



AUG 22 2017

MEMORANDUM FOR PATRICIA W. SILVEY

**Deputy Assistant Secretary for
Mine Safety and Health Administration**

THROUGH:

EMILY K. HARGROVE
Acting Deputy Administrator for
Metal and Nonmetal Mine Safety and Health

FROM:

THOMAS W. CHARBONEAU
Director, Office of Assessments

SUBJECT:

**Mine Safety and Health Administration (MSHA)
Office of Accountability Review, Metal and Nonmetal North
Central District, Indianapolis, Indiana Field Office,**

Introduction

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

Purpose

The purpose of this accountability review is to determine whether MSHA enforcement policies, procedures and guidance are followed consistently; and to assess whether mission critical enforcement activities are accomplished effectively. The accountability review also identifies areas for improvement and the subsequent implementation of effective corrective actions to address any identified issues.

Overview

Office of Accountability (OA) Supervisor, Ted Smith and Specialist Troy Davis (Review Team) conducted a review of Metal and Nonmetal's (MNM) North Central District and the Indianapolis, Indiana Field Office in accordance with the annual accountability review plan schedule. The onsite portion of the review was conducted from [REDACTED] [REDACTED]. The review focused on inspection activities conducted in FY 2016, first quarter of FY 2017, and included supervisory oversight activities, FARs and ORs for FY 2016. The review concentrated on two Regular Safety and Health Inspections (E01), Event Nos. [REDACTED] and [REDACTED] conducted by the Indianapolis, IN Field Office of the [REDACTED] ID No. [REDACTED].

The [REDACTED] was selected for review because it is a large underground operation.

Mine Visit ([REDACTED] ID No. [REDACTED])

The OA Specialist, Troy Davis, accompanied the Field Office Supervisor, Staff Assistant and an Inspector to the mine on [REDACTED] as part of a Regular Safety and Health Inspection (E01). During the visit, Mr. Davis evaluated general conditions at the mine; assessed whether conditions at the mine are commensurate with enforcement levels documented in the inspection reports reviewed; and observed work practices at the mine site.

The mine is an underground [REDACTED] mine located in [REDACTED]. The mine employs approximately [REDACTED] miners working two, ten-hour production shifts and one, ten-hour maintenance shift per day, five days per week. The mine produces an average of [REDACTED] annually. [REDACTED] is mined by drilling and blasting and is loaded into haul trucks and transported to the primary crusher underground. The crushed material is then transported via conveyor belt to the surface to sizing screens and further processed for commerce.

The mine visit included inspections and observations of the following:

Underground

- Shop Area;
- Diesel fuel storage and containment;
- Oil Storage area and containment;
- Primary and secondary escapeway routes and signage;
- Escapeway map located in MCC room;
- MCC room located in the Southwest heading SW28-QQ;
- Main mine fan underground in Southwest heading;
- Working places and work practices in the Southwest and Northeast headings;
- Two front end loaders;
- Double boom drill;
- Double boom roof bolting machine;

- Multiple auxiliary fans;
- Mining cycle – drilling, powder crew loading shot, loading, haulage, roof bolting and crusher operations underground; and
- Air quality measurements.

Surface

- Pre-Inspection conference;
- Mine office;
- Main fan;
- Escapeway located at shaft exiting the surface;
- Screening towers and conveyor belts;
- Haulroads; and
- Loading operations at the stockpiles.

As a result of the inspection, the Inspector issued five enforcement actions.

Review Results

Positive Findings:

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

1. Inspection reports, notes and documentation were organized, clear and concise, and included pictures of violations.
2. Inspection reports, notes and documentation for ATF inspection of the explosive magazines were detailed and described a thorough inspection.
3. The [REDACTED] developed a mapping system of all mines assigned to the Field Office that can be accessed via smart phone or computer enabling inspectors in the field to more efficiently locate mines in their travel area. This system also should improve MSHA's response time to accidents at the mine.
4. The North Central District staff and Field Offices actively promoted the formation of mine rescue teams and a mine rescue association in the District. Recently, the District worked with [REDACTED] on the formation of a new mine rescue team. All of the [REDACTED] mines in the District operate under special mining conditions that allows the operator to provide an alternative mine rescue capability as required under 30 CFR 49.4, with local EMS and fire departments providing emergency coverage and coal mine rescue teams providing backup coverage. The new mine rescue team will provide enhanced rescue capabilities in the event of a mine emergency.
5. The review did not identify any issues that require a Corrective Action Plan.

The Review Team identified and discussed with the District personnel inspection and procedural best practices as described in the Metal and Nonmetal General Inspection Procedures Handbook. A general outline of discussion topics is included in an attachment to this memorandum. (See Attachment C)

As a part of the review, the OA compared enforcement levels of the mine with the Field Office, District, and national averages. The mine had a significant and substantial (S&S) rate of 24 percent during FY 2016 compared to the Field Office S&S rate of 30 percent; a district S&S rate of 21 percent; and the national S&S rate of 24 percent. While the S&S rate for the mine was higher than the average S&S rates of the Field Office, District and nation, the enforcement levels were appropriate with existing mining conditions and work practices based on the review and observations made during the mine visit.

Attachments

A. Office of Accountability Checklist

B. Citations issued during this review

- [REDACTED] 57.11001
- [REDACTED] 57.11051a
- [REDACTED] 57.8518a
- [REDACTED] 57.14107a
- [REDACTED] 57.3200

C. Discussion Topics

United States Department of Labor
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 policies and procedures were properly followed.
Adequate Corrective Action Needed Comments Below

2. Determine if documentation for inspections is complete and thorough.
Adequate Corrective Action Needed Comments Below

3. Determine if citations and orders issued during previous inspections were 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(s) examination of required records and postings for compliance with applicable standards.
Adequate Corrective Action Needed Comments Below

5. Evaluate the inspector(s) physical examination of the active working areas of the mine and inspection of all mining cycles.
Adequate Corrective Action Needed Comments Below

6. Evaluate the inspector(s) on-site contaminant assessment and documentation.
Adequate Corrective Action Needed Comments Below

United States Department of Labor
Mine Safety and Health Administration
Office of Accountability

District North Central Field Office Indianapolis, IN Mine ID Date

7. Evaluate inspector(s) examination of electrical equipment, transformer stations, and/or electrical circuits.

Adequate Corrective Action Needed Comments Below

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

Adequate Corrective Action Needed Comments Below

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

Adequate Corrective Action Needed Comments Below

See Attachment C

10. 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

Not reviewed as a part of this review. The Field Office does not have any mines in a 103(i) status.

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

Adequate Corrective Action Needed Comments Below

12. Determine if supervisors are monitoring inspector time and activity to ensure proper use of time, including off-shift and weekend work, by all inspectors.

Adequate Corrective Action Needed Comments Below

United States Department of Labor
Mine Safety and Health Administration
Office of Accountability

District **North Central** Field Office **Indianapolis, IN** Mine ID **[REDACTED]** Date **[REDACTED]**

13. Are required Field Accompanied Reviews (FARs), Office Reviews (ORs) and supervisory follow-up reviews being conducted and documented according to agency policy and procedures?

14. 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

15. Determine if the Mine Files are legible, up to date, and reviewed by supervisors.

Adequate Corrective Action Needed Comments Below

Currently all inspection reports are scanned and saved electronic. The original reports are in the Field Office with the exception of underground mines. The originals for underground inspections are filed in the District Office and a copy kept at the Field Office.

16. Determine if supervisors are visiting active mines.

Adequate Corrective Action Needed Comments Below

17. Review documentation of staff meetings/safety meetings to determine their effectiveness and relevance to current issues and the Agency's mission.

Adequate Corrective Action Needed Comments Below

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

United States Department of Labor
Mine Safety and Health Administration
Office of Accountability

District Field Office Mine ID Date

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

Adequate Corrective Action Needed Comments Below

20. 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

21. Determine if Districts, when required, are conducting in-depth accountability reviews in compliance with agency policy and procedures including follow-up to determine the effectiveness of corrective actions.

Adequate Corrective Action Needed Comments Below

22. Is methane liberation information being entered into the MSHA Standardized Information System (MSIS) accurately and in a timely manner?

Adequate Corrective Action Needed Comments Below

No 103i mines/ other mine information is updated as needed.

23. Determine if inspectors have sufficient equipment and supplies to conduct thorough inspections.

Adequate Corrective Action Needed Comments Below

24. Evaluate the overall condition of the mine relative to the level of enforcement documented in previously completed inspections.

Adequate Corrective Action Needed Comments Below

United States Department of Labor
Mine Safety and Health Administration
Office of Accountability

District Field Office Mine ID Date

25. Determine if inspectors have an understanding of when a violation of Section 103(a) for Advance Notice occurs and whether appropriate citations are issued for Advance Notice.

Adequate Corrective Action Needed Comments Below

26. Determine if the management resource tracking tool is being used to track resources regarding Special Investigations.

Adequate Corrective Action Needed Comments Below

27. Determine if retraining of supervisors, inspectors, and specialists is being tracked.

Adequate Corrective Action Needed Comments Below

28. Determine if supervisors are rotating the mine assignments annually among inspectors assigned to their Field Office.

Adequate Corrective Action Needed Comments Below

United States Department of Labor
 Mine Safety and Health Administration
 Office of Accountability

District **North Central** Field Office **Indianapolis, IN** Mine ID **[REDACTED]** Date **[REDACTED]**

Attachment B: Citations issued during the review

Mine Citation/Order U.S. Department of Labor
 Mine Safety and Health Administration

Section I - Violation Data		
1 Date Mo Da Yr [REDACTED]	2 Time (24 Hr. Clock) [REDACTED]	3 Citation/ Order Number [REDACTED]
4 Served To [REDACTED]		5 Operator [REDACTED]
6 Mine [REDACTED]		7 Mine ID [REDACTED] (Contractor)
8 Condition or Practice 8a Written Notice (103g)		

Safe access was not being provided at the Disconnect Box for a sump pump that is located at SW27 & P. This disconnect box was within 6 feet of the ledge and this pump is accessed as needed to pump out water from the floor below. This hazard exposes miners to possible fatal type injuries should a miner inadvertently trip or fall while accessing the disconnect box or fire extinguisher. This condition was not noted on the daily workplace exams and it could not be determined how long it has existed.

Standard 57.11001 was cited **[REDACTED]**

See Continuation Form (MSHA Form 7000-3a)

9 Violation	A Health Safety Other	B Section of Act	C Part/Section of Title 30 CFR 57.11001
-------------	-----------------------	------------------	---

Section II - Inspector's Evaluation

10 Gravity						
A Injury or illness (has) (is):		No Likelihood	Unlikely <input checked="" type="checkbox"/>	Reasonably Likely <input type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B Injury or illness could reasonably be expected to be		No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input checked="" type="checkbox"/>	
C Significant and Substantial			Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	D Number of Persons Affected (0)	
11 Negligence (check one)		A None <input type="checkbox"/>	B Low <input type="checkbox"/>	C Moderate <input checked="" type="checkbox"/>	D High <input type="checkbox"/>	E Reckless Disregard <input type="checkbox"/>
12 Type of Action [04g]		13 Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/> Written Notice <input type="checkbox"/>				
14 Initial Action				E Citation/Order Number		F Dated Mo Da Yr
A Citation		B Order	C Safeguard	D Written Notice <input type="checkbox"/>		
15 Area or Equipment						

16 Termination Due		A Date Mo Da Yr [REDACTED]	B Time (24 Hr. Clock) [REDACTED]
--------------------	--	--------------------------------------	-------------------------------------

Section III - Termination Action

17 Action to Terminate	
------------------------	--

18 Terminated		A Date Mo Da Yr [REDACTED]	B Time (24 Hr. Clock) [REDACTED]
---------------	--	--------------------------------------	-------------------------------------

Section IV - Automated System Data

19 Type of Inspection (activity code) E01		20 Event Number [REDACTED]		21 Primary or Mib P	
22 AR Name [REDACTED]				23 AR Number [REDACTED]	

MSHA Form 7000-3, Apr 08 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street SW, MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

United States Department of Labor
 Mine Safety and Health Administration
 Office of Accountability

District North Central Field Office Indianapolis, IN Mine ID [REDACTED] Date [REDACTED]

Mine Citation/Order

U.S. Department of Labor
 Mine Safety and Health Administration



Section I - Violation Data		
1 Date Mo Da Yr [REDACTED]	2 Time (24 Hr Clock) [REDACTED]	3 Citation/ Order Number [REDACTED]
4 Served To [REDACTED]		5 Operator [REDACTED]
6 Mine [REDACTED]		7 Mine ID [REDACTED] (Contractor)
8 Condition or Practice		

8a Written Notice (103g)

Loose material ([REDACTED]) ranging in size was observed in the escape routes that lead to the primary escape way on the North side of the mine. The loose material was observed between KK and TT in the escape routes with the working headings being on N33 and the Primary Escape Way located on N31. These are active headings and a driller was in the area working. These areas are typically traveled by equipment and exposes miners to possible lost workday or restricted duty type injuries. This condition was not noted on the daily workplace exams and was found under spotlight while walking the area.

See Continuation Form (MSHA Form 7000-3a)

9 Violation	A Health Safety Other	B Section of Act	C Part/Section of Title 30 CFR 57.11051g
-------------	-----------------------	------------------	---

Section II - Inspector's Evaluation

10 Gravity						
A Injury or illness (has it):		No Likelihood	Unlikely <input checked="" type="checkbox"/>	Reasonably Likely	Highly Likely	Occurred <input type="checkbox"/>
B Injury or illness could reasonably be expected to be:		No Lost Workdays	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently disabling	Fatal <input type="checkbox"/>	
C Significant and Substantial			Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	D Number of Persons Affected 001	
11 Negligence (check one)		A None <input type="checkbox"/>	B Low <input type="checkbox"/>	C Moderate <input checked="" type="checkbox"/>	D High <input type="checkbox"/>	E Reckless Disregard <input type="checkbox"/>
12 Type of Action <input type="checkbox"/> 103g		13 Type of issuance (check one)				
		Citation <input checked="" type="checkbox"/>		Order <input type="checkbox"/>	Safeguard <input type="checkbox"/>	Written Notice <input type="checkbox"/>
14 Initial Action		E Citation/ Order Number			F Dated Mo Da Yr	
A Citation <input type="checkbox"/>		B Order <input type="checkbox"/>	C Safeguard <input type="checkbox"/>	D Written Notice <input type="checkbox"/>		

15 Area or Equipment

16 Termination Due	A Date Mo Da Yr [REDACTED]	B Time (24 Hr Clock) [REDACTED]
--------------------	-------------------------------	------------------------------------

Section III - Termination Action

17 Action to Terminate

18 Terminated	A Date Mo Da Yr [REDACTED]	B Time (24 Hr Clock) [REDACTED]
---------------	-------------------------------	------------------------------------

Section IV - Automated System Data

19 Type of inspection (activity code) E01	20 Event Number [REDACTED]	21 Primary or Mill P	22 AR Name [REDACTED]	23 AR Number [REDACTED]
--	-------------------------------	-------------------------	--------------------------	----------------------------

MSHA Form 7000-3 Apr 86 (revised). In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW, MC 2120, Washington, DC 20415. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

United States Department of Labor
 Mine Safety and Health Administration
 Office of Accountability

District **North Central** Field Office **Indianapolis, IN** Mine ID **[REDACTED]** Date **[REDACTED]**

Mine Citation/Order **U.S. Department of Labor**
 Mine Safety and Health Administration 

Section I - Violation Date

1 Date Mo Da Yr [REDACTED]	2 Time (24 Hr. Clock) [REDACTED]	3 Citation/ Order Number [REDACTED]
4 Served To [REDACTED]		5 Operator [REDACTED]
6 Mine [REDACTED]		7 Mine ID [REDACTED] (Contractor)

8a Written Notice (103g)

The booster fan located at SW29 and M was not in operation at the time of the inspection. This fan is part of the mines ventilation system and it was not shutdown for maintenance or inspection purposes. This hazard exposes miners to possible lost workday or restricted duty type injuries from the mines ventilation being disrupted and mine gases, dpm, or oxygen levels being affected. Mine management was unaware that the fan was not in operation and it could not be determined how long it was off.

See Continuation Form (MSHA Form 7000-3a)

9 Violation	A. Health Safety Other	B Section of Act	C Part/Section of Title 30 CFR 57.8518a
-------------	------------------------	------------------	--

Section II - Inspector's Evaluation

10 Gravity

A Injury or illness (has) (is): No Likelihood Unlikely Reasonably Likely Highly Likely Occurred

B Injury or illness could reasonably be expected to be: No Lost Workdays Lost Workdays Or Restricted Duty Permanently Disabling Fatal

C Significant and Substantial: Yes No

D Number of Persons Affected: (0)

11 Negligence (check one): A None B Low C Moderate D High E Reckless Disregard

12 Type of Action: (104)

13 Type of Issuance (check one): Citation Order Safeguard Written Notice

14 Initial Action: A Citation B Order C Safeguard D Written Notice

E Citation/Order Number: [REDACTED]

F Dated: Mo Da Yr [REDACTED]

15 Area or Equipment: [REDACTED]

16 Termination Due	A Date Mo Da Yr [REDACTED]	B Time (24 Hr. Clock) [REDACTED]
--------------------	-------------------------------	-------------------------------------

Section III - Termination Action

17 Action to Terminate: Mine management started the fan up and it worked as it should. Therefore this citation is terminated.

18 Terminated	A Date Mo Da Yr [REDACTED]	B Time (24 Hr. Clock) [REDACTED]
---------------	-------------------------------	-------------------------------------

Section IV - Automated System Data

19 Type of Inspection (activity code) E01	20 Event Number [REDACTED]	21 Primary or Mill P
22 AR Name [REDACTED]		23 AR Number [REDACTED]

MSHA Form 7000-3, Apr 08 (revised). In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 12 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247) or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street SW, MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

United States Department of Labor
 Mine Safety and Health Administration
 Office of Accountability

District **North Central** Field Office **Indianapolis, IN** Mine ID **[REDACTED]** Date **[REDACTED]**

Mine Citation/Order **U.S. Department of Labor**
 Mine Safety and Health Administration 

Section I - Violation Data

1. Date Mo Da Yr [REDACTED]	2. Time (24 Hr. Clock) [REDACTED]	3. Citation/ Order Number [REDACTED]
4. Served To [REDACTED]		5. Operator [REDACTED]
6. Mine [REDACTED]		7. Mine ID [REDACTED] (Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The energized self cleaning tail pulley on Conveyor #6 in the underground was exposed on the bottom side to possible contact by a miner. This pulley could be easily contacted during greasing and there was also a water hose located under the pulley spraying material out from under the pulley while it was in operation. This area is accessed by miners on foot when this Primary (Impactor) is in operation exposing miners to possible permanently disabling injuries. This condition was not noted on the workplace exams and it could not be determined how long it has existed.

Standard 57.14107a was cited [REDACTED]

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR	57.14107a
--------------	------------------------	-------------------	---------------------------------	-----------

Section II - Inspector's Evaluation

10. Gravity

A. Injury or illness (has) (is) No Likelihood Unlikely Reasonably Likely Highly Likely Occurred

B. Injury or illness could reasonably be expected to be No Lost Workdays Lost Workdays 0: Restricted Duty Permanently Disabling Fatal

C. Significant and Substantial Yes No D. Number of Persons Affected (0)

11. Negligence (check one) A. None B. Low C. Moderate D. High E. Reckless/Disregard

12. Type of Action 1 (14g) 13. Type of Issuance (check one) Citation Order Safeguard Written Notice

14. Initial Action A. Citation B. Order C. Safeguard D. Written Notice E. Citation/Order Number F. Dated Mo Da Yr

15. Area or Equipment

16. Termination Due A. Date Mo Da Yr B. Time (24 Hr. Clock)

Section III - Termination Action

17. Action to Terminate

18. Terminated A. Date Mo Da Yr B. Time (24 Hr. Clock)

Section IV - Automated System Data

19. Type of Inspection (activity code) F01	20. Event Number [REDACTED]	21. Primary or Multi P
22. AR Name [REDACTED]		23. AR Number [REDACTED]

MSHA Form 7000-3, Apr 98 (revised). In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW, MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

United States Department of Labor
 Mine Safety and Health Administration
 Office of Accountability

District North Central Field Office Indianapolis, IN Mine ID [REDACTED] Date [REDACTED]

Mine Citation/Order U.S. Department of Labor
 Mine Safety and Health Administration

Section I - Violation Data		
1 Date Mo Da Yr [REDACTED]	2 Time (24 Hr. Clock) [REDACTED]	3 Citation/ Order Number [REDACTED]
4 Served To [REDACTED]		5 Operator [REDACTED]
6 Mine [REDACTED]		7 Mine ID [REDACTED] (Contractor)
8 Condition or Practice Ba. Written Notice (103g)		

Loose material was observed above the travel way that is next to the tail of Conveyor #6 at the Primary located at SW28 & M. This area is regularly traveled by foot and vehicle when this Primary is in operation. The material ranged in size and was approximately 20 feet off the floor that is sloped. This hazard exposes miners to possible lost workday or restricted duty type injuries should falling material strike a miner. This condition was not noted on the daily workplace exams and it could not be determined how long it has existed.

Standard 57.3200 was cited [REDACTED]

See Continuation Form (MSHA Form 7000-3a)

9 Violation	A Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B Section of Act	C. Part/Section of Title 30 CFR 57.3200
-------------	--	------------------	--

Section II - Inspector's Evaluation				
10 Gravity				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Debilitating <input type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			D. Number of Persons Affected: 001	
11 Negligence (check one): A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>				
12 Type of Action: 104a		13 Type of Issuance (check one): Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/> Written Notice <input type="checkbox"/>		
14 Initial Action: A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			E. Citation/Order Number	
15 Area or Equipment				

16 Termination Due	A. Date Mo Da Yr [REDACTED]	B. Time (24 Hr. Clock) [REDACTED]
--------------------	--------------------------------	--------------------------------------

Section III - Termination Action

17 Action to Terminate	
18 Terminated	A. Date Mo Da Yr [REDACTED] B. Time (24 Hr. Clock) [REDACTED]

Section IV - Automated System Data

19 Type of Inspection (activity code) F01	20 Event Number [REDACTED]	21 Primary or Mill p
22 AR Name [REDACTED]		23 AR Number [REDACTED]

MSHA Form 7000-3, Apr 08 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 404 3rd Street, SW, MC 2170, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

United States Department of Labor
Mine Safety and Health Administration
Office of Accountability

District

North Central

 Field Office

Indianapolis, IN

 Mine ID

██████████

 Date

██████████

Attachment C: Discussion Topics

Inspection on all shifts – For the E01 events reviewed inspections occurred only on the day shift. The ██████████ operates on two ten hour production shifts and one ten hour maintenance shift per day. The length of the inspections ranged from five to six days. GIPH page 33 Item H: Inspectors should inspect on all work shifts of a mine (which includes mills) during every regular inspection. Inspectors are not required to inspect a second or third (e.g., night, graveyard) work shift where the only employees at the site are security staff. If an inspection is not conducted of a non-work shift, inspectors should assure that mining, maintenance, or similar activities are not occurring and that personnel at the site during these times are not exposed to potential risk.

Possible Knowing and Willful (PKW) – FY 2016 PKWs reviewed for the Indianapolis Field Office revealed 14 of 18 PKWs submitted to the District were greater than five days. The District Manager was in compliance with the 30 day requirement to reach decision. GIPH page 67: "The packet shall be submitted to the District Office within five business days following the date the citation(s) or order(s) was issued. Any exceptions to this policy shall be approved in advance by the field office supervisor with concurrence from the District Office."