces | 100% | 100% | Since this a State and Local Government State Plan, all inspections are in state and local government workplaces. |
| 7a | Planned v. actual inspections (safety) | 15 | +/- 5% of  25 | 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 not requiring further review is from 24 to 26 for safety. |
| 7b | Planned v. actual inspections (health) | 41 | +/- 5% of  20 | 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 not requiring further review is from 19 to 21 for health. |
| 8 | Average current serious penalty in private sector - total (1 to greater than 250 workers) | N/A | +/- 25% of $3,793.81 | N/A – This is a State and Local Government State Plan.The further review level is based on a three-year national average. |
|  | **a**. Average current serious penalty in private sector (1-25 workers) | N/A | +/- 25% of $2,498.51 | N/A – This is a State and Local Government State Plan.The further review level is based on a three-year national average. |
|  | **b**. Average current serious penalty in private sector (26-100 workers**)** | N/A | +/- 25% of $4,322.61 | N/A – This is a State and Local Government State Plan. The further review level is based on a three-year national average. |
|  | **c**. Average current serious penalty in private sector(101-250 workers) | N/A | +/- 25% of $6,114.84  | N/A – This is a State and Local Government State Plan. The further review level is based on a three-year national average. |
|  | **d**. Average current serious penalty in private sector(greater than 250 workers) | N/A | +/- 25% of $7,533.58 | N/A – This is a State and Local Government State Plan. The further review level is based on a three-year national average. |
| 9a | Percent in compliance (safety) | 0% | +/- 20% of 32.83% | The further review level is based on a three-year national average. The range of acceptable data not requiring further review is from 26.27% to 39.40% for safety. |
| 9b | Percent in compliance (health) | 30.00% | +/- 20% of 44.18% | The further review level is based on a three-year national average. The range of acceptable data not requiring further review is from 35.34% to 53.01% for health. |
| 10 | Percent of work-related fatalities responded to in one workday | N/A | 100% | The further review level is fixed for all State Plans.  |
| 11a | Average lapse time (safety) | 70.50 | +/- 20% of  56.02 | The further review level is based on a three-year national average. The range of acceptable data not requiring further review is from 44.82 to 67.23 for safety. |
| 11b | Average lapse time (health) | 58.07 | +/- 20% of  67.21 | The further review level is based on a three-year national average. The range of acceptable data not requiring further review is from 53.77 to 80.65 for health. |
| 12 | Percent penalty retained | N/A | +/- 15% of 70.81% | N/A – This is a State and Local Government State Plan. The further review level is based on a three-year national average. |
| 13 | Percent of initial inspections with worker walk-around representation or worker interview | 92.86% | 100% | The further review level is fixed for all State Plans. |
| 14 | Percent of 11(c) investigations completed within 90 days | N/A | N/A | This measure is not being reported for FY 2024 due to the transition to the new SAMM measures starting in FY 2025. |
| 15 | Percent of 11(c) complaints that are meritorious | N/A | N/A | This measure is not being reported for FY 2024 due to the transition to the new SAMM measures starting in FY 2025. |
| 16 | Average number of calendar days to complete an 11(c) investigation | N/ | N/A | This measure is not being reported for FY 2024 due to the transition to the new SAMM measures starting in FY 2025. |
| 17 | Percent of enforcement presence | N/A | N/A | NA – This is a State and Local Government State Plan and is not held to this SAMM. |

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 12, 2024, as part of OSHA’s official end-of-year data run.