



**FEB 19 2016**

MEMORANDUM FOR PATRICIA W. SILVEY  
Deputy Assistant Secretary for Operations,  
Mine Safety and Health [REDACTED]

THROUGH: KEVIN G. STRICKLIN [REDACTED]  
Administrator for  
Coal Mine Safety and Health [REDACTED]

THOMAS W. CHARBONEAU [REDACTED]  
Acting Director, Office of Assessments, Accountability,  
Special Enforcement and Investigations

FROM: ALFRED L. CLAYBORNE [REDACTED]  
Deputy Director, Office of Accountability,  
Special Enforcement and Investigations

SUBJECT: MSHA Office of Accountability Review, Coal District 11,  
Bessemer, Alabama Field Office, and [REDACTED],  
[REDACTED]

Introduction

This memorandum summarizes the Office of Accountability's review of the subject district office, field office, and mine. The review included evaluation of MSHA field activities; level of enforcement; conditions and practices at the mine; Field Activity Reviews (FARs); Accompanied Activities (AAs); second level reviews; and MSHA supervisory and managerial oversight. The accountability review also included evaluations to determine if there were any deficiencies in areas commonly identified during Agency internal reviews of MSHA's actions following past mine disasters.

Positive findings, as well as three issues requiring attention, are included in this accountability review report.



## Review Results

The accountability review revealed positive findings in several areas, including the following:

- The District and Field Office staff was courteous, professional and accommodating during the review.
- The inspector conducted himself in a professional manner while performing his inspection duties at the mine and had a good rapport with miners and management officials.

This accountability review revealed three issues that required corrective actions.

1. Checklist item #1 – The E01 inspection was not complete and thorough. Inspection procedures required by the General Inspection Procedures Handbook were not followed. (See Attachments A and D for details)
2. Checklist item #2 – The E01 inspection report was not documented in accordance with the General Inspection Procedures Handbook. (See Attachments A and D for details)
3. Checklist item #18 – Field Office Supervisors did not conduct the required number of Accompanied Activities and Field Activity reviews for FY 2014. (See Attachments A and D for details)

The District, along with the review team, analyzed the findings identified during this review to determine the root causes of the noted deficiencies. Items 1 and 2 - deficiencies were a result of a combination of not recognizing items required to be documented and insufficient management oversight of inspection documentation. Item 3 deficiency was due to a lack of staff available to perform the required duties. The ADM (enforcement) position was created in June 2014 for District 11. Formerly the District had only one ADM supervising both the technical and enforcement programs. The District did not monitor the AA/FAR tracking system implemented in a Corrective Action Plan dated October 7, 2014, that was submitted as a result of findings identified in the Office of Accountability's review of the McAlester Field Office in 2014. The supervisors for the Bessemer, AL Field Office have conducted the required number of AAs and FARs for the first half of FY2015.

Corrective actions from the District Manager, to address the deficiencies are included in the corrective action plan attached to this report. (See Attachment E)

Attachments

- A. Office of Accountability Checklist
- B. Citations/Orders issued during this review
  - 1. [REDACTED] 75.370(a)(1)
- C. Examples of Citations Issued During Previous E01 Inspections  
(No issues were identified during this review)
- D. Issues identified with corresponding requirements
- E. District Corrective Action Plan

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Mine Safety and Health Administration  
Office of Accountability

District  Field Office  Mine ID  Date

Attachment A - Office of Accountability Checklist

1. Determine if complete and thorough E01 inspections are being conducted and/or if policy and procedures were properly followed.

Adequate  Corrective Action Needed  Comments Below

**See Attachment D**

2. Determine if documentation for inspections is complete and thorough.

Adequate  Corrective Action Needed  Comments Below

**See Attachment D**

Determine if citations and orders issued during previous inspections were

3. properly evaluated for gravity, negligence, level of enforcement, number of persons affected, and supported by documentation.

Adequate  Corrective Action Needed  Comments Below

4. Evaluate inspector/specialist examination of required record books and postings for compliance with applicable standards.

Adequate  Corrective Action Needed  Comments Below

5. Evaluate inspector/specialist examination of the operator's maps (on-site) for accuracy, escapeway locations, etc.

Adequate  Corrective Action Needed  Comments Below

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[REDACTED]

6. Evaluate, upon arrival on the working section, inspector/specialist examination of all working faces for imminent dangers.

Adequate

Corrective Action Needed

Comments Below

7. Evaluate the inspector/specialist observation of the work cycle and conditions on the working section during the review.

Adequate

Corrective Action Needed

Comments Below

The section was not producing at the time of the team's visit due to mechanical failures of the equipment.

8. Evaluate the inspector/specialist air quantity, quality, and gas checks during the review.

Adequate

Corrective Action Needed

Comments Below

9. Evaluate inspector/specialist examination of equipment electrical cables during the review.

Adequate

Corrective Action Needed

Comments Below

10. Evaluate inspector/specialist examination for permissibility during the review.

Adequate

Corrective Action Needed

Comments Below

No permissibility inspection conducted during the mine visit.

11. Determine if previous E01 inspections include examinations of the condition and maintenance of conveyor belts, belt entries, belt drives, fire detection and suppression systems, and separation of belt entries from other air courses.

Adequate

Corrective Action Needed

Comments Below

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12. Evaluate, during the review, the inspection of at least one set of seals, including methods for obtaining samples from sealed area.

Adequate  Corrective Action Needed  Comments Below

13. Determine if adequate close-out conferences are being conducted at the end of each inspection.

Adequate  Corrective Action Needed  Comments Below

14. Determine if Possible Knowing/Willful (PKW) Forms are documented and processed according to agency policy and procedures.

Adequate  Corrective Action Needed  Comments Below

15. Evaluate 103(i) spot inspection (E02) reports for the office/district being reviewed for compliance with agency policies and procedures, including compliance with time frames and separating E02 inspections from other events.

Adequate  Corrective Action Needed  Comments Below

16. Determine if Hazard Complaint inspections/investigations are being conducted according to policy and procedures.

Adequate  Corrective Action Needed  Comments Below

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Determine if supervisors are monitoring inspector time and activity to

17. ensure proper use of time, including off-shift and weekend work, by all inspectors.

Adequate  Corrective Action Needed  Comments Below

Determine if required Accompanied Activities (AAs); Field Activity Reviews

18. (FARs) and supervisory follow-ups are being conducted and documented according to agency policy and procedures?

Adequate  Corrective Action Needed  Comments Below

**See Attachment D**

19. Determine if a 104(d) tracking system is in place and being kept current at the office being reviewed.

Adequate  Corrective Action Needed  Comments Below

20. Determine if the Uniform Mine File books are being maintained and reviewed according to current agency policy and procedures.

Adequate  Corrective Action Needed  Comments Below

21. Determine if supervisors are thoroughly reviewing Uniform Mine Files at least annually?

Adequate  Corrective Action Needed  Comments Below

22. Determine if supervisors are visiting each active underground mine at least annually.

Adequate  Corrective Action Needed  Comments Below

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23. Determine if all sections where retreat mining is occurring (not to include longwall mining) are being inspected at least monthly?

Adequate  Corrective Action Needed  Comments Below

No retreat mining conducted.

24. Determine if documentation of staff meetings/safety meetings are effective and relevant to current issues and the Agency's mission.

Adequate  Corrective Action Needed  Comments Below

25. Determine, after an in-mine visit, if approved plans (ventilation, roof control, training, ERP, etc.) are compatible with mining conditions and equipment.

Adequate  Corrective Action Needed  Comments Below

26. Determine if approved plans are being revised or updated to reflect changes in conditions and/or equipment.

Adequate  Corrective Action Needed  Comments Below

27. Determine if plan reviews are in compliance with current agency policy and procedures (performed within required timeframes, tracked from the date of submission, properly documented, and contain input from all affected departments and field offices).

Adequate  Corrective Action Needed  Comments Below

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[REDACTED]

28. Determine if Assistant District Manager is conducting the required second level reviews and holding supervisors accountable for oversight of Field Activity Reviews and Accompanied Activities.

[REDACTED]

[REDACTED]

[REDACTED]

29. Determine if district management personnel are reviewing work products and reports for accuracy and completeness.

Adequate

Corrective Action Needed

Comments Below

30. Determine if District Managers, Assistant District Managers, and supervisors are conducting required mine visits and properly completing the required spreadsheet.

Adequate

Corrective Action Needed

Comments Below

31. Determine if District Manager is using discretion in granting conferences and monitoring the ACR program to ensure that all decisions (including upholding, modifying or vacating citations) are properly documented and justified by the CLR's.

Adequate

Corrective Action Needed

Comments Below

Not reviewed as a part of this review.

32. Determine if District Manager is holding the Supervisory Special Investigator accountable for properly evaluating and initiating or denying potential cases.

[REDACTED]

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33. Determine if managers and supervisors are using required standardized reports to review critical data relevant to inspections and investigations.

Adequate

Corrective Action Needed

Comments Below

34. Determine if Districts are conducting reviews in compliance with agency policy and procedures including follow-up to determine the effectiveness of corrective actions.

Adequate

Corrective Action Needed

Comments Below

35. Determine if information (mine status, methane liberation, number of employees, etc.) is being entered into the MSHA Standardized Information System (MSIS) accurately and in a timely manner?

Adequate

Corrective Action Needed

Comments Below

36. Determine if District Managers are using the Report Center to identify overdue responses from operators and take appropriate actions.

[REDACTED]

37. Determine if a complete permissibility inspection of each longwall system is being conducted by electrical specialists or inspectors who hold a current MSHA electrical qualification card on at least an annual basis.

Adequate

Corrective Action Needed

Comments Below

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38. Determine if a proper examination of the AMS system and/or AMS systems that operate CO sensors for the purposes of 75.1101 is being conducted. A complete inspection includes those items in the revised GIPH (AMS checklist).

Adequate  Corrective Action Needed  Comments Below

39. Determine if SSIs are maintaining a memorandum detailing the reasons for not conducting a special investigation when the district manager decides to take no further action, in accordance with the Special Investigations Procedures Handbook.

[REDACTED]

40. Determine if proper procedures for conducting, documenting, and reviewing MSHA respirable dust surveys are being followed. Proper documentation to include blue cards, 2000-86's, etc.

Adequate  Corrective Action Needed  Comments Below

41. Determine if District Managers and Assistant District Managers are providing acting field office supervisors with the level of oversight necessary to manage their work groups on a temporary basis including an online distance learning training course with a knowledge check for temporarily promoted supervisors. The guidance will be included in each District's SOP for training newly promoted field office supervisors.

[REDACTED]



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Attachment C – Examples of Citations Issued During Previous Inspections

No issues during this review.

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Attachment D – Issues identified with corresponding requirements

**Checklist Item #1 - Determine if complete and thorough E01 inspections are being conducted and/or if policy and procedures were properly followed.**

- A thorough inspection of the water system for fire protection at or near the section was not conducted.

Requirement: GIPH page 3-46 states in part: “Each conveyor belt flight, skip shaft, or bunker and all associated equipment of each system shall be inspected for compliance with applicable standards, with attention to safe access, guards, fire detection systems, combustible materials, fire protection (**determining whether or not the 50 psi/50 gpm of water is available in water lines at or near the working section** and other locations as deemed necessary by the inspector), condition of electrical cables and wiring, power source capacity, and general operating condition.”

- A thorough inspection of the AMS was not conducted. Three of nineteen CO sensors underground were examined.

Requirement: GIPH page 3-45 states in part 5: “Ensure that the manufacturer calibration procedures are used. Check calibration of at least 10 percent, but **no less than five CO sensors.**”

**Checklist Item #2 – Determine if documentation for inspections is complete and thorough.**

- MSHA Form 2000-22 (Event Sheet) was not thorough and complete for the E01 reviewed. Section 13.f number of samples collected other – there were two diesel surveys conducted but not recorded in this section. Section 17 “Remarks” – no information provided for in this section.

Requirement: GIPH page 2-17 states in part: “Item 13.f. Other. **Include any other type of health sample collected** individually.”

- Field notes do not include enough information to complete the MSHA Form 2000-156. The Tracking/Rockdust map did not always include the location and/or sample collection date.

Requirement: GIPH page 5-19 states in part: “When rock dust samples are collected, sufficient information to complete MSHA Form 2000-156 must be included in the inspection notes.” “A map of each mine will be maintained at the field office showing ventilation air courses, float coal dust sources, **sample**

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**locations, sample collection dates, dust violations and other pertinent information.**

- The Tracking map did not include LOCC air readings and the working section was not identified by MMU or name. Field notes did not always include the location of the LOCC.

Requirement: GIPH page 3-2 states in part: “A tracking map should be used to **record the location of MMU(s) or name of section(s)**, approved evaluation/measuring points, and each air course inspected.” GIPH page 3-67 states in part: “the inspector should only **once clearly mark each working section air readings** that contribute to the E01 inspection by date and initials **on the mine tracking map.**” GIPH page 3-60 states in part: “The location of the last open crosscut of a MMU should be determined and documented in the inspection notes.”

- No documentation of the approximate number of training records inspected in the field notes.

Requirement: GIPH page 3-19 states in part: “The inspector should document the specific type of training record reviewed (annual refresher, hazard, etc.) and the **approximate number of training records reviewed.**”

- Field notes did not always include model number, manufacturer and serial number of SCSRs inspected.

Requirement: GIPH page 3-17 states in part: “Each SCSR required to be inspected should be documented in the inspection notes by including the SCSR **manufacturer, model, serial number** and physical location.”

- Field notes did not include the AMS manufacturer and model number.

Requirement: GIPH page 3-46 states in part: “Compliance with this procedure should be recorded in the inspection notes, including the AMS **manufacturer and model.**”

- Field notes did not identify pumps in the return. The field notes had recorded “all pumps in return – NVO.”

Requirement: GIPH page 3-52 states in part: “Each piece of equipment in use and available for use outby permanent or portable electrical equipment, **including the equipment description and company number, serial number,**

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**approval number, or other positive identification**, inspected under this procedure should be listed in the inspection notes.”

- The E01 Inspection Report did not contain the SCSR Inventory Printout; Diesel Inventory Printout and the MSHA Form 2000-209 (Mine Information Form).

Requirement: GIPH pages 6-9 & 10 state in part: “Forms and Information Needed in an E01 Inspection Report... 2000-209 Mine Information Form (one copy must be submitted to health clerk or supervisor immediately upon completion and one copy maintained in report)... Diesel Equipment Inventory Records (print out). SCSRs Inventory Records (print out). Note: 2000-220 form is discontinued.”

- MSHA Forms 2000-86 did not include the method of determining 30 shift production averages.

Requirement: Health Procedures Handbook Chapter 1 page 1-34 states in part: “The inspector will also include in the comment section of MSHA Form 2000-86, the method used to determine the average production over the last 30 production shifts (i.e. operator records of production and shift length). This will include the date range for data utilized, the total production during the 30 shifts, the average for the 30 shifts, the normal shift length, and the percent of the 30-shift average obtained during this sampling shift.”

**Checklist Item #18 – Determine if required Accompanied Activities (AAs); Field Activity Reviews (FARs) and supervisory follow-ups are being conducted and documented according to agency policy and procedures.**

- Not all required AAs and FARs were conducted for the Bessemer, Field Office for FY 2014. A total of 54 AAs and 27 FARs were required to be conducted during 2014 for the Bessemer, AL Field Office. The supervisors completed 36 of the required AAs and 18 of the required FARs. The District provided additional information to show the supervisors completed accompanied mine visits with the CMIs for 17 of the 18 missed AAs; while there is no associated paperwork as required by the Supervisors Handbook for AAs, the District believes the purpose and intent of the AAs were fulfilled.

Requirement: Coal Mine Safety and Health Supervisors Handbook page 1-13 states in part: “Supervisors shall document an AA with each of their inspectors and specialists at least twice during the first half and at least twice during the second half of each fiscal year.” “The supervisor must document at least one FAR conducted on a completed inspection assignment for each of his/her inspectors and specialists during the first half and during the second half of each fiscal year.”

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Attachment E – Corrective Action Plan

U.S. Department of Labor

Mine Safety and Health Administration  
1030 London Drive, Suite 400  
Birmingham, AL 35211-4542



JUL 16 2015

MEMORANDUM FOR TED SMITH  
Supervisor, Office of Accountability

[REDACTED]  
FROM: RICHARD A. GATES  
District Manager  
District 11 Coal

SUBJECT: Proposed Corrective Actions

This is a response to the review conducted by the Office of Accountability from [REDACTED], of the Bessemer, Alabama Field Office and the [REDACTED]. The results of your review identified three deficiencies to be addressed by this district.

**DEFICIENCY**

**Checklist Item #1 - Determine if complete and thorough E01 inspections are being conducted and/or if policy and procedures were properly followed.**

- A. A thorough inspection of the water system for fire protection at or near the section was not conducted.
- B. A thorough inspection of the AMS was not conducted.

• ROOT CAUSE:

District 11 does not have a system in place to ensure all requirements of the General Inspections Procedures Handbook (GIPH) are met for all inspections.

• PROPOSED CORRECTIVE ACTIONS:

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Re-training will be given to all affected Coal Mine Inspectors and Field Office Supervisors (FOS) on the requirements listed in the GIPH for the items specifically identified as deficiencies during the OA Review conducted from [REDACTED]. The re-training will be conducted during a field office staff meeting. An attendance roster will be signed by all participants and a record of the training will be kept with the corrective action plan for this review.

In addition, a system will be implemented in which a part of the GIPH is presented at each Staff Meeting held in District 11. The section of the GIPH retrained will be listed on the Memorandum to the District Manager (DM) through the Enforcement Assistant District Manager (ADM) and an attendance roster signed by all participants will be included with the memorandum.

- OFFICE OR POSITION RESPONSIBLE FOR IMPLEMENTING THE CORRECTIVE ACTION(S):

The ADMs will be responsible for implementing all corrective actions.

- TIMEFRAME FOR COMPLETION OF EACH CORRECTIVE ACTION:

Re-training has already begun. An initial re-training period was conducted at the July staff meeting. A supplemental training period will be given for any personnel who missed the first event at the August staff meeting. Inclusion of the GIPH retraining will also begin in August.

- METHOD FOR DETERMINING SUCCESS:

The effect of the corrective action plan will be evaluated during the FOS review of all E01 inspection reports for the 4th quarter FY15. The District Staff Assistant and ADMs will review a complete E01 inspection report for the 4th quarter FY15 for an underground mine.

**Checklist Item #2 – Determine if documentation for inspections is complete and thorough.**

- A. MSHA Form 2000-22 (Event Sheet) was not thorough and complete for the E01 reviewed. Section 13 f "number of samples collected other – there were two diesel surveys conducted and but not recorded in this section. Section 17 "Remarks" – no information provided for in this section.
- B. Field notes do not include enough information to complete the MSHA Form 2000-156. The Tracking/Rockdust map did not always include the location and/or sample collection date.

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- C. The Tracking map did not include LOCC air readings and the working section was not identified by MMU or name. Field notes did not always include the location of the LOCC.
- D. No documentation of the approximate number of training records inspected in the field notes.
- E. Field notes did not always include model number, manufacturer and serial number of SCSRs inspected.
- F. Field notes did not include the AMS manufacturer and model number.
- G. Field notes did not identify pumps in the return. The field notes had recorded "all pumps in return – NVO".
- H. The E01 Inspection Report did not contain the SCSR Inventory Printout; Diesel Inventory Printout and the MSHA Form 2000-209 (Mine Information Form).
- I. MSHA Forms 2000-86 did not include the method of determining 30 shift production averages.

- ROOT CAUSE:

District 11 does not have a system in place to ensure all requirements of the GIPH are met for all inspections.

- PROPOSED CORRECTIVE ACTIONS:

Re-training will be given to all affected Coal Mine Inspectors and FOS on the requirements listed in the GIPH for the items specifically identified as deficiencies during the OA Review conducted from [REDACTED]. The re-training will be conducted during a field office staff meeting. An attendance roster will be signed by all participants and a record of the training will be kept with the corrective action plan for this review.

In addition, a system will be implemented in which a part of the GIPH is presented at each Staff Meeting held in District 11. The section of the GIPH retrained will be listed on the Memorandum to the DM through the Enforcement ADM and an attendance roster signed by all participants will be included with the memorandum.

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- OFFICE OR POSITION RESPONSIBLE FOR IMPLEMENTING THE CORRECTIVE ACTION(S):

The ADMs will be responsible for implementing all corrective actions.

- TIMEFRAME FOR COMPLETION OF EACH CORRECTIVE ACTION:

Re-training has already begun. An initial re-training period was conducted at the July staff meeting. A supplemental training period will be given for any personnel who missed the first event at the August staff meeting. Inclusion of the GIPH retraining will also begin in August.

- METHOD FOR DETERMINING SUCCESS:

The effect of the corrective action plan will be evaluated during the FOS review of all E01 inspection reports for the 4th quarter FY15. The District Staff Assistant and ADMs will review a complete E01 inspection report for the 4th quarter FY15 for an underground mine.

**Checklist Item #18 – Determine if required Accompanied Activities (AAs); Field Activity Reviews (FARs) and supervisory follow-ups are being conducted and documented according to agency policy and procedures.**

- A. Not all required AAs and FARs were conducted for the Bessemer, Field Office for FY 2014.

- ROOT CAUSE:

D11 failed to monitor the AA/FAR tracking system implemented in a prior corrective action plan.

- PROPOSED CORRECTIVE ACTIONS:

Detailed retraining will be conducted for all affected supervisors for the deficiency identified during the OA Review conducted from [REDACTED], [REDACTED]. Specifically, the training will consist of the requirements set forth in the Coal Mine Safety and Health Supervisors Handbook in regard to conducting and documenting AAs and FARs. The re-training will be conducted during a supervisor staff meeting. An attendance roster will be signed by all participants and a record of the training will be kept with the corrective action plan for this review.

In addition, in the 4<sup>th</sup> quarter of FY14 a second ADM was added to the District. The tracking system implemented in a prior corrective action plan is now being monitored by two ADMs. The additional reviewer and the added emphasis by the

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DM has resulted in completion of all required AAs and FARs for the 1st half of FY15.

- OFFICE OR POSITION RESPONSIBLE FOR IMPLEMENTING THE CORRECTIVE ACTION(S):

The ADMs will be responsible for implementing the corrective actions.

- TIMEFRAME FOR COMPLETION OF EACH CORRECTIVE ACTION:

A supervisory staff meeting will be conducted in the 4th quarter of FY15.

- METHOD FOR DETERMINING SUCCESS:

The implementation of the corrective action plan will be deemed a success if all AAs and FARs are completed as of the second half of FY 2015.

A DESCRIPTION OF THE DOCUMENTATION THAT WILL DEMONSTRATE CLOSURE OF THE CORRECTIVE ACTION:

The District Manager will send a memorandum to Alfred L. Clayborne, Deputy Director, Office of Assessments, Accountability, Special Enforcement and Investigations through Ted Smith, Supervisor, Office of Accountability upon completion and evaluation of the corrective actions by January 31, 2016.