

**State of Alaska
Department of Labor
Division of Labor Standards and Safety**

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AKOSH Program Directive 95-1

Date: November 29, 1994

To: All AKOSH Staff

From: Donald Study, CSP, Director

Subject: AKOSH IMIS Office Plan

A. **PURPOSE:** This directive revises the responsibilities and duties of the various personnel related to the IMIS, and describes in detail the flow of IMIS documents in the office and discuss reports that will be used in office management.

B. **SCOPE:** This directive applies to all AKOSH ENFORCEMENT and ADMINISTRATIVE PERSONNEL, including all positions identified in Appendix C.

C. **ACTION:** Replaces DOSH PD Program Directive 90-1

D. **RESPONSIBILITIES:** The responsibilities and duties of the staff related to IMIS, CASE FILE Organization and DP Management Committee are as follows::

The Enforcement Safety and Health Officers, (CSHO's) will be required to submit all IMIS forms and subsequent modifications in accordance with Appendix A of this directive.

The Clerical Staff will: data enter forms prepared by AKOSH staff including required modifications; process citations, complaints, referrals, contests, and related correspondence; and pull case files (inspections, complaints, accidents and referrals) for review and action as required.

The Microcomputer/Network Tech II will be responsible for: Installing software updates, resolving system difficulties (both software and hardware related), maintaining IMIS reference manuals, (master sets), including the Enforcement Data Processing Manual, Operator Skills Manual, and Micro and Micro-to-Host Report Documentation Manual, distributing manual changes to the staff, sending EOD (end of day) and SOD (start of day) transmissions, making system backup and maintaining tapes (daily, weekly, and monthly).

The Microcomputer/Network Tech II will be responsible for managing user accounts, updating CSHO tables, adding and/or deleting home directories, monitoring disk space, reconciling the local database with the host. and running periodic reports as required

by Appendix B. The Microcomputer/Network Tech II (PCN 07-2055) will run reports that will verify and track case milestones, and will use the IMIS reports to initiate subsequent case actions. messages. (Note: The Microcomputer/Network Tech II classification may be changed by Department of Administration after implementation of new class series.)

The Microcomputer/Network Tech II will spot check IMIS operations by periodically running reports as required for quality assurance of the local micro database and performing random review of inspection case files.

The Microcomputer/Network Tech II will develop and run special reports or searches as directed by Program Mangers, analyze special and standard reports and take appropriate action as directed.

Where changes are too complex for the Microcomputer/Network Tech II to comprehend or implement, the Director will request from the OSHA Regional Administrator assistance from the computer specialists in OSHA's Region X or National Office. Minor changes will be covered informally at staff meetings or by staff memorandums.

The Microcomputer/Network Tech II will monitor IMIS operations in the office by reviewing reports in accordance with Appendix B, determine with the Program Mangers, IMIS training needs for all staff, and provide feedback to the clerical staff and Chief on form errors or missing forms, and periodically review the office IMIS plans to ensure they meet the basic needs of the office.

E: DATA ENTRY BACKLOG PROCEDURES: Although there is no problem with backlog at this time, backlog of data entry has been a significant problem in the past. If data entry backlog becomes a problem the following steps will be taken:

(1) When backlog reaches 15 days, The clerical staff supervisor will notify the Chief of Enforcement. The Chief, The Microcomputer/Network Tech II and The Clerical Staff Supervisor will meet to discuss cause and ways to correct.

(2) When backlog reaches 30 days, the Chief will notify the Director and formally request overtime, extra staff or whatever measures deemed necessary to alleviate the backlog.

F. DOCUMENT FLOW: The detailed procedures for document flow are discussed in Appendix A for each type of form. In general, it is critical that all forms be prepared in accordance with the Forms Manual and submitted in a timely manner. To document form initiation, review, modification, and data entry, a notation of some of the data entry steps will be made on the IMIS Action Form, by the appropriate supervisor, dated, and initialed. For those items that cannot be designated on the IMIS action form, the modification forms 166, 167-C and 167-I will be completed by the appropriate supervisor. The clerical staff will follow the instructions on the IMIS Action Form, or modification forms and data enter, date and initial.

The proper completion of documents and the accuracy of the data base will be monitored by periodically generated micro reports which are discussed in Appendix B,

start of day error messages, and monthly comparison of the various reports such as abatement tracking, complaint tracking, etc..against the office open case files.

Other inspection related forms and a copy of the IMIS forms, AKDOSH-1, AKDOSH-7, AKDOSH-90, AKDOSH-36, on all inspections which are ongoing will be kept in the possession of the CSHO. Original AKDOSH-1, AKDOSH-7, AKDOSH-36s, or AKDOSH-90, forms for which an inspection has been assigned will be turned in for data entry as soon as the information is received and kept in the pending case files drawer, a copy of the form is maintained by the csho assigned.

When the inspection has been completed, the case file is given to the Microcomputer/Network Tech II for an initial review for correct completion of the standard on the OSHA 1b forms. When review is completed, it is initialed and dated, and then given to the appropriate Assistant Chief, for review for proper classification, technical content, penalty calculations, and instance descriptions. after the Assistant Chief completes his review he initials and dates and forwards the case file to the administrative section for typing of related letters, i.e., complainant letters, data entry, and creating color coded case files and labels.

Inspection case files are color coded by folder and label, and the IMIS Action Form is placed on the outside of the case file, all of this allows AKOSH staff to readily identify the case files as to type and classification, actions completed and actions to take.

The inspection is then reviewed by the Clerical Staff Supervisor for normal proofing of typing errors, checks file color coding, penalty amounts and that number of citations match with case file information, etc., and then gives the case file to the Chief for signature of citations and any letters that may be a part of the inspection process. The Chief does a final proofing for technical information and penalty calculations prior to signing.

Prior to closing any inspection file, a case audit is required to be completed. The case file and case audit will be thoroughly reviewed by the Clerical Staff Supervisor to ensure all documentation is included, abatement is completed, and/or penalties paid, are the same as penalties assessed. The reviewer will review the case audit to ensure the file has all required IMIS forms, and those forms have been properly completed and data entered and that the case audit reflects those changes.

G. TRAINING: New clerical and field staff will be given formal training on the IMIS as soon as possible. The need for additional training will be assessed by the appropriate supervisor. Generally whenever major changes are issued to the IMIS system, formal training will be held prior to the effective date of the change.

IMIS Enforcement data processing manual with all software release notes will be kept in administrative section as reference materials.

Refresher training will be held if needed at staff meetings. The Program Managers will discuss with the Microcomputer/Network Tech II problems, such as forms completion errors, that need to be addressed prior to these training sessions.

H. CASE FILE ORGANIZATION

The Inspection case files are organized as follows:

(1) All case files are filed alphabetically by establishment. The inspection case files are maintained for the present and previous year in the Anchorage Office.

(2) Those Files processed for Contest or sent to Attorney Generals for collection will be filed alphabetically by establishment. These case files will be located in a file cabinet separated from the regular inspection case files. The out card will be placed in the regular file drawer to identify that file and it's new location.

(3) Accident Investigation Files will be filed alphabetically and maintained in a separate file drawer, an out card is also placed to identify the new location of the actual case file. The Accident investigation case files are kept in the Anchorage Office for the present year and 4 previous years. A local database has also been created to maintain victim accident information and location of files sent to archives in Juneau, i.e, box number the file is maintained in at Juneau Archives Center.

Color Coding: Color coding of inspection case files is as follows:

Folders are color coded as follows:

- 1) Serious/Repeat/Wilful - red folder
- 2) Complaint - yellow folder
- 3) Accident - blue folder
- 4) Other Violation - manila folder
- 5) Discrimination - orange folder
- 6) No inspection - brown folder

Labels are color coded as follows:

- 1) Programmed/programmed related/referrals/unprogrammed related - pink label
- 2) Complaint - yellow label
- 3) Accident - blue label
- 4) Follow-up/monitoring - white label
- 5) Discrimination - orange label

The non-formal complaints, referrals handled by letter, along with the original of all formal complaints will be maintained in the complaint/referral case file drawer. These complaint file folders are manila folders, and while label w/ yellow strip. Referrals are manila folders with a green stripe through middle and while label w/green stripe.

The complaint label will be rotated each year from white w/yellow stripe to white w/green stripe. This rotation aids in preventing complaints being filed in the wrong year. There has not been enough referrals in the past to justify this type of rotation.

APPENDIX A **DOCUMENT FLOW**

To ensure that the IMIS data base is accurate and up to date, this appendix reviews the movement of each form through the office. Obviously this plan will not account for every possible contingency that might result from certain personnel being absent on a given day, and therefore will only provide general guidelines.

INSPECTION REPORT (AKOSH-1): This form will be completed by the Compliance Safety and Health Officer as soon as possible after opening or attempting to open an inspection. The CSHO will keep a copy of the AKOSH-1, and if changes are necessary after receiving more information the CSHO must use a MOD AKOSH-1 to note those changes when turning the completed report in for review. The blocks that must be completed at this time are listed in FIGURE I-1 of the IMIS Forms Manual. If OSHA 200 information has not been obtained, check the "data not available" block #32 and modify the form later in accordance with the section on modification forms, and instructions above.

Once reviewed and approved by the appropriate person the AKOSH-1 form will be given to the administrative section for processing. The data entered AKOSH-1 will be dated and initialed by the data entry clerk and placed in the appropriate suspense files.

OTHER INSPECTION RELATED FORMS - OSHA 1B, 1B(IH), 2, 2B, 2F, 91A, 92, 93, 98, and 170: The Compliance Safety and Health Officer shall submit all required forms. When the inspection is completed the case file will then be given to the appropriate person for review for technical content and to ensure that all required forms have been properly completed. When the review is completed the file will be submitted to the administrative section for processing.

The Chief of Enforcement will review and sign all citations/correspondence documents prepared by the clerical staff. Case files with no citations issued will be immediately closed. Inspection Case files will then be filed as described in Section H - Case File Organization.

Unprogrammed Activity Forms such as AKOSH-7, (Complaints), AKOSH-36S (Fat/Cats) and AKOSH-90 (Referrals): The Compliance Officers will complete these forms as follow:

AKOSH 7 - Complete items 1 Thru 18, 27, 28, 29, 30

AKOSH 36 -Complete items 1 Thru 31

AKOSH 90 -Complete items 1 Thru 19

NOTE: All Items MUST be completed.

The appropriate Assistant Chief will evaluate the information on the forms, and complete the remaining sections indicating appropriate action. Once the supervisor evaluates and

determines what action shall be taken, the **completed original** AKOSH-7, AKOSH-36, and AKOSH-90 forms will be given to the data entry staff for processing. The assigned CSHO will be given a copy in order to complete the inspection.

The administrative staff will make up case file folders, data enter the forms, and prepare citation and related correspondence to complete administrative processing. Once the Chief of Enforcement has reviewed and signed the necessary documents the administrative staff will process for mailing following established administrative procedures.

Modifications that are required to update the data base for inspections, will generally be entered on the IMIS action form by a supervisor. It is not required to complete the paper form for some actions. The supervisor shall be aware of the possible options available on these modification forms, 167I, 166 and 167C and when using the IMIS Action Form or any of the modification forms. The supervisor must assure that there is documentation in the file to justify action taken. The supervisor must provide clear direction to the clerical staff on the data entry required.

When the IMIS Action Form or 167I, 166, 167C modification forms are used to direct the clerical staff, the data entry clerk will initial and date the form upon data entering the action.

OSHA-31

Weekly Program Activity Report are submitted for time spent Monday through Friday. Anchorage based CSHO's shall data enter the information directly to the NCR system, and submit printout to their supervisor for approval by the following Monday. The satellite offices CSHO staff shall submit their completed OSHA-31 to their supervisor by mail the following Monday. The supervisor will review, initial and forward the forms to the clerical staff for data entry. Error corrections for Anchorage based CSHO's are returned to the CSHO for correction.

APPENDIX B **REPORTS PLAN**

To assist in managing the office, the program manager, micro-network computer specialist I, administrative and enforcement supervisors will review the reports listed in this appendix for accuracy and take any required action. The reports will be run as stated unless otherwise directed.

UNSATISFIED ACTIVITY REPORT - This report will identify complaints, referrals, and accident events for which an inspection has been planned but no assignment or inspection activity is stored on the micro. This is a standard federal report and is printed weekly. This report is used by the Microcomputer/Network Tech II to check the data and forward to the Chief of Enforcement to determine if the CSHO has initiated the programmed inspection in a timely manner, and/or what action to take.

OPEN INSPECTION REPORT "TRACKER" - This report lists all inspections which are currently open and shows the dates for significant actions, such as abatement past due, and/or which collection procedures should be implemented. This report is printed monthly. This report is reviewed and necessary actions taken by the administrative staff supervisor.

CASES WITH CITATIONS PENDING "CIT PENDING" - This reports lists all inspections which have AKOSH - 1's data entered, the case is still open and have no related 1-b violation data. This program is run on a weekly basis, and given to the appropriate Assistant Chief every Monday morning to determine if inspection reports are being completed in a timely manner.

VIOLATION ABATEMENT REPORT - This report identifies open case files with at least one abatement date which has not been met by the run date of the report. This report is run with "active contest" marked no to get a list of case files not currently in contest that have missed an abatement date. This report is set to run automatically every Friday Evening and processed every Monday morning. The report will be given to the appropriate supervisor for review and further action.

The **CASE LAPSE TIME** report, provides a breakdown of lapse time from the opening conference date to the issuance of citations. The State runs this report on a weekly basis for each Assistant Chief and is provided each Monday morning for further action as needed.

The **CSHO INSPECTION SUMMARY REPORT**, is a report used by the State, it is a version similar to the Federal Inspection Summary Report, modified for the State's use. The State's version of the report provides a summary on all CSHOs with one report. The Federal Report only provides totals for one Csho at a time. This report is used on a monthly basis to provide statistics for the month and Year to Date in order for the Chief of Enforcement to complete the Directors' monthly report.

The **CSHO AK10 INSPECTION SUMMARY REPORTS** is a report also used that is a version of the Federal Summary report, this report also provides a summary on all

CSHO's with one report and provides statistics on AK10 inspections, for the month and year-to-date (YTD) in order for the Chief of Enforcement to complete the monthly report required by the director.

The SAFETY ENFORCEMENT ACTIVITY REPORT is a new report that provides monthly data for safety enforcement activity along with the YTD statistics to the Director and Administrative Officer. This report uses several of the above reports along with a few specialized inspection summary reports to compile a statistical report that has been created in Excel for the purpose of using the state's LAN system to e-mail the report to the Director on the by the 25th of each month.

The HEALTH ENFORCEMENT ACTIVITY REPORT is a new report that provides monthly data for health enforcement activity along with YTD statistics to the Director and Administrative Officer III. This report uses several of the above reports along with a few specialized inspection summary reports to compile a statistical report that has been created in Excel for the purpose of using the state's LAN system to e-mail the report to the Director on the by the 25th of each month.

The COMPLAINT AUDIT REPORT, developed by the state to track all complaints, and alert the program manager and assistant chiefs to potential problems.

The COMPLAINT REPORT, a standard report that is used to track non-formal complaint response due dates. This report is used by assistant chiefs to track non-formal complaints that have not been responded to in a timely manner and decide further actions.

THE CSHO LAPSE TIME REPORT, a new report developed to track lapse time per CSHO and alert the Chief of Enforcement to a possible problem with an individual CSHO. This report tracks administrative, assistant chief and CSHO lapse time, allowing the Chief of Enforcement to determine where a problem or trend may be and giving him the opportunity to correct. This report will be run on the 20th of the each month.

APPENDIX C AKOSH DATA PROCESSING PLAN

Policy: AKOSH Data Processing (DP) goals and objectives will not conflict with grant requirements.

Procedure: OSHA will be consulted by AKOSH management on changes in direction; grant obligations will be observed fully.

Policy: AKOSH DP Goals and objectives will support AKOSH's mission, which is to reduce workplace injuries and fatalities and to increase employer awareness and compliance with safety standards.

Procedure: All DP activities will be pre-determined through review and consensus of an AKOSH DP management group (DPMG). DP Staff will not introduce any changes to DP procedures or activities without the specific review and consensus of the management group. DPMG will develop DP Plan.

Policy: Written DP plan will address needs in priority order with input from all affected units, including management, enforcement, consultation and training, standards, and administrative support group.

Procedure:

(1) All requests for changes, additions or deletions from the DP plan will be submitted in writing by EMail to director's secretary at least two working days before the regular DPMG meeting.

(2) The director's secretary shall compile a package of change requests for electronic distribution to management group no later than 24 hours prior to monthly meeting, along with agenda for meeting.

(3) Each specific request shall clearly identify staff that will be affected, alternatives considered, and costs and benefits, including learning curve costs.

(4) Requests for discussion items to be added to the agenda may be made at the same time as requests for specific DP changes (up until two days prior to the meeting).

(5) Director's secretary shall send out electronic reminders one week prior to the meeting, and shall schedule the monthly meetings to ensure telephonic representation by all units.

(6) Director's secretary shall prepare minutes of meetings for distribution by EMail within three working days of meeting.

(7) Microcomputer/Network Tech II shall have standing agenda items, to be presented in concise written format for discussion at each meeting:

(a) DP Projects in Progress, including milestones (visual representation) concerns and conflicts, etc.

(b) Unanticipated DP Problems: hardware, software, staffing: with recommended solutions or actions taken to solve problems, along with time expended.

(c) Perceived Needs from DP Perspective: Define problem or objective, recommend solution, analyze costs/benefits, and recommend timing, given other priorities.

(d) New Directives from OSHA: Define problem or objective, recommend solution, analyze costs/benefits, and recommend timing, given other priorities.

Policy: Impacts of DP changes to field staff will be minimized in order to allow them to maintain/increase productivity. Problems that impede their productivity will be given highest priority by DPMG.

Procedure:

(1) All changes that will impact enforcement and consultation/training staff will be reviewed before being added to the plan.

(2) At least three members of DPMG, including the director, the AOIII, and the Chief of the unit will act as "beta test sites" for all changes that impact the field before changes are approved for release to staff.

(3) All technical and user documentation will be completed and ready for evaluation before releasing products to beta test sites.

(4) The Microcomputer/Network Tech II will not initiate contact with staff that hasn't been reviewed and approved by DPMG whether for installation of new application, or for training, except in cases of greatest urgency.

(5) Field staff will communicate through their supervisors to request assistance from Microcomputer/Network Tech II.

(6) All requests for help and resolutions will be summarized by Microcomputer/Network Tech II in brief EMail to supervisor of requestor and to Microcomputer/Network Tech II's supervisor, as well as to file for summary at next DPMG meeting. If problem is not resolved, summary of problem will be sent by EMail to AOIII and Director (as well as the above) who will decide whether it can wait for next regular meeting to be reviewed. If not, either the AOIII or the director will call an emergency meeting of the DPMG.

Policy: Costs and benefits to all units will be considered when developing and prioritizing DP plan.

Procedure:

(1) Each member of DPMG will have one vote, which shall be recorded in the official minutes of the meeting by the director's secretary.

(2) The members of the DPMG are:

Director of LSS
Administrative Officer III, LSS
Chief, Enforcement
Chief, Consultation & Training
Microcomputer/Network Tech II
Administrative Support Supervisor

(3) If a representative cannot attend, s/he will delegate (in writing) an alternate representative.

(4) The director may override the vote after it is taken and recorded.

(5) Each member of the DPMG shall solicit regular input from any subordinates regarding perceived DP needs, and shall submit these items as agenda items for discussion or as fully developed requests at the following meeting.

Policy: Microcomputer/Network Tech II will follow DP plan for short and long-range objectives, and for planning daily activities.

Procedure:

(1) Microcomputer/Network Tech II will take direct requests from staff only in emergency.

(2) In case of emergency, requestor will communicate with his/her supervisor who will communicate by EMail (if LAN is up) to Microcomputer/Network Tech II, with cc: to Microcomputer/Network Tech II's supervisor, AOIII, and file for summary at next regular meeting. Amount of time spent shall be recorded on summary of resolution by Microcomputer/Network Tech II.

Policy: Security on the network shall be maintained by all users at all times.

Procedure:

(1) Any super-user, including Microcomputer/Network Tech II, shall not change a user's password for testing or other purposes, unless user has forgotten password and has made specific request for password to be changed.

(2) If testing under a specific user ID is required, the user will be asked to log on when s/he is available to do so. This is in compliance with department-wide SOP.

(3) NO Exceptions.