MEMORANDUM FOR PATRICIA W. SILVEY
Deputy Assistant Secretary for Operations
Mine Safety and Health Administration

THROUGH: KEVIN G. STRICKLIN
Administrator for
Coal Mine Safety and Health Administration

JAY P. MATTOS
Director, Office of Assessments, Accountability,
Special Enforcement and Investigations

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

SUBJECT: MSHA Office of Accountability Review, Coal District 11,
McAlester, Oklahoma Field Office, and

Introduction

This memorandum summarizes the Office of Accountability’s review of Coal District 11,
McAlester, Oklahoma Field Office, and the [redacted]. The review included MSHA field activities; level of
enforcement; conditions and practices at the mine; Field Activity Reviews (FARs);
Accompanied Activities (AAs); and MSHA supervisory and managerial oversight. The
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 issues requiring attention are included in this report.

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Overview

The review was conducted by Accountability Specialist Mark Odum and Supervisory Accountability Specialist Ted Smith from [REDACTED] through [REDACTED].

On [REDACTED], the Office of Accountability Review Team traveled to the [REDACTED] along with the [REDACTED] and [REDACTED] on an E01 inspection. Areas and activities examined by the inspection group included the primary escapeway/travelway from the surface to the active continuous miner working section, MMU 001-0, located in the 3rd East Panel. The group inspected conditions along the travelway and checked the communication and tracking system, escape lifelines and signage. The inspection included examinations of all working faces on the working section for imminent dangers, methane tests at the faces and air readings. The inspection team observed the mining cycle and work practices and the use of the remote controlled continuous mining machine, dual boom roof bolting machines, shuttle car haulage and scoop operations. The inspection also included observations of the section roof support system and ventilation controls along with rock dusting and cleanup activities. The Refuge Alternative (RA) for the working section was properly located and emergency communications tested functional at the location. The inspection group conducted safety talks with miners on the section as encountered.

The outby areas visited included the section belt drive and the head/transfer area and 10 crosscuts of the #12 belt entry. The inspection included the section return/alternate escapeway from the section to the mouth of the unit observing the lifeline and signage in the area. Visual observations in the outby areas included ventilation, cleanup, rock dust applications, and roof control.

Surface areas examined included the check-in/check-out system, escapeway map and mine record books. The review team observed pre- and post-inspection conferences conducted by the inspector and supervisor.
Review Results

This review revealed positive findings in several areas as follows:

1. The [redacted] used calendars for tracking required 103(i) spot inspections.
2. Inspectors used copies of the Inspection Tracking System (ITS) pages for integration into their inspection notes.
3. Inspectors were diligent in inspecting multi-gas detectors for function and maintenance.
4. Inspectors included documentation of bag numbers of rock dust samples on the Rockdust Map providing best review and tracking capabilities.
5. Inspectors used tracking devices during inspections per the operator's ERP.
6. Inspectors and supervisory staff were accommodating and professional in conduct and displayed good rapport with miners.

This review revealed three deficiencies from the Office of Accountability Review Checklist items that require corrective actions. Under each deficiency, specific items are noted: (Supporting information can be found in the Office of Accountability Review Checklist and Attachment E)

1. Office of Accountability Review Checklist Item #2 – The documentation for inspections was not complete and thorough.
   
   A. The mine tracking map did not show the extent of inspection travel over a bank of overcasts connecting the 2nd North West Mains, a distance of three crosscuts.

   B. Copies of ITS pages included with the inspection notes were not always dated, initialed, and numbered sequentially.

   C. The ITS list of aircourses did not include identification of the aircourses which were escapeways. The aircourses were listed as intake, return, and belt but did not include designation of escapeways.

2. Office of Accountability Review Checklist Item #18 – The required Field Activity Reviews (FARs) had not been conducted and documented according to agency policy and procedures for FY 2013.
A. The required FARs were not completed for all inspectors during FY 2013 – five FARs during the first half of FY 2013 and six FARs during the second half of FY 2013 were not completed.

3. Office of Accountability Review Checklist Item #19 – The required Accompanied Activity Reviews (AAs) had not been conducted and documented according to agency policy and procedures for FY 2013.

A. The required AAs were not completed for all inspectors during FY 2013 – nine AAs during the first half of FY 2013 and ten AAs during the second half of FY 2013 were not completed.
Attachments

A. Internal Review Summary

B. Office of Accountability Review Checklist

C. Citations/Orders Issued During This Review

Five citations were issued during the review:

- 75.1505(a)
- 75.400
- 75.380(d)(2)
- 75.202(a)
- 75.202(a)

D. Examples of Citations Issued During Previous E01 Inspections
   N/A

E. Deficiencies Identified with Requirements

F. District Corrective Action Plan
Attachment A – Internal Review Summary

The table below lists the most common internal review findings following mine disasters. District 11 had two of the most commonly identified issues.

<table>
<thead>
<tr>
<th>Common Internal Review Findings</th>
<th>Examples of Deficiencies:</th>
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<tbody>
<tr>
<td>Failure to identify deviations in approved plans.</td>
<td>Not identifying operator departures from requirements in any plan that requires approval, such as training plans, roof control plans, ventilation plans, emergency response plans, etc.</td>
</tr>
<tr>
<td><strong>X</strong> Incomplete or inadequate inspections</td>
<td>Not following policy or procedures for conducting/documenting inspections. Failure to cite all violations. Not inspecting all areas and equipment.</td>
</tr>
<tr>
<td>Failure to conduct 103(i) spot inspections according to policy.</td>
<td>Not conducting spot inspections, not conducted in a timely manner and at irregular intervals.</td>
</tr>
<tr>
<td><strong>X</strong> Supervisors did not provide adequate oversight.</td>
<td>No review/lax review of inspection reports. Inadequate review of PKWSAR forms. Failure to conduct required Field Activity Reviews and Accompanied Activities.</td>
</tr>
<tr>
<td>Improper evaluations of gravity, negligence and type of enforcement action.</td>
<td>Inadequate documentation to support citation and evaluation. Failure to consider and document aggravating or mitigating circumstances.</td>
</tr>
<tr>
<td>Inadequate Peer Reviews</td>
<td>Inadequate district level Peer Reviews. Failure to adopt and follow corrective action plans. Failure to follow up or monitor effectiveness of corrective action plans.</td>
</tr>
<tr>
<td>Weakness in the ACR Program</td>
<td>Not following ACR handbook. Inadequate management oversight. Failure to follow the Mine Act, MINER Act, 30 CFR and MSHA policy.</td>
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<tr>
<td>MSHA data not used or reviewed.</td>
<td>Key Indicators, Mine Profile, Inspection completion reports not being used. Failure to keep MSIS data up to date and accurate.</td>
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<tr>
<td>Lack of unwarrantable failure tracking system</td>
<td>No or inadequate unwarrantable failure sequence tracking system.</td>
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<td>Conflict of Interest</td>
<td>Inspecting prior employers, employment of relatives</td>
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<tr>
<td>Failure to comply with Hazard Complaint Procedures.</td>
<td>Improper coding of inspections. Inadequate documentation of inspections/investigations.</td>
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<td>Investigations of multi-phase plans</td>
<td>Failure to conduct on-site evaluations of plans.</td>
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<tr>
<td>Failure to observe retreat mining.</td>
<td>Inadequate periodic evaluations when retreat mining is conducted.</td>
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<tr>
<td><strong>Upper Big Branch Internal Review Corrective Actions</strong></td>
<td>Corrective Actions implemented as of March 31, 2013.</td>
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Attachment B – Office of Accountability Review Checklist

1. Determine if complete and thorough E01 inspections are being conducted and/or if policy and procedures were properly followed.
   - Adequate [X]  Corrective Action Needed [ ]  Comments Below [ ]

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

See Review Results and Attachment E

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 [X]  Corrective Action Needed [ ]  Comments Below [ ]

4. Evaluate inspector/specialist examination of required record books and postings for compliance with applicable standards.
   - Adequate [X]  Corrective Action Needed [ ]  Comments Below [ ]

5. Evaluate inspector/specialist examination of the operator’s maps (on-site) for accuracy, escapeway locations, etc.
   - Adequate [X]  Corrective Action Needed [ ]  Comments Below [ ]
6. Upon arrival on the working section, accompany and evaluate inspector/specialist examination of all working faces for imminent dangers.

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

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

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

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

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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 | X | Corrective Action Needed | ☐ | Comments Below | ☐ |
12. During the review, evaluate the inspection of at least one set of seals, including methods for obtaining samples from sealed area.

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<td>No seals in the mine.</td>
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13. Determine if adequate close-out conferences are being conducted at the end of each inspection.

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

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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.

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

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

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9
18. Are required Field Activity Reviews (FARs) and supervisory follow-ups being conducted and documented according to agency policy and procedures?

See Review Results and Attachment E

19. Are Accompanied Activities (AAs) and supervisory follow-ups being conducted and documented according to agency policy and procedures?

Adequate ☐ Corrective Action Needed ☒ Comments Below ☒

20. 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 ☐

21. 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 ☐

22. Are supervisors thoroughly reviewing Uniform Mine Files at least annually?

Adequate ☒ Corrective Action Needed ☐ Comments Below ☐

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

Adequate ☒ Corrective Action Needed ☐ Comments Below ☐

24. Are all sections where retreat mining is occurring (not to include longwall mining) being inspected at least monthly?
24. Are all sections where retreat mining is occurring (not to include longwall mining) being inspected at least monthly?

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No retreat mining on-going at [Redacted].

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

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26. After an in-mine visit, evaluate approved plans (ventilation, roof control, training, etc.) for compatibility with mining conditions and equipment.

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

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28. 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).

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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.

Adequate [ ] Corrective Action Needed [ ] Comments Below [ ]

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

Adequate [X] Corrective Action Needed [ ] Comments Below [ ]

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

Adequate [X] Corrective Action Needed [ ] Comments Below [ ]

32. 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 CLRs.

Adequate [ ] Corrective Action Needed [ ] Comments Below [X]

The ACRI program was not reviewed during this review.

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

Adequate [X] Corrective Action Needed [ ] Comments Below [ ]
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### 34. Determine if managers and supervisors are using required standardized reports to review critical data relevant to inspections and investigations.

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### 35. Determine if Districts are conducting in-depth Peer Reviews in compliance with agency policy and procedures including follow-up to determine the effectiveness of corrective actions.

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### 36. Is information (mine status, methane liberation, number of employees, etc.) being entered into the MHSA Standardized Information System (MSIS) accurately and in a timely manner?

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13
UBB Internal Review Corrective Actions
(Implemented as of March 31, 2013)

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<tr>
<td>District</td>
<td>Coal District 11</td>
<td>Field Office</td>
<td>McAlester, OK</td>
<td>Mine ID</td>
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38. (#3) On August 30, 2012, the Administrator for Coal directed district managers to use MPA database system to identify overdue responses from operators and take appropriate actions.

Adequate [X] Corrective Action Needed [ ] Comments Below [ ]

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39. (#4) Enforcement personnel were instructed that MSHA policy only allows violations of 30 CFR 48.5, 48.6, 48.7, 48.8, and 48.11 to be cited under section 104(g)(1) of the Mine Act for untrained miners at underground mines. Also trained on records that must be inspected to ensure that an operator is providing all required training. This includes checking training records for AMS operators, responsible persons, and persons who sample atmospheres behind seals.

Adequate [X] Corrective Action Needed [ ] Comments Below [ ]

|   |   |   |   |   |   |   |   |
(#5) Identify training records required by 30 CFR 75.338(a) and 75.1501(a)(3) as records that are to be inspected during a regular inspection, as well as any records of any other training required by MSHA regulations;

40. Specify the percentage of miners for which training records are to be inspected during a regular inspection;

• Inspectors are to question miners on their training related to roof control plans and document such information per CMS&H Memo No. HQ-08-055-A. This also applies to training related to ventilation plans.

Adequate [X]  Corrective Action Needed [ ]  Comments Below [ ]

(#7) A complete permissibility inspection of each longwall system shall be conducted by electrical specialists or inspectors who hold a current MSHA electrical qualification card on at least an annual basis.

41. Adequate [X]  Corrective Action Needed [ ]  Comments Below [ ]

(#11) Conduct a proper examination of the AMS system and/or AMS systems that operate CO sensors for the purposes of 75.1101. A complete inspection includes those items in the revised GIPH (AMS checklist).

42. Adequate [X]  Corrective Action Needed [ ]  Comments Below [ ]

(#12) Inspectors are to review examination records with the purpose of determining whether:

43. • Examinations have been conducted at required intervals;
• Records include violations of mandatory safety or health standards;
• Hazardous conditions have been properly recorded;
• Records of violations or hazardous conditions indicate a need for inspectors to follow up;
• Corrective actions have been recorded for reported hazardous conditions;
• Ventilation of worked out and outby areas have been evaluated properly.

Adequate [X]  Corrective Action Needed [ ]  Comments Below [ ]
(#19) Supervisors are to utilize standard oversight reports in the review of rockdust sampling and to also ensure inspectors have valid reasons for not collecting samples, including visiting some areas that inspectors indicated were too wet to sample.

44. Adequate X Corrective Action Needed □ Comments Below □

(#21) Inspectors were reinstructed to review required records and postings, including Mine Accident, Injury, and Illness Reports (MSHA Form 7000-1) and Quarterly Employment and Coal Production Reports (MSHA Form 7000-2) during each regular inspection. This will help identify mine operators that routinely under report or inaccurately report accidents, injuries, illnesses, employment, and production.

45. The District Managers were instructed to hold supervisors accountable for enforcing compliance with this directive.

Adequate X Corrective Action Needed □ Comments Below □

(#32) Districts are to monitor the time required to process plans and take appropriate administrative actions when necessary. The Administrator for Coal directed district managers and district personnel to use the "Days to Reach Decision" Report in the MSHA Report Center to monitor the time required to process plans and take appropriate administrative action when necessary.

46. Adequate X Corrective Action Needed □ Comments Below □
(#33) The Coal Safety Division provided training on the procedures outlined in the Mine Ventilation Plan Approval Procedures Handbook regarding six-month plan reviews to all inspectors and specialists to help ensure that the in-mine physical inspection of the mine ventilation system is properly conducted and documented.

District Managers were instructed to monitor the six-month reviews to verify their effectiveness and take follow-up corrective action if necessary.

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(#38&64) Coal revised the Program Policy Manual provision governing the establishment of Mechanized Mining Unit (MMU) numbers under 30 CFR 70.207. The revised policy provides that the reduced respirable dust standard, due to the presence of quartz, will not change when the operator changes equipment on a mining section.

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(#42) The Administrator for Coal directed staff to monitor the implementation of new regulations to ensure districts enforce the provisions of final rules within the effective dates specified. This will be tracked through Field Activity Reviews, Accompanied Activities, Second Level Reviews, and District Peer Reviews.

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(#47) The Roof Control Plan SOP should comply with the established Program Policy Manual requirements as identified by the OIG report to address deficiencies identified in the Internal Review report. The SOPs should account for:

- to check that required information is submitted
- check for communication with other plan approval groups
- assure that designated MSHA personnel contact the operator for additional information
- discuss results of on-site evaluations with the operator and identified miners' representatives.

Adequate [X]  Corrective Action Needed [ ]  Comments Below [ ]

(#48&49) Six month In-mine physical evaluation of the Roof Control Plan shall be properly conducted and documented (checklists). GIPH provides guidance on when six month reviews of complex roof control plans should be forwarded to Technical Support for evaluation. Complex plans should be reviewed by roof control specialists and/or forwarded to Tech Support.

Adequate [X]  Corrective Action Needed [ ]  Comments Below [ ]

(#58) SSI's are required to maintain 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.

Adequate [X]  Corrective Action Needed [ ]  Comments Below [ ]

(#65) The Coal Health Division provided training on proper procedures for conducting, documenting, and reviewing MSHA respirable dust surveys. Proper documentation to include blue cards, 2000-86's, etc.

Adequate [X]  Corrective Action Needed [ ]  Comments Below [ ]
(#66) Managers and enforcement personnel should monitor respirable dust violations from issuance to termination to reduce miners’ exposure to respirable coal mine dust. The “Abatement Times for Respirable Dust Citations” report is located in the MSHA Report Center on MSHAnet website.

Adequate X Corrective Action Needed □ Comments Below □

(#67) Retraining of inspectors report is available so that districts can track the training process of their inspectors in real time. This report also allows districts to integrate retraining of inspectors conducted at other sites and certified by Coal. The reports are now available on one reporting system. The Administrator for Coal will provide an annual report to the Assistant Secretary detailing compliance with this policy at the end of each fiscal year.

Adequate X Corrective Action Needed □ Comments Below □

(#75) The Administrator for Coal provided uniform guidance to all district managers and assistant district managers to provide acting field office supervisors with the level of oversight necessary to manage their work groups on a temporary basis. The guidance will be included in each District’s SOP for training newly promoted field office supervisors. An online distance learning training course with a knowledge check for temporarily promoted supervisors has been developed for this purpose.

Adequate X Corrective Action Needed □ Comments Below □
Attachment C – Citations Issued During Review

The Mine Operator failed to maintain the escape way map in the Mine office. The secondary escape way lifeline was not marked from cross cut #17 of the 1st Southwest Mains to cross cut #13 of the 2nd Southwest Mains. This map shows the route of travel for the miners to escape if there is an event that the secondary escape way is needed after they travel underground.

---

**United States Department of Labor**  
Mine Safety and Health Administration  
Office of Accountability  
District  
Coal District 11  
Field Office  
McAlester, OK  
Mine ID  
Date

---

**Mine Citation/Order**

| Section I – Violation Data | U.S. Department of Labor  
|---------------------------|--------------------------  
| 5. Citation Order Number | Mine Safety and Health Administration  
| 6. Operator Name          | (Contractor)  
| 7. Mine ID               |  
| 8. Violation              | Written Notice (103g)  

The Mine Operator failed to maintain the escape way map in the mine office.

The secondary escape way lifeline was not marked from cross cut #17 of the 1st Southwest Mains to cross cut #13 of the 2nd Southwest Mains. This map shows the route of travel for the miners to escape if there is an event that the secondary escape way is needed after they travel underground.
The Mine Operator allowed the accumulations of combustible materials to accumulate in the #5 entry, at cross cut #1 of the 2nd Northwest Mains, just inby the #11 belt drive of the primary escape way. There was bags of trash, plaster buckets, rock dust bags and old ventilation curtain piled at the side of the cross cut.

Standard 75.400 was cited

<table>
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<tr>
<th>Violation</th>
<th>A. Health</th>
<th>B. Section</th>
<th>C. Part/Section of Title 30 CFR</th>
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<tr>
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<td>Safety / Other</td>
<td>of Act</td>
<td>75.400</td>
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<table>
<thead>
<tr>
<th>Gravity</th>
<th>A. Injury or Illness (fat)</th>
<th>No Likelihood</th>
<th>Unlikely</th>
<th>Reasonably Likely</th>
<th>Highly Likely</th>
<th>Occurred</th>
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<td></td>
<td>No Lost Workdays</td>
<td>Lost Workdays</td>
<td>Lost Workdays or Restricted Duty</td>
<td>Permanently Disabling</td>
<td>Fatal</td>
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<table>
<thead>
<tr>
<th>Negligence</th>
<th>A. None</th>
<th>B. Low</th>
<th>C. Moderate</th>
<th>D. High</th>
<th>E. Reckless Disregard</th>
</tr>
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<table>
<thead>
<tr>
<th>Type of Action</th>
<th>A. None</th>
<th>B. Low</th>
<th>C. Moderate</th>
<th>D. High</th>
<th>E. Reckless Disregard</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<table>
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<th>20. Event Number</th>
<th>21. Primary or Minor</th>
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<table>
<thead>
<tr>
<th>AR Name</th>
<th>22. AR Number</th>
</tr>
</thead>
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</tbody>
</table>

Mark Form 2500 3 Apr 08 (Revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1995, the local Business Administration has received a Notice of Small Business and Industrial Regulatory Enforcement. The Mine Operator may be contacted at 75.400 for more information. If you have any comments on the enforcement actions of USHA, you may call 1-888-REG-FAIR (1-888-734-3253) or write the Director of the Regional Administration, Office of the National Administrator, 400 5th Street SW, MC 2120, Washington, DC 20460. Please note, however, that your right to file a complaint with the Omnibus Plan, in addition to any other rights, may be excluded by the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.
The Mine Operator failed to clearly mark the primary escape way lifeline. The lifeline reflectors were covered in rock dust and were not reflective and did not show the direction of travel.

Standard 75.380(d)(2) was cited.
The Mine Operator failed to control the rib at cross cut #3 of the 3rd East Panel of the #5 entry, primary travel way. Next to the section pressure pump there was a loose piece of material that measured 6 foot long by 1 foot thick by 2 feet tall. There are miners walking by this area several times per day, per shift, and there are three shifts at this mine. If this condition is left under normal mining conditions it would cause a serious injury.

Standard 75.202(a) was cited.
United States Department of Labor  
Mine Safety and Health Administration  
Office of Accountability

Mine Citation/Order  

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

1. Date  
2. Time (24 HR Clock)  
3. Citation/Order Number

4. Served To  
5. Operator  
6. Mine

7. Mine ID

8. Condition or Practice

The Mine Operator failed to control the inby rib at cross cut #23 of the 1st Northwest Mains, in the #6 entry, of the primary travel way. There was a loose piece of material that measured 5 foot long by 1 foot thick by 4 feet tall. There are miners driving by this area several times per day, per shift, and there are three shifts at this mine. If this condition is left under normal mining conditions it would cause a serious injury.

Standard 75.202(a) was cited

<table>
<thead>
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<th>Section II: Inspector's Evaluation</th>
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</thead>
<tbody>
<tr>
<td>A. Health &amp; Safety ✓ Other ✓</td>
</tr>
<tr>
<td>B. Section of Act</td>
</tr>
<tr>
<td>C. Part/Section of Title 30 CFR</td>
</tr>
<tr>
<td>75.202(a)</td>
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</table>

<table>
<thead>
<tr>
<th>10. Gravity:</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Injury or illness (has) (is): No Likelihood ✓ Unlikely ✓ Reasonably Likely ✓ Highly Likely Occurred</td>
</tr>
<tr>
<td>B. Injury or illness could reasonably be expected to be: No Lost Workdays ○ Lost Workdays Or Restricted Duty ○ Permanently Disabling ✓ Fatal ○</td>
</tr>
<tr>
<td>C. Significant and Substantial: Yes ✓ No ○</td>
</tr>
<tr>
<td>D. Number of Persons Affected: 101</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>11. Negligence (check one)</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. None ✓ B. Low ✓ C. Moderate ✓ D. High ✓ E. Reckless Disregard</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>12. Type of Action 104(a)</th>
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</thead>
<tbody>
<tr>
<td>13. Type of Issuance (check one)</td>
</tr>
<tr>
<td>Citation ✓ Order ○ Safeguard ○ Written Notice ○</td>
</tr>
</tbody>
</table>

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 Date  
A. Date  
B. Time (24 HR Clock)  

17. Action to Terminate  
The Mine Operator has barred down the loose rib.

18. Terminate  
A. Date  
B. Time (24 HR Clock)  

19. Type of Inspection  
A. Event Number  
B. Primary or MI  

20. AR Name  
21. AR Number  

MSHA Form 2003-3: 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, 450 3rd Street SW, Mail Code 2120, Washington, DC 20416. Please note, however, that your right to file a complaint with the Ombudsman 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.
Attachment D – Examples of Citations Issued During Previous Inspections

N/A
Attachment E – Office of Accountability Checklist Issues

1. Office of Accountability Review Checklist Item #2 – The documentation for inspections was not complete and thorough.

   A. The mine tracking map did not show the extent of inspection travel over a bank of overcasts connecting the 2nd North West Mains, a distance of three crosscuts. GIPH p. 3-42

Requirements:

GIPH, PH13-V-1, page 3-42, in part:

_The inspector should clearly mark the extent of daily travels that contribute to the E01 inspection by date and initials on the mine tracking map, including any approved evaluation or measurement point locations associated with the aircourse and the beginning and ending point of each day’s travel until each intake or return aircourse is fully inspected (this does not apply to routine travel of or incidental travel through an aircourse)._ 

   B. Copies of ITS pages included with the inspection notes were not always dated, initialed, and numbered sequentially. GIPH p. 2-19

Requirements:

GIPH, PH13-V-1, page 2-19, in part:

_The inspector should date, initial, and sequentially number the front of each page of the inspection notes, including nonstandard formats, starting with the Daily Cover Sheet as Page 1._

   C. The ITS list of aircourses did not include identification of the aircourses which were escapeways. The aircourses were listed as intake, return, and belt but did not include designation of escapeways. GIPH p. 3-41

Requirements:

GIPH, PH13-V-1, page 3-41, in part:

_The inspector will assure that all aircourses required to be examined are maintained in the ITS by name and identified with an intake or return designation. If the aircourse is also an escapeway, it should be so identified with the aircourse name._
2. Office of Accountability Review Checklist Item #18 – The required Field Activity Reviews (FARs) had not been conducted and documented according to agency policy and procedures for FY 2013.

A. The required FARs were not completed for all inspectors during FY 2013 – five FARs during the first half of FY 2013 and six FARs during the second half of FY 2013 were not completed.

Requirements:

CMS&H Supervisor’s Handbook - AH14-III-4, page 1-13, in part:

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.

3. Office of Accountability Review Checklist Item #19 – The required Accompanied Activity Reviews (AAs) had not been conducted and documented according to agency policy and procedures for FY 2013.

B. The required AAs were not completed for all inspectors during FY 2013 – nine AAs during the first half of FY 2013 and ten AAs during the second half of FY 2013 were not completed.

Requirements:

CMS&H Supervisor’s Handbook - AH14-III-4, page 1-13, 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.
MEMORANDUM FOR TED SMITH
Supervisor, Office of Accountability

FROM: RICHARD A. GATES
District Manager

SUBJECT: Proposed Corrective Actions

This is a response to the Accountability Review conducted by your office from [redacted] at the McAlester, OK field office and the [redacted] The results of your review identified 3 deficiencies which are required to be addressed by this office in the attached Corrective Action Plan.

Attachment
District 11 Corrective Action Plan
Office of Accountability Audit
McAlester Field Office

The following plan is based on the issues listed on pages 3 and 4 of the Office of Accountability Audit of Coal District 11 and the McAlester Field Office.

Note that any corrective actions may be modified at any time based on evaluations of their effectiveness.

1. **Office of Accountability Review Checklist Item #2 - The documentation for inspections was not complete and thorough.**

   **ROOT CAUSE:**
   Inadequate integration of the McAlester Field Office into District 11 with respect to deficiencies previously found during past Audits.

   **PROPOSED CORRECTIVE ACTIONS:**
   Re-training will be given to all CMIs and Supervisors on the requirements listed in the General Inspections Procedures Handbook (GIPII) for the items specifically identified during the OA Review conducted from [date] through [date].

   - CMIs and Supervisors will be re-trained to clearly mark the extent of daily travels that contribute to the E01 inspection by date and initials on the mine tracking map.

   - CMIs and Supervisors will be re-trained to fully document inspection or investigation activities using any legible written format for continuation pages. Highlighting the fact that printed ITS sheets, checklists, or equivalent preprinted forms may be used as part of the inspection notes provided that they have on the front of each page the date, inspector initials, and a page number.

   - CMIs and Supervisors will be re-trained to assure that all aircourses required to be examined are maintained in the ITS by name and will be identified with an intake or return designation. If the aircourse is also an escapeway, it should also be so identified with the aircourse name.
The re-training will be conducted during field office staff meetings utilizing appropriate printed or electronic materials. An attendance roster will be signed by all participants and a record of the training will be kept with the corrective actions for this review.

OFFICE RESPONSIBLE FOR IMPLEMENTING:
Field office will be responsible for re-training and compliance reviews.

TIMEFRAME FOR COMPLETION:
Re-training has already begun. An e-mail was sent to all CMIs and Supervisors which contained the items identified by the OA Review and excerpts from the General Inspection Procedures Handbook (GIPH) that address the items identified. Formal re-training will be conducted in October and November but it cannot be fully evaluated until the next round of E01s are completed and reviewed for accuracy. This should be finalized by April 2015.

METHOD FOR COMPLETION:
Step one will be re-training of CMIs and Supervisors during monthly staff meetings at each field office. Review of implementation will be conducted during the quarterly supervisory review of the E01s that are completed.

METHOD FOR DETERMINING SUCCESS:
The implementation of the corrective action plan will be deemed a success if all E01 inspection reports for the quarter are reviewed for accuracy and no additional errors are identified.

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 of the Office of Accountability, upon completion and evaluation of the corrective actions.

2. Office of Accountability Review Checklist Item #18 – The required Field Activity Reviews (FARs) had not been conducted and documented according to agency policy and procedures for FY 2013.

ROOT CAUSE:
Inadequate integration of the [redacted] by District 11 specifically with respect to deficiencies previously found during past Audits.
PROPOSED CORRECTIVE ACTIONS:
District staff will conduct training to ensure integration of all field office supervisors and specialist supervisors in the requirements set forth in the CMS&H Supervisor’s Handbook - AH14-III-4, in relation to conducting and documenting Field Activity Reviews (FARs). Additionally, a tracking system has been put into place to identify each FARs submitted by each field office and specialist supervisor for inspectors/specialists.

OFFICE RESPONSIBLE FOR IMPLEMENTING:
The tracking will be monitored by the ADMs in order to ensure the submission of each FAR meet the requirements of the handbook.

TIMEFRAME FOR COMPLETION:
This training will be conducted during the 1st quarter of FY2015.

METHOD FOR COMPLETION:
Step one will be re-training of Supervisors during supervisory staff meetings. Review of implementation will be conducted by ADMs to ensure that each supervisor has conducted and documented at least one FARs 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.

METHOD FOR DETERMINING SUCCESS:
The implementation of the corrective action plan will be deemed a success if all FARs are completed and meet the standards outlined in the handbook.

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 of the Office of Accountability, upon completion and evaluation of the corrective actions.

3. Office of Accountability Review Checklist Item #19 - The required Accompanied Activity Reviews (AAs) had not been conducted and documented according to agency policy and procedures for FY 2013.

ROOT CAUSE:
Inadequate integration of the [REDACTED] by District 11 specifically with respect to deficiencies previously found during past Audits.
PROPOSED CORRECTIVE ACTIONS:
District staff will conduct training to ensure integration of all field office supervisors and specialist supervisors in the requirements set forth in the CMS&H Supervisor's Handbook - AH14-III-4, in relation to conducting and documenting Accompanied Activities (AAs). Additionally, a tracking system has been put into place to identify each AAs submitted by each field office and specialist supervisor for inspectors/specialists.

OFFICE RESPONSIBLE FOR IMPLEMENTING:
The tracking will be monitored by the ADMs in order to ensure the submission of AAs meet the requirements of the handbook.

TIMEFRAME FOR COMPLETION:
This training will be conducted during the 1st quarter of FY2015.

METHOD FOR COMPLETION:
Step one will be re-training of Supervisors during monthly supervisory staff meetings. Review of implementation will be conducted by ADMs to ensure that each supervisor has conducted and documented at least two AAs with each of their inspectors and specialists during the first half and at least two AAs during the second half of each fiscal year.

METHOD FOR DETERMINING SUCCESS:
The implementation of the corrective action plan will be deemed a success if all AAs are completed and meet the standards outlined in the handbook.

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 of the Office of Accountability, upon completion and evaluation of the corrective actions.