

DEATH ON THE JOB

The Toll of Neglect

A NATIONAL AND
STATE-BY-STATE PROFILE OF
WORKER SAFETY AND HEALTH
IN THE UNITED STATES

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EXECUTIVE SUMMARY

This 2016 edition of *Death on the Job: The Toll of Neglect* marks the 25th year the AFL-CIO has produced a report on the state of safety and health protections for America's workers.

More than 532,000 workers now can say their lives have been saved since the passage of the Occupational Safety and Health Act of 1970, which promised workers in this country the right to a safe job. Since the first *Death on the Job* report was issued in 1992, there have been improvements in workplace protections, but at the same time some conditions have gotten worse. Too many workers remain at serious risk of injury, illness or death. There is much more work to be done.

The High Toll of Job Injuries, Illnesses and Deaths

In 2014:

- 4,821 workers were killed on the job in the United States.
- The fatal injury rate was 3.4 per 100,000 workers, up from a rate of 3.3 per 100,000 workers in 2013.
- An estimated 50,000 people died from occupational diseases.
- 150 workers died each day from hazardous working conditions.
- Nearly 3.8 million work-related injuries and illnesses were reported.
- Underreporting is widespread—the true toll is 7.6 million to 11.4 million injuries each year.

States with the highest fatality rates in 2014 were:

- Wyoming (13.1 per 100,000 workers).
- North Dakota (9.8 per 100,000 workers).
- Alaska (7.8 per 100,000 workers).
- South Dakota (7.2 per 100,000 workers).
- Mississippi (7.1 per 100,000 workers).

Latino workers continue to be at higher risk than other workers:

- The Latino fatality rate is 3.7 per 100,000 workers.
- 804 Latino workers were killed on the job.
- 64% of these Latino workers were immigrant workers.

Older workers are at high risk. In 2014:

- 35% of all fatalities occurred in workers age 55 or older, with 1,691 deaths. This is the highest number of fatalities ever recorded for this group of workers.
- Workers 65 or older have three times the risk of dying on the job as other workers, with a fatality rate of 10.7 per 100,000 workers.

The oil and gas industry remains very dangerous:

- There were 144 deaths in oil and gas in 2014 – the highest number of fatalities ever recorded.
- The fatality rate for oil and gas extraction was 15.6 per 100,000 workers, nearly 5 times the national average.

Workplace violence continued to be a growing problem for workers in 2014:

- 765 worker deaths were caused by violence.
- 724 worker deaths were caused by violence by a person; 41 deaths by animals.
- 409 worker deaths were workplace homicides.
- Violence was responsible for 26,540 lost-time injuries.
- Women workers suffered 66% of the lost-time injuries related to workplace violence.

The cost of job injuries and illnesses is enormous—estimated at \$250 billion to \$370 billion a year.

Job Safety Oversight and Enforcement

OSHA resources in FY 2015 are still too few and declining:

- 1,840 inspectors (805 federal and 1,035 state) to inspect the 8 million workplaces under the Occupational Safety and Health Act’s jurisdiction.
- Federal OSHA has enough inspectors to inspect workplaces once every 145 years.
- State OSHA plans have enough inspectors to inspect workplaces once every 97 years.
- There is one inspector for every 74,760 workers.
- The current OSHA budget amounts to \$3.71 to protect the safety and health of each American worker.

OSHA penalties in FY 2015 are still too weak:

- The average penalty for a serious violation was \$2,148 for federal OSHA.
- The average penalty for a serious violation was \$1,317 for OSHA state plans.
- The median penalty for killing a worker was \$7,000 for federal OSHA.
- The median penalty for killing a worker was \$3,500 for OSHA state plans.
- Only 89 worker death cases have been criminally prosecuted under the Occupational Safety and Health Act since 1970.

Regulatory Action

After years of delay, the Obama administration has moved forward to issue key safety and health regulations:

- In 2016, OSHA issued a final silica standard to reduce dust exposures in general industry, maritime and construction sectors.
- This rule will prevent more than 600 deaths and 1,000 cases of silicosis each year.

- In 2015, MSHA issued a final rule to require proximity detection systems on continuous mining machines in underground coal mines to prevent injuries and deaths from contact with this equipment.
- Many other rules are long overdue, including OSHA rules on injury reporting, beryllium, combustible dust and infectious disease, and MSHA rules on proximity detection for mobile equipment and silica.

Much Work Remains to Be Done

- Workers need more job safety and health protection.
- The serious safety and health problems faced by Latino, immigrant and aging workers must be given increased attention.
- Funding and staffing at job safety agencies should be increased.
- Ergonomic hazards, infectious diseases and chemical exposures pose serious risks to workers, but are largely unregulated.
- Workplace violence is a growing and serious threat—particularly to women workers and workers in the health care industry—that necessitates enhanced enforcement and development of an OSHA workplace violence standard.
- The escalating fatalities and injuries in the oil and gas extraction industry demand intensive and comprehensive intervention.
- Employer policies and practices that discourage the reporting of injuries through discipline or other means must be prohibited.
- Congress should pass the Protecting America’s Workers Act to extend the Occupational Safety and Health Act’s coverage to workers who are currently excluded, strengthen civil and criminal penalties for violations, enhance antidiscrimination protections, and strengthen the rights of workers, unions and victims.
- The nation must renew its commitment to protect workers from injury, disease and death and make this protection a high priority.

THE STATE OF WORKERS' SAFETY AND HEALTH

This 2016 edition of *Death on the Job: The Toll of Neglect* marks the 25th year the AFL-CIO has produced a report on the state of safety and health protections for America's workers. This report includes state-by-state profiles of workers' safety and health, and features state and national information on workplace fatalities, injuries, illnesses, the number and frequency of workplace inspections, penalties, funding, staffing and public employee coverage under the Occupational Safety and Health Act (OSH Act). It also includes information on the state of mine safety and health.

More than four decades ago, in 1970, Congress enacted the Occupational Safety and Health Act, promising workers in this country the right to a safe job. More than 532,000 workers now can say their lives have been saved since the passage of the OSH Act.¹ Since that time, workplace safety and health conditions have improved. But too many workers remain at serious risk of injury, illness or death as chemical plant and oil rig explosions, major fires, mine disasters and other preventable workplace tragedies continue to occur. Many other workplace disasters do not make the headlines and kill and disable thousands of workers each year.

In 2014, 4,821 workers lost their lives on the job as a result of traumatic injuries, according to final fatality data from the Bureau of Labor Statistics (BLS). Each day in this country, an average of 13 workers die because of job injuries—women and men who go to work, never to return home to their families and loved ones. This does not include those workers who die from occupational diseases, estimated to be 50,000 each year—an average of 137 deaths each day. Chronic occupational diseases receive less attention, because most are not detected for years after workers are exposed to toxic chemicals, and occupational illnesses often are misdiagnosed and poorly tracked.

In 2014, nearly 3.8 million workers across all industries, including state and local government, had work-related injuries and illnesses that were reported by employers, with 3 million injuries and illnesses reported in private industry. Due to limitations in the current injury reporting system and widespread underreporting of workplace injuries, this number understates the problem. The true toll is estimated to be two to three times greater—or 7.6 million to 11.4 million injuries and illnesses a year.

The cost of these injuries and illnesses is enormous—estimated at \$250 billion to \$370 billion a year.

Since taking office in 2009, the Obama administration has increased the job safety budget, stepped up enforcement and completed several much-needed standards, including rules on cranes and derricks, coal dust, confined spaces in construction and injury reporting. In March 2016, the Occupational Safety and Health Administration issued the final silica rule to update standards

¹Calculated based on changes in annual fatality rates and employment since 1970. Fatality rate data for 1970 to 1991 is from National Safety Council Accident Facts, 1994. Fatality rate data for 1992 to 2014 is from the Bureau of Labor Statistics, Census of Fatal Occupational Injuries. Annual employment data is from the Bureau of Labor Statistics Current Population Survey.

that protect workers from silicosis and other deadly and debilitating diseases caused by silica exposure. Numerous industry groups have filed legal challenges to the final standards. In addition, there are likely to be attempts in Congress to delay or even overturn the new silica rule.

Since the election of a Republican majority in the House of Representatives in 2010, and in the Senate and House in 2014, progress on safety and health has been threatened. Special interest groups and Republicans have launched an all-out assault on regulations, replacing facts with rhetoric unsupported by evidence, and have targeted key OSHA and MSHA rules. These attacks have slowed progress to improve workplace safety and health, and have squeezed agencies' budgets.

Workers in the United States need more safety and health protection, not less. More than four decades after the passage of the OSH Act, there is much more work to be done.

JOB FATALITIES, INJURIES AND ILLNESSES

On average, 13 workers were fatally injured and more than 10,000 workers were injured or made ill each day of 2014. These statistics do not include deaths from chronic occupational diseases, which claim the lives of an estimated 50,000 workers each year.

Job Fatalities

According to final fatality data from the BLS, there were 4,821 workplace deaths due to traumatic injuries in 2014, more than the 4,585 deaths reported in 2013.² The rate of fatal job injuries in 2014 was 3.4 per 100,000 workers, up from the rate of 3.3 per 100,000 workers in 2013.

State Fatality Comparisons

Wyoming's job fatality rate was the worst of any state in 2014, at 13.1 per 100,000 workers. Wyoming is followed by North Dakota (9.8), Alaska (7.8), South Dakota (7.2) and Mississippi (7.1). The lowest state fatality rate (1.7 per 100,000 workers) was reported for Massachusetts, followed by California (2.0) and Connecticut, New Jersey and Rhode Island (2.1).

Twenty-five states saw an increase in the rate of job fatalities between 2013 and 2014. In 2014, a number of states experienced significant increases in fatality rates from their 2013 rates. Hawaii experienced a 213% increase, followed by Washington (59%), South Dakota (53%), Utah and Nebraska (45%), Wyoming (38%), Oregon (34%) and Georgia (29%).

While this is the second year in a row that North Dakota's job fatality rate has declined, it is still very high (9.8 per 100,000 workers), and 40% greater than its fatality rate in 2007 (7.0 per 100,000 workers); 38 workers were killed in the state in 2014.

²2014 fatality data is from the BLS 2014 Census of Fatal Occupational Injuries, Final Release April 21, 2016.

In 2014, 31 workers died on the job in Hawaii—the most workers killed in the state since 2001. The job fatality rate for Hawaii was 5.0 per 100,000 workers, the highest fatality rate since the early 1990s.

In many of the states that saw a large increase in fatality rates in 2014, workplace violence and transportation incidents were major contributors.

Industry, Occupation and Event Comparisons

The construction sector had the largest number of fatal work injuries (899) in 2014, followed by transportation and warehousing (766) and agriculture, forestry, fishing and hunting (584). Industry sectors with the highest fatality rates were agriculture, forestry, fishing and hunting (25.6 per 100,000); mining, quarrying and oil and gas extraction (14.2); and transportation and warehousing (14.1).

The number of deaths in construction continued to increase in 2014, after years of decline with 828 deaths in 2013; the fatality rate increased from 9.7 in 2013 to 9.8 in 2014. In manufacturing, the number of fatalities was 349, an increase from 2013. The 2014 fatality rate in manufacturing increased from 2013, to 2.3 per 100,000 workers. Fatalities in the mining industry increased from 155 deaths in 2013 to 183 in 2014; the rate also increased from 12.4 to 14.2 per 100,000 workers.

Within the mining and extractive industries in 2014, BLS reported 144 deaths in oil and gas extraction—an all-time high. The fatality rate for oil and gas extraction was 15.6 per 100,000 workers, 10% higher than the overall fatality rate for mining, quarrying and oil and gas extraction.

According to separate statistics reported by the Mine Safety and Health Administration (MSHA), in 2014 there were 16 deaths in coal mining and 24 deaths in metal and nonmetal mining. Preliminary fatality data from MSHA for 2015 indicate it is the safest year in mining history, with a total of 28 mining deaths: 11 coal mine fatalities and 17 metal and nonmetal mine fatalities.

Transportation and material moving occupations had the highest number of fatalities, with 1,346 deaths, followed by construction and extraction occupations with 902 fatal injuries. The occupations at greatest risk of experiencing work-related fatalities were the same as the previous year, but with increased fatality rates: logging workers (110.9 per 100,000); fishers and related fishing workers (80.8 per 100,000); and aircraft pilots and flight engineers (64.0 per 100,000).

Transportation incidents, in particular roadway crashes, continue to be the leading cause of workplace deaths, responsible for 1,984 or 41% of all fatalities in 2014. Roadway incidents involving motorized land vehicles accounted for 24% of the fatal work injury total (1,157). Roadway incidents now are a leading cause of death for both men and women workers.

The number of fatalities from falls, slips or trips increased, with 818 fatal falls reported in 2014, compared with 724 fatal falls reported in 2013. Falls, slips or trips accounted for 17% of all fatalities in 2014, but accounted for 27% of fatalities among workers 65 years of age and older.

In 2014, male workers were at greater risk of death on the job than female workers, with a fatality rate of 5.6 per 100,000 workers, compared with a rate of 0.6 per 100,000 among women. Men accounted for 92% of job fatalities (4,454) and women accounted for 8% (367). For men, the leading causes were roadway incidents (24%), falls (17%) and contact with objects and equipment (15%).

For women, the leading causes of death were roadway incidents (20%), homicides (19%) and falls (16%). Homicides in the workplace continue to be a disproportionate cause of death for women (19%) compared with men (8%). Notably, fatalities due to falls, slips or trips increased among women workers and are about as proportional as they are for male workers.

In response to concerns about the safety and health risks associated with contract work, for the past four years BLS has reported fatalities that involve workers employed as contractors. In 2014, there were 802 fatalities among contract workers. This number has continued to increase since 2011, when BLS first reported 542 fatalities incurred by contract workers. Construction and extraction workers accounted for over half of the deaths among contract workers, with 416 fatalities reported among these workers. Falls were the biggest cause of contractor deaths (290), followed by contact with objects and equipment (175) and transportation incidents (171). Eighty-one percent of contract worker fatalities were wage and salary workers, not self-employed.

The job fatality rate for all self-employed workers—a group that lacks OSHA coverage—continues to remain high at 13.6 per 100,000 workers. In 2013, it was 11.8 per 100,000 workers.

Workplace Violence Fatalities

Workplace violence continues to be a leading cause of job fatalities in the United States, with 765 deaths caused by assaults and violent acts reported in 2014, accounting for 16% of all traumatic injury workplace deaths. There were 773 fatalities related to workplace violence in 2013. Seven hundred twenty-four (724) of the workplace violence deaths in 2014 were a result of violence by a person; 41 deaths resulted from incidents involving animals.

Homicide once again was a major cause of death, with 409 deaths reported in 2014, a small increase from the 404 homicides reported in 2013.

There were 280 workplace suicides in 2014. This number is similar to the 282 suicides recorded in 2013, and is a troubling trend, compared with 250 suicides in 2011 and 249 suicides in 2012. Toxic work environments that include workplace bullying and increased work pressures most likely have contributed to this growing problem. Workplace homicide (along with roadway incidents) was the leading cause of job death among women workers in 2014, accounting for 19% of their work-related fatalities (69 out of 367 deaths).

Black workers were at greatest risk of workplace homicide in 2014, experiencing 21% of all such deaths (88 out of 409), while representing only 11% of total employment (hours worked). Homicides among Asian (non-Hispanic) workers were also disproportionate related to overall employment: Asian workers experienced 11% of homicides, while representing 6% of employment. Among white workers, 200 homicides were reported (49% of all homicides), and among Latino workers there were 71 homicides reported (18% of all homicides).

Overall, homicides were responsible for 32% of all work-related deaths among Asian (non-Hispanic) workers (44 out of 137 deaths), compared with 19% among black workers (88 out of 475 deaths); 6% among white workers (200 out of 3,332 deaths) and 9% among Latino workers (71 out of 804 deaths).

The leading source of death from workplace homicide was assault by an assailant or suspect (216 deaths), and co-workers were responsible for 61 homicide deaths in 2014. Firearms were the primary weapons involved in workplace homicides, causing 308 workplace deaths.

The leading occupations for workplace homicide were supervisors of sales workers (58 deaths), motor vehicle operators (50 deaths) and law enforcement workers (46 deaths). Retail trade was the industry with the largest number of workplace homicides in 2014 (106 deaths), followed by local government (53 deaths), transportation and warehousing (47 deaths—taxi service accounted for 27 of these deaths), and accommodation and food services (47 deaths).

Hispanic or Latino and Immigrant Worker Fatalities

In 2014, Latino workers continued to be at increased risk of dying on the job, with a job fatality rate that is 9% greater than the overall job fatality rate of 3.4 per 100,000 workers.

In 2014, 804 Latino workers died on the job, a decrease from 817 in 2013. The fatality rate for Latino workers also decreased to 3.7 per 100,000 workers in 2014 from 3.9 in 2013.

Since 2001, when the rate of Latino worker fatalities reached an all-time high of 6.0 deaths per 100,000 workers, there has been a decline in work-related deaths among Latinos, and the job fatality rate among Latino workers has been reduced by 38%. At the same time, the overall job fatality rate has declined by 21%.

The states with the greatest number of Latino worker fatalities were Texas (206), California (130) and Florida (60). While the number of Latino worker deaths in California is still high, it is a marked decline from the 194 Latino worker fatalities in the state in 2013. In Texas, 47% of Latino deaths were immigrant workers and in California 68% of Latino deaths were immigrant workers. In Florida, immigrant workers now constitute 82% of Latino worker deaths.

The construction industry was responsible for the greatest number of Latino worker deaths (233), followed by administrative and support and waste management and remediation services (100, with 63% of these deaths in landscaping services), and transportation and warehousing (84, with 71% of these deaths in truck transportation). Latino immigrant worker deaths in the construction industry have increased 32% since 2010.

Events or exposures responsible for deaths of Latino workers were similar to the causes for all workers, with transportation incidents the leading event (289 deaths), followed by deaths from falls (178), contact with equipment (122) and violence (111). Deaths due to violence against Latino workers were similar to last year (113); both are an increase from 86 deaths in 2012. In 2014, 29 of these violent deaths were work-related suicides, 13 among immigrant workers.

The number of Latinos who died on the job in 2014 in support activities for oil and gas operations have increased more than fivefold since 2009, increasing each year and almost doubling from last year: seven in 2009, 11 in 2010, 14 in 2011, 23 in 2012, 24 in 2013 and 41 in 2014. The trend of increasing numbers of Latino deaths was also true for the entire oil and gas industry: 21 Latino deaths in 2009, 21 in 2010, 25 in 2011, 32 in 2012, 34 in 2013 and 59 in 2014.

In 2014, 64% of the fatalities (513 deaths) among Latino workers were among workers born outside of the United States. Fatalities among all foreign-born or immigrant workers continue to be a serious problem. In 2014, there were 846 workplace deaths reported among immigrant workers.

The four states with the greatest number of foreign-born worker fatalities in 2014 were California (137), Texas (124), Florida (72) and New York (66). Of the foreign-born workers who were injured fatally at work in 2014, 61% were Latino; 18% were white; 14% were Asian, Native Hawaiian or Pacific Islander; and 6% were black or African American. Of the foreign-born workers who were injured fatally at work in 2014, 40% were from Mexico.

The largest number of immigrant worker deaths was reported in the construction industry, at 217 out of 846 total deaths. Thirty-three% of the foreign-born worker deaths resulted from transportation incidents; 22% from falls, slips and trips; 21% from violent acts, and 14% from contact with objects and equipment.

Aging Workforce Fatalities

Working people are working longer and the number of workers ages 65 years and older has increased 117% since 1994. BLS estimates that this trend will continue and that by 2020, one in four workers will be 55 years or older.

In 2014, 35% of all fatalities (1,691 deaths) occurred in workers ages 55 years or older, with 684 of these deaths occurring in workers ages 65 years or older. Workers 65 years or older have three times the risk of dying on the job as the overall work population, with a fatality rate of 10.7 deaths per 100,000 workers. Workers ages 55–64 also have an increased fatality risk, with a fatality rate of 4.3 per 100,000 workers.

For workers ages 65 or older, the agriculture, forestry, fishing and hunting industry accounted for 29% of fatalities (200 deaths), followed by transportation and warehousing (84 deaths) and construction (76 deaths).

Transportation incidents were responsible for 41% of fatalities in workers ages 65 years or older (278 deaths). Workers 65 years or older are at greater risk of fatalities due to falls, slips and trips than the overall worker population. Falls, slips and trips accounted for 27% of all fatalities in workers at least 65 years of age, while the same events accounted for 17% of fatalities among the entire workforce.

Job Injuries and Illnesses

In 2014, as in the past few years, 3 million injuries and illnesses were reported in private-sector workplaces. The Bureau of Labor Statistics (BLS) survey also included data on work-related injuries and illnesses among state and local government workers: An additional 722,300 state and local government workers nationwide were injured or made sick in 2014, for a total of nearly 3.8 million reported work-related injuries and illnesses.

The national injury and illness rate for the private sector in 2014 was 3.2 per 100 workers, a decline from the rate reported by BLS for 2013 (3.3). The rate in 2014 for all industries, including state and local government workers, was lower at 3.4 per 100 workers than the 3.5 per 100 rate in 2013.

The health care and social assistance industry accounted for the greatest proportion (21%) of nonfatal workplace injuries and illnesses in private industry in 2014, followed by manufacturing (16%) and retail trade (14%). Workers in the construction industry experienced 7% of all private-sector injuries and illnesses in 2014.

The industry with the highest rate of nonfatal workplace injuries and illnesses was rope, cordage, twine, tire cord and tire fabric mills (private industry, 13.2 per 100 workers). Nursing and residential care facilities continue to have a high injury and illness rate (state government, 12.6), although it decreased from 2013 (13.7). These high-hazard industries are followed by fire protection (local government, 12.1), rendering and meat byproduct processing (private industry, 10.7) and skiing facilities (private industry, 10.7). State government nursing and residential care facilities continue to be an industry with a high injury rate—12.6 per 100 workers in 2014; 13.7 in 2013; 13.6 in 2012.

Thirty percent of all cases of injuries and illnesses involving days away from work, job transfer or restriction in private industry occurred in the trade, transportation and utilities industry, followed by education and health services at 19%, manufacturing at 14% and construction at 8%. Occupations in private industry with the highest number of injuries involving days away from work were heavy and tractor-trailer truck drivers; laborers and freight, stock and material hand movers; nursing assistants; stock clerks and order fillers; retail salespersons; janitors and cleaners; registered nurses; light truck or delivery service drivers; production workers; and maintenance repair workers.

Women workers suffered 38% of lost-time injuries reported (348,720 out of 916,440 cases) in 2014—the same proportion as the previous two years.

The leading industries for lost-time injuries and illnesses among women were hospitals, nursing and residential care facilities, and food services and drinking places. Nursing, psychiatric and home health aides; building cleaning workers; and retail sales workers experienced the greatest number of injuries. Overexertion was the major cause of these injuries, and the major injury type was sprains, strains and tears. These characteristics of lost-time injuries among women workers have been consistent over the past several years.

Among men, 560,970 cases resulting in days away from work were reported in 2014, accounting for 61% of total lost-time injuries. Specialty trade contracting, truck transportation, and administrative and support services reported the largest number of injuries. Among men, driver/sales workers and truck drivers, construction trades workers, and laborers and material movers were the leading occupations for lost-time injuries. For men, overexertion was the leading cause of injury, and sprains, strains and tears were the leading type of injury.

For all workers, overexertion and bodily reaction (including lifting and repetitive motion) was the leading exposure resulting in injury, responsible for 34% of all lost-time injury cases in private industry, followed by falls, slips and trips (27%), contact with objects (25%) and transportation incidents (5%).

In 2014, there were 37,750 lost-time injuries reported in private-sector workplaces resulting from violence, with 26,540 of these being injuries caused by a person. Women were at much greater risk of injuries from workplace violence, experiencing 66% of such injuries (17,490 out of 26,540 cases). Workers in the health care industry were particularly affected, with nursing and residential care facilities experiencing the greatest number of injuries from violence, followed by hospitals, social assistance and ambulatory health care services. Nursing, psychiatric and home health aides, registered nurses, and personal care aides were the occupations at greatest risk of injuries from violence, and patients were responsible for 49% of reported injuries related to violence.

The median number of days away from work for lost-time injury cases in private industry was nine days in 2014—one full day longer than in 2013, with 28.9% of all days away from work cases resulting in 31 or more days away from work.

Public Sector Workers

For 2014, BLS reported an injury and illness rate of 5.0 per 100 among state and local public sector workers, significantly higher than the reported rate of 3.2 per 100 among private sector workers. The injury and illness rate in 2014 for state government workers was 4.1 per 100 workers and 5.4 for local government workers. Nearly four in five injuries and illnesses reported in the public sector in 2014 occurred among local government workers.

The incidence rate for injuries and illnesses involving days away from work for public sector workers in all occupations was 167.4 cases per 10,000 full-time workers, 71% higher than the incidence rate for all private sector workers (97.8). The incidence rate for state government in 2014 was 170.3 cases per 10,000 full-time workers, slightly higher than the rate in 2013 of 160.1 cases per 10,000 workers. The 2014 incidence rate for local government was 166.4, similar to the injury and illness incidence rate involving days away from work in 2013. The rate for public sector landscaping and groundskeeping workers (795.1) was more than four times the incidence rate for private sector landscaping and groundskeeping workers (190.4), and public sector janitors and cleaners had an incidence rate that was more than two times that of their private sector counterparts.

Correctional officers continue to be at a high risk of injuries and illnesses, experiencing 16% of the total state government cases of injuries and illnesses in 2014. In local government, 14% of all

cases of injuries and illnesses are experienced by police and sheriff's patrol officers. In 2014 the incident rates for state correctional officers (491.2 cases per 10,000 workers) and local police and sheriff's patrol officers (519.9 cases per 10,000 workers) continued to be high and similar to 2013 rates.

Musculoskeletal disorders (MSDs) occur at a higher incidence rate in the public sector than the private sector. In 2014, the incidence rate for state government workers was 42.1 MSDs per 10,000 full-time workers, 32% higher than the private industry rate (31.9). The incidence rate for local government workers was 48.4 MSDs per 10,000 full-time workers, 52% higher than the private sector rate in 2014.

Workplace violence events disproportionately occur among public employees. The incidence rate of injuries caused by workplace violence was over 700% higher for state government workers (32.1 per 10,000 workers) than the rate for private industry workers (4.0). The incidence rate of violence for local government workers (22.0 per 10,000 workers) was 450% higher than for private industry workers.

In recent years OSHA began requiring federal employers to report injuries and illnesses in the same method as the private sector. Data on federal government workers is not yet publicly available.

Musculoskeletal Disorders

For 2014, BLS reported 298,460 MSD cases resulting in days away from work in the private sector, a continued decrease from last year (307,640). MSDs accounted for 32.3% of all injuries and illnesses involving days away from work, and remain the largest category of injury and illness.

The occupations reporting the highest number of MSDs involving days away from work in 2014 were laborers and freight, stock and material movers and handlers (21,480); nursing assistants (20,920); heavy and tractor-trailer truck drivers (17,030); and janitors and cleaners (14,530). The median number of days away from work for MSDs in 2014 was 13 days, an increase from 2013.

Industries with the highest incidence rates of musculoskeletal disorders involving days away from work in 2014 were air transportation (236.2 per 10,000 workers), couriers and messengers (162.8), nursing and residential care facilities (80.4), warehousing and storage (80.3), truck transportation (76.1), beverage and tobacco product manufacturing (75.5) and wood product manufacturing (68.3).

In 2014, the MSD incidence rate across all private sector industries in the United States was 31.9 per 10,000 workers, less than the rate in 2013 (33.5 per 10,000 workers).

It is important to recognize that the numbers and rates of MSDs reported by BLS represent only a part of the total MSD problem. The BLS MSD data are limited to cases involving one or more days away from work, the cases for which BLS collects detailed reports. Similar detailed reports are not collected for injuries and illnesses that do not involve lost work time or those that result in job transfer or restriction but not in time lost from work. Based on the percentage of days

away from work cases involving MSDs (32.3%) in 2014, there were an estimated 208,922 MSDs that resulted in restricted activity or job transfer; 507,382 MSD cases that resulted in days away from work, restricted activity or job transfer; and a total of 955,072 MSDs reported by private-sector employers.

Moreover, these figures do not include injuries suffered by public-sector workers or postal workers, nor do they reflect the underreporting of MSDs by employers. Based on studies and experience, OSHA has estimated that MSDs are understated by at least a factor of two—that is, for every MSD reported, there is another work-related MSD that is not recorded or reported.³ However, a study that examined undercounting of injuries and illnesses found that underreporting is even greater, with two additional injuries occurring for every injury that is reported.⁴

Reported Cases Understate Problem

In recent years there has been increased attention to and concern about the accuracy and completeness of the injury and illness data reported by employers that form the basis for the BLS Annual Survey on Occupational Injuries and Illnesses (SOII). While government statistics show that occupational injury and illness are declining, numerous studies have shown that government counts of occupational injury and illness are underestimated by as much as 69%.⁵ A study published in the April 2006 *Journal of Occupational and Environmental Medicine* that examined injury and illness reporting in Michigan made similar findings.⁶ The study compared injuries and illnesses reported in five different databases: the BLS Annual Survey, the OSHA Annual Survey, the Michigan Bureau of Workers' Compensation, the Michigan Occupational Disease reports and the OSHA Integrated Management Information System. It found that during the years 1999, 2000 and 2001, the BLS Annual Survey, which is based upon employers' OSHA logs, captured approximately 33% of injuries and 31% of illnesses reported in the various databases in the state of Michigan.

A similar study published in 2008 comparing the injuries reported to state workers' compensation systems with those reported to the Bureau of Labor Statistics Annual Survey in six states for the years 1998–2001 found similar results.⁷ The study, which examined reporting in Minnesota, New Mexico, Oregon, Washington, West Virginia and Wisconsin, found that the BLS survey captured 50% to 75% of the injuries and illnesses that occurred, missing half to a quarter of the injuries and illnesses that occurred in these states. As with the Michigan study, more injuries and illnesses were reported to the state workers' compensation systems than to the BLS survey.

³64 F.R. 65981 and 65 F.R. 68758.

⁴Rosenman, K.D., Kalush, A., Reilly, M.J., Gardiner, J.C., Reeves, M. and Luo, Z., "How Much Work-Related Injury and Illness is Missed by the Current National Surveillance System?" *Journal of Occupational and Environmental Medicine*, Vol. 48, No. 4, pp. 357–67, April 2006.

⁵Leigh, J. P., Marcin, J.P. and Miller, T.R., "An Estimate of the U.S. Government's Undercount of Nonfatal Occupational Injuries," *Journal of Occupational and Environmental Medicine*, Vol. 46, No. 1, January 2004.

⁶Rosenman, *op. cit.*

⁷Boden, L.I. and A. Ozonoff, "Capture-Recapture Estimates of Nonfatal Workplace Injuries and Illnesses," *Annals of Epidemiology*, Vol. 18, No. 6 (2008).

As a follow-up to these findings, BLS funded additional research to examine the subject of undercounting and underreporting of work-related injuries and illnesses. The results of this research were published in a special issue of the *American Journal of Industrial Medicine* in October 2014. The research studies focused on injury reporting in three states: California, Massachusetts and Washington. The studies used different methodologies, but all examined data reported to different systems (e.g., BLS SOII, state workers' compensation, and health care facility data). Each of the studies found that the BLS SOII significantly undercounted the injuries that occurred.

The study of California injury and illnesses which examined data from the BLS SOII and state workers' compensation found that the BLS survey captured 42.4% to 49.0% of work-related injuries and illnesses involving at least four days away from work. Workers' compensation reporting was more complete, capturing 76.9% to 77.6% of such injuries.⁸

A study of work-related amputations in Massachusetts found that the BLS SOII undercounted amputations by 48%. Further analysis of the data found that a number of amputations were reported in SOII as a different type of injury. But 24% of amputations were not reported at all.⁹

A study of injury and illness reporting in Washington State found similar problems with differences in injury classification between the BLS survey and the state workers' compensation system. An examination of injury cases that were reported to both BLS and workers' compensation found that the workers' compensation system identified 94% more amputations than the number of amputation injuries identified using BLS coding. But for musculoskeletal disorders (MSD), the researchers found that BLS coding identified 34% more MSD cases than those identified in the workers' compensation system.¹⁰

These studies and others have identified a number of factors that contribute to the undercount of workplace injuries and illnesses in the United States. The BLS survey excludes many categories of workers (self-employed individuals; farms with fewer than 11 employees; employers regulated by other federal safety and health laws; federal government agencies; and private household workers). This results in the exclusion of more than one in six workers from the BLS Annual Survey.¹¹ As recent studies have documented, there also are problems with the classification of injuries, which may lead to an underestimate of a particular type of injury (e.g., amputations). A lack of knowledge or confusion by employers of what injuries are required to be reported on the OSHA 300 injury log may also lead to underreporting.

But in addition to these problems, there also are incentives and disincentives that impact the reporting of injuries by employers and workers.

⁸Boden, L.I., "Capture-Recapture Estimates of the Undercount of Workplace Injuries and Illnesses: Sensitivity Analysis," *American Journal of Industrial Medicine*, Vol. 57, No. 10 (2014).

⁹Davis, L, Grattan, K, Tak, S, Bullock, L, Ozonoff, A and Boden, L., "Use of Multiple Data Sources for Surveillance of Work-related Amputations in Massachusetts, Comparisons with Official Estimates and Implications for National Surveillance," *American Journal of Industrial Medicine*, Vol. 57, No. 10, 2014.

¹⁰Wuellner, S. and Bonato, D, "Injury Classification Agreement in Linked Bureau of Labor Statistics and Workers' Compensation Data," *American Journal of Industrial Medicine*, Vol. 57, No. 10, 2014.

¹¹Leigh, J. Paul, Marcin, J.P. and Miller, T.R., "An Estimate of the U.S. Government's Undercount of Non-Fatal Occupational Injuries," *Journal of Occupational and Environmental Medicine*, Vol. 46, No. 1, 2004.

For employers, these incentives or disincentives may include:

- Concern about increased workers' compensation costs for increased reports of injuries;
- Fear of being denied government contracts due to high injury rates;
- Concern about being targeted by OSHA for inspection if a high injury rate is reported; and
- The promise of monetary bonuses for low injury rates.

There also are significant incentives and disincentives that impact the reporting of injuries and illnesses by workers. Many employers have implemented programs that provide financial rewards or prizes to individual workers or groups of workers for having no injuries or a low injury rate. Other employers have implemented programs or policies that discipline workers for having an injury, regardless of the cause of the injury. Discipline can include warnings, suspension or even termination. Other employers conduct drug testing on all workers who report an injury. All of these policies and practices can suppress the reporting of injuries by workers.

Foreign-born workers face additional barriers to reporting injuries. They may not know how or to whom to report the injury. Undocumented workers may fear being fired, harassed or reported to the U.S. Immigration and Customs Enforcement (ICE) agency.

The problem of injury and illness reporting has been the subject of a number of government reviews and investigations. In 2008, the House Education and Labor Committee held an oversight hearing to explore the extent, causes and impact of injury underreporting. In conjunction with the hearing, the committee released a report—"Hidden Tragedy: Underreporting of Workplace Injuries and Illnesses"—that documented the widespread problem of underreporting.¹²

In October 2009, the U.S. Government Accountability Office (GAO) released a report on an in-depth evaluation on injury and illness reporting and employer injury recordkeeping practices.¹³ The study found that OSHA's procedures to audit the accuracy of employer injury records were deficient, and that in many workplaces there were significant pressures on workers not to report injuries. As part of the review, GAO conducted a survey of more than 1,000 occupational physicians and other occupational health professionals. Sixty-seven% of those surveyed reported they had observed fear among workers of disciplinary action for reporting injuries. Fifty-three percent of the health practitioners reported pressure from company officials to downplay the seriousness of injuries and illnesses, and more than one-third had been asked by employers or workers not to provide needed medical treatment to keep the injury from being recorded.

In 2012, GAO released another report that examined safety incentive programs—"Workplace Safety and Health: Better OSHA Guidance Needed on Safety Incentive Programs."¹⁴ Based on a

¹²Majority Staff Report, House of Representatives, Committee on Education and Labor, "Hidden Tragedy: Underreporting of Workplace Injuries and Illnesses," June 2008.

¹³"Workplace Safety and Health: Enhancing OSHA's Records Audit Process Could Improve the Accuracy of Worker Injury and Illness Data," GAO-10-10, Oct. 15, 2009, www.gao.gov/new.items/d1010.pdf.

¹⁴"Workplace Safety and Health: Better OSHA Guidance Needed on Safety Incentive Programs," GAO-12-329, April 2012, www.gao.gov/assets/590/589961.pdf.

survey conducted in conjunction with the study, GAO estimated that three-quarters of U.S. manufacturers had safety incentive programs or other workplace policies that could affect workers' reporting of injuries and illnesses. Demerit systems were the most prevalent, reported by 69% of manufacturing firms, followed by post-incident drug testing (56% of firms), rate-based incentive programs (22% of firms) and behavior-based programs (14% of firms). Many employers had more than one kind of program or policy in place.

As discussed later in this report, OSHA also has been addressing the issue of injury reporting through its whistleblower program, issuing policy guidance on the types of employer safety incentive and disincentive policies and practices that could constitute illegal retaliation under Section 11(c) and other whistleblower statutes, and stepping up enforcement under these laws. However, enforcement under 11(c) addresses only individual cases of retaliation, not more systematic practices by employers. Unions have urged OSHA to adopt specific prohibitions on employer policies, practices and programs that discourage injury reporting through regulatory action. OSHA now is considering such action as part of the rulemaking on injury reporting.

Cost of Occupational Injuries and Deaths

The cost of occupational injuries and deaths in the United States is staggering, estimated at \$250 billion to \$370 billion a year, according to two recent studies.

The 2016 Workplace Safety Index, published by Liberty Mutual Insurance, estimated the cost of disabling workplace injuries to employers at \$62 billion a year—more than \$1 billion per week.¹⁵ This analysis, based on 2013 BLS data, estimated direct costs to employers (medical and lost wage payments) of injuries resulting in cases involving six or more days of lost time. If indirect costs also are taken into account, the overall costs are much higher. Based on calculations used in Liberty Mutual's previous Safety Index, the data indicate that businesses pay between \$186 billion and \$372 billion annually in direct and indirect (overtime, training and lost productivity) costs on workers' compensation losses (indirect costs are estimated to be two to five times direct costs).¹⁶ It is important to note that Liberty Mutual bases its cost estimates on BLS injury data. Thus all of the problems of underreporting in the BLS system apply to the Liberty Mutual cost estimates as well.

A 2011 comprehensive study on the "Economic Burden of Occupational Injury and Illness in the United States" by J. Paul Leigh at the University of California, Davis found similar results. The study examined a broad range of data sources, including data from the BLS, the Centers for Disease Control and Prevention, the National Council on Compensation Insurance and the Healthcare Cost and Utilization Project, to determine the cost of fatal and nonfatal occupational injuries and illnesses for 2007. This study estimated the medical and indirect (productivity) costs of workplace injuries and illnesses at \$250 billion annually, more than the cost of cancer.¹⁷

¹⁵2016 Liberty Mutual Workplace Safety Index. Report available at http://www.libertymutualgroup.com/omapps/ContentServer?c=cms_document&pagename=LMGResearchInstitute%2Fcms_document%2FShowDoc&cid=1240029888340

¹⁶April 16, 2002, News Release, Liberty Mutual Research Institute for Safety.

¹⁷Leigh, J. P., "Economic Burden of Occupational Injury and Illness in the United States," *The Milbank Quarterly*, Vol. 89, No. 4, 2011.

A follow-up analysis by Leigh found that workers' compensation covered only 21% of these costs, with 13% being born by private health insurance, 11% by the federal government and 5% by state and local governments. The majority of the costs—50%—were borne by workers and the family members.¹⁸

A 2015 report by the Occupational Safety and Health Administration—“Adding Inequality to Injury: The Costs of Failing to Protect Workers on the Job”—outlined how work-related injuries have devastating impacts on workers and their families. According to the report, workers who are injured on the job suffer great economic loss. Even after receiving workers' compensation benefits, injured workers' incomes are, on average, nearly \$31,000 lower over 10 years than if they had not suffered an injury.¹⁹

One of the major contributors to the severe loss of income is the gross deficiencies and inequities in the workers' compensation system, which continues to be governed by 50 different state laws. A 2015 multipart series by Pro Publica and National Public Radio (NPR) exposed the failure of the workers' compensation system to provide fair and timely compensation for workers hurt on the job.²⁰ The series—“Insult to Injury: America's Vanishing Worker Protections”—was based on a yearlong investigation which found that over the last decade there has been a systematic effort by insurers and employers to weaken workers' compensation benefits for injured workers. Since 2003, legislators in 33 states have passed legislation reducing benefits or limiting eligibility. The benefits provided to workers vary widely across different states. For example, the maximum compensation for loss of an eye is \$261,525 in Pennsylvania, but only \$27,280 in Alabama. In many states, employers have great control over medical decisions. Workers are not allowed to pick their own doctors, and employers can demand review by “independent medical examiners” picked by employers who can challenge medical determinations regarding the work-relatedness of the condition, the degree of disability and prescribed medical treatment. According to Pro Publica, all of these factors have contributed to the demolition of the workers' compensation system and left injured workers and their families and society at large bearing the costs of their injuries.

OSHA ENFORCEMENT AND COVERAGE

When it comes to job safety enforcement and coverage, it is clear that OSHA lacks sufficient resources to protect workers adequately. A combination of too few OSHA inspectors and low penalties makes the threat of an OSHA inspection hollow for too many employers. Eight million workers still are without OSHA coverage.

¹⁸Leigh, J.P. and Marcin, J., “Workers' Compensation benefits and Shifting Costs for Occupational Injuries and Illnesses,” *Journal of Occupational and Environmental Medicine*, Vol. 54, No. 4, 2012.

¹⁹U.S. Department of Labor. Occupational Safety and Health Administration. “Adding Inequality to Injury: The Costs of Failing to Protect Workers on the Job.” 2015. www.dol.gov/osha/report/20150304-inequality.pdf.

²⁰Pro Publica and National Public Radio, “Insult to Injury: America's Vanishing Worker Protections.” March 2015. www.propublica.org/series/workers-compensation.

Compliance Staffing and Inspections

The Obama administration has moved to enhance enforcement and increase the inspection staff. But OSHA's resources remain inadequate to meet the challenge of ensuring safe working conditions for America's workers. In FY 2015, there were at most 1,840 federal and state OSHA inspectors responsible for enforcing the law at more than 8 million workplaces, fewer than the previous year.²¹ In FY 2015, the 805 federal OSHA inspectors conducted 35,385 inspections (782 fewer than in FY 2014), and the 1,035 inspectors in state OSHA agencies combined conducted 41,892 inspections (5,325 fewer than in FY 2014).²²

The majority of federal OSHA inspections were in the construction industry (49%), followed by manufacturing (23%), and transportation and warehousing (5%). The health care and social assistance sector, which accounted for 21% of private-sector work-related injuries and illnesses, and 16% of private-sector employment in 2014, received less than 2% of federal OSHA inspections in FY 2014.

In the OSHA state plans, the construction industry accounted for 43% of inspections and the manufacturing industry accounted for 17%. But the state plans, which cover both public- and private-sector workers, conducted more of their inspections in administrative support and waste management (6%), public administration (5%), retail trade (5%), agriculture, forestry, fishing and hunting (4%), and health care and social assistance (4%) than federal OSHA.

At its current staffing and inspection levels, it would take federal OSHA, on average, 145 years to inspect each workplace under its jurisdiction just once. In 17 states (South Dakota, Arkansas, Florida, Delaware, Louisiana, California, Montana, South Carolina, Nebraska, Iowa, Idaho, Georgia, Texas, West Virginia, Massachusetts, North Dakota and Utah), it would take 150 years or more for OSHA to pay a single visit to each workplace. In 20 states, it would take between 100 and 149 years to visit each workplace once. Inspection frequency generally is better in states with OSHA-approved plans, yet still is far from satisfactory. In these states, it now would take the state OSHA plans a combined 97 years to inspect each worksite under state jurisdiction once.

The current level of federal and state OSHA inspectors provides one inspector for every 74,760 workers. This compares with the benchmark of one labor inspector for every 10,000 workers recommended by the International Labor Organization for industrialized countries.²³ In the states of Arkansas, Delaware, Florida, Idaho, Louisiana, Massachusetts, Missouri, Montana, Nebraska, Texas and West Virginia, the ratio of inspectors to employees is greater than 1 per 100,000 workers, with Missouri having the highest ratio at 1 inspector per 222,000 workers.

²¹This reflects the number of federal inspectors plus the number of inspectors "on board" reflected in the FY 2015 state plan grant applications. It does not include compliance supervisors.

²²In FY2016, OSHA created a new inspection weighting protocol under which time-intensive inspections involving complicated hazards like ergonomics, workplace violence and chemical process safety management are given greater weight than shorter-duration, routine inspections. This was done to increase the focus on quality inspections rather than the number of inspections conducted.

²³International Labor Office, *Strategies and Practice for Labor Inspection*, G.B. 297/ESP/3, Geneva, November 2006. The ILO benchmark for labor inspectors is one inspector per 10,000 workers in industrial market economies.

Federal OSHA's ability to provide protection to workers has greatly diminished over the years. When the AFL-CIO issued its first *Death on the Job: The Toll of Neglect* report in 1992, federal OSHA could inspect workplaces under its jurisdiction once every 84 years, compared with once every 145 years at the present time. Since the passage of the OSH Act, the number of workplaces and number of workers under OSHA's jurisdiction has nearly doubled, while at the same time the number of OSHA staff and OSHA inspectors has been reduced. In 1975, federal OSHA had a total of 2,435 staff (inspectors and all other OSHA staff) and 1,102 inspectors responsible for the safety and health of 67.8 million workers at more than 3.9 million establishments. In FY 2016, there were 2,173 federal OSHA staff responsible for the safety and health of 136 million workers at 9.4 million workplaces.

At the peak of federal OSHA staffing in 1980, there were 2,951 total staff and 1,469 federal OSHA inspectors (including supervisors). The ratio of OSHA inspectors per 1 million workers was 14.8. By 2014, there were only 986 federal OSHA inspectors (including supervisors), or 6.7 inspectors per 1 million workers.

Violations and Penalties

Penalties for significant violations of the law have increased under the Obama administration. In October 2010, OSHA announced a new penalty policy to more appropriately reflect the gravity of the violation and provide a greater deterrence. The new policy changed the formulas for calculating penalties to utilize more fully OSHA's statutory authority for assessing penalties, (e.g., a \$7,000 maximum penalty for serious violations and a maximum of \$70,000 for willful and repeat violations), and to ensure that deep discounts are not given for the most serious of violations. The result of the 2010 change has been to double the average federal OSHA proposed penalty for serious violations (i.e., from approximately \$1,000 to \$2,000). A violation is considered "serious" if it poses a substantial probability of death or serious physical harm to workers.

In FY 2015, the average penalty for a serious violation for federal OSHA was \$2,148, compared with an average penalty of \$1,972 for such violations in FY 2014 and \$1,895 in FY 2013. In the state OSHA plans, the average penalty for a serious violation remains low; in FY 2015 it was \$1,317, an increase from \$1,043 in FY 2014. In FY 2015, the trend of lowest and highest average penalties for serious violations continued. Oregon had the lowest average penalty for serious violations at \$422, while California had the highest average penalty at \$6,543 per serious violation.

The number of willful violations cited by federal OSHA increased from 433 in FY 2014 to 527 in FY 2015. The average penalty for willful violations increased from \$40,358 per willful violation in FY 2014 to \$40,951 in FY 2015. For repeat violations, the average penalty per violation increased from \$6,909 in FY 2014 to \$7,786 in FY 2015. In states with OSHA plans, in FY 2015, there were 74 willful violations issued, with an average penalty of \$33,553 per violation, and 1,519 repeat violations, with an average penalty of \$2,869 per violation.

The Obama administration has moved to strengthen OSHA enforcement, with an emphasis on the most serious violations and repeat violators. In FY 2015, there were 169 significant cases (classified by OSHA as those cases having total penalties of greater than \$100,000) under federal

OSHA's jurisdiction, an increase from the 143 significant cases in FY 2014, but fewer than the 219 significant cases in FY 2012.

OSHA enforcement in cases involving worker fatalities, while somewhat improved, remains too weak. According to OSHA inspection data, the average total penalty in a fatality case in FY 2015 was just \$9,271 for federal and state OSHA plans combined. However, averages can distort the real picture of fatality penalties in situations in which large cases with very high penalties raise the averages substantially. Using median penalties that capture the point where half of the penalties are below and half the penalties are above the median provides a better picture of the typical penalties in cases involving worker deaths.

The median penalty per fatality investigation conducted in FY 2015 was \$7,000 for federal OSHA and the median current penalty was \$3,500 for the state OSHA plans combined, according to enforcement data provided by OSHA in March 2016. This is lower than both the median penalty of \$7,000 for federal OSHA in FY 2015, and the median penalty of \$4,438 in FY 2014 for the state OSHA plans. These data, both averages and median penalties, also include enforcement cases that still are under contest, and it is likely that after settlements and final resolution, these penalty levels will be much lower.

A state-by-state analysis of fatality investigations shows that penalties in cases involving worker deaths vary widely from state to state. Oregon had the lowest median current penalty for fatality investigations with \$1,330 in penalties assessed, followed by South Carolina (\$1,813), Minnesota (\$1,825), Utah (\$1,875) and Nevada (\$2,400). Hawaii had the highest median current penalty (\$33,425), followed by Wyoming (\$28,660), Montana (\$21,200), Maine (\$20,020) and New York (\$14,000).

In November 2015, Congress passed legislation that increases the maximum penalties provided under the Occupational Safety and Health Act and other laws. The Bipartisan Budget Act of 2015 included the "Federal Civil Penalties Inflation Adjustment Act Improvements Act of 2015," which directs federal agencies to increase statutory penalties to adjust for inflation. This legislation extends coverage of the Inflation Adjustment Act to OSHA, which was one of a few agencies not previously covered. Under the new law, OSHA is authorized to raise maximum penalties by approximately 80%, the amount of inflation since the last time OSHA penalties were raised in 1990.

With these adjustments, the maximum penalty for a serious violation will increase from \$7,000 to approximately \$12,500 and the maximum penalty for a willful or repeat violation will increase from \$70,000 to \$125,000. The new penalty amounts must be implemented by regulation by July 1, 2016. State OSHA plans will be required to adjust their maximum penalties to conform to the new federal penalty amounts.

Enforcement Initiatives

In 2010 OSHA launched the Severe Violator Enforcement Program (SVEP) to focus on the most persistent and egregious violators. SVEP replaced the Bush administration's Enhanced Enforcement Program (EEP), which had been criticized severely by the U.S. Department of Labor's Office of Inspector General as deficient, particularly with respect to follow-up of

employers identified as needing enhanced oversight.²⁴ SVEP focuses on employers who have a history of willful, repeated or failure-to-abate violations, particularly related to fatalities, major occupational safety and health hazards, or underreporting of injuries or illnesses. The program provides for more frequent inspections, public notification and other measures at workplaces identified as severe violators, and provides for enhanced scrutiny of other establishments of the same employer.

As of Feb. 1, 2016, OSHA had logged 520 SVEP cases, of which 318 (61%) were in the construction industry. One hundred twenty-eight (25%) of the SVEP cases were related to fatalities, and 36 (7%) of SVEP cases resulted in egregious violations.²⁵

A 2013 review conducted by OSHA found the program was working for many of the employers identified as severe violators. The review, which covered SVEP cases identified as of Sept. 30, 2011, and follow-up status as of February 2012, found that mandatory follow-up inspections were conducted, and enhanced settlement provisions requiring measures beyond basic hazard abatement were being implemented.²⁶

However, there were significant difficulties implementing the program in the construction industry, which accounts for the majority of SVEP cases. In particular, it was difficult to conduct follow-ups of construction employers. Only 25% of attempted follow-ups of SVEP construction employers were successful (17 out of 69 cases). OSHA found the primary reason was the small size and mobility of many of these employers. In addition, a number of these employers had gone out of business.

Another impediment to conducting follow-ups in the construction industry as well as in other industries was contests of violations. (Follow-up inspections are conducted only after a final order has been issued). OSHA found that the overall contest rate of SVEP cases was 44%, compared with the national contest rate of 8% for the period studied. Until these contests were resolved, under the program no follow-up was possible.

In 2013, OSHA launched a Temporary Worker Initiative (TWI) to help prevent injuries and illnesses among temporary workers. The number of temporary workers—those employed by a staffing agency and supplied to a host employer—has grown, and many of these workers may be at increased risk of injury. As part of the initiative, OSHA issued a policy statement making clear that both staffing agencies and host employers have responsibility to comply with the law and regulations, although the assignment of these responsibilities may vary depending on the particular circumstances.²⁷ OSHA has taken numerous enforcement actions for violations

²⁴U.S. Department of Labor, Office of Inspector General—Office of Audit, “Employers with Reported Fatalities Were Not Always Properly Identified and Inspected Under OSHA’s Enhanced Enforcement Program,” March 31, 2009, Report No. 02-09-203-10-105.

²⁵Galassi, Thomas, Director, Directorate of Enforcement Programs, U.S. Department of Labor, OSHA. PowerPoint Presentation, American Bar Association, 2016 Midwinter Meeting, Occupational Safety and Health Law Committee, March 2016.

²⁶Occupational Safety and Health Administration, Severe Violator Enforcement Program White Paper, January 2013, www.osha.gov/dep/enforcement/svep_white_paper.pdf.

²⁷Galassi, Thomas, Director, Directorate of Enforcement Programs, U.S. Department of Labor, OSHA. Memorandum for Regional Administrators. Policy Background on the Temporary Worker Initiative, July 15, 2014.

involving temporary workers, often holding both the staffing agency and the host employer responsible for the failure to comply. For example in November 2015, OSHA cited a Texas furniture manufacturer, MooreCo Inc., for repeated violations for lockout/tagout and other violations after temporary workers were seriously injured. OSHA proposed \$122,500 for these violations and placed MooreCo Inc. in the Severe Violator Enforcement Program. The temporary staffing agency, Manpower Group US Inc., was also cited for repeat violations, with \$38,500 in proposed penalties.²⁸

OSHA also has broadened its corporate-wide enforcement efforts, seeking to require correction of similar hazards and violations at multiple establishments of the inspected employer. While OSHA has utilized enterprise-wide abatement for many years through corporate-wide settlement agreements, in 2010 in an enforcement action against the U.S. Postal Service, OSHA sought an order from the Occupational Safety and Health Review Commission to require 350 locations of the USPS to correct electrical safety violations, based upon inspection findings at multiple locations. In 2013, USPS and OSHA reached a settlement agreement, under which the Postal Service revised its policies and procedures on electrical work, and enhanced training and personal protective equipment for this work. In 2012, OSHA filed a similar complaint against DeMoulas Super Markets Inc., a New England-based grocery chain, seeking to protect employees from fall and laceration hazards at 60 of the company's stores in Massachusetts and New Hampshire. And in 2015, following multiple inspections that identified significant safety violations at freight terminals operated by Central Transport LLC, OSHA filed a complaint seeking to have the employer remove defective forklifts from all of its locations nationwide. The employer asked the Review Commission to block this action, but in December 2015 the administrative law judge rejected this motion, ruling that the case should proceed to trial.

In 2015, OSHA initiated a number of special emphasis enforcement programs at the national, regional and local level to address hazards of particular concern. The new initiatives included a national emphasis program to address amputation hazards, launched in August 2015, which targets inspections to industries with high rates of amputations and those with past histories of violations of standards that address amputation hazards. At the regional level, in October 2015, OSHA launched new emphasis programs in the poultry processing industry in Region Four (Alabama, Florida, Georgia and Mississippi) and Region Six (Arkansas, Louisiana, Oklahoma and Texas). These new emphasis programs are designed to address the high rate of musculoskeletal disorders in the poultry industry and other serious hazards including chemical process safety and machine guarding. In addition, since the beginning of FY 2015, OSHA has conducted over one hundred poultry industry inspections in other regions which have identified serious safety and health problems and resulted in numerous citations and large penalties at a number of facilities.

In 2015, OSHA implemented new enforcement procedures for the revised injury and illnesses reporting requirements adopted in 2014, which require employers to report work-related fatalities to the agency within eight hours and work-related in-patient hospitalizations, amputations and

²⁸U.S. Department of Labor, Office of Public Affairs, OSHA Regional News Release, Region 6, "Furniture manufacturers, staffing agency expose workers to hazards twice in 14 months: MooreCo Inc., Manpower Group US Inc. in Temple, Texas face proposed fines of \$161K," Nov. 13, 2015, https://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=NEWS_RELEASES&p_id=29043

losses of an eye within 24 hours. Under the procedures, OSHA collects information at the time of the report, and then makes a determination whether to conduct an on-site inspection or a rapid response investigation—requiring the employer to conduct its own investigation and report back to OSHA on its findings and actions to correct any identified violations.

Results from the first year of the enforcement program indicate that the new severe injury reporting requirements are helping OSHA to identify hazardous workplaces not previously inspected and take action to get hazards corrected. According to a recent report issued by the agency, in 2015 employers notified OSHA of 10,388 incidents involving severe non-fatal injuries.²⁹ There were 7,636 hospitalization reports and 2,644 amputation reports. The manufacturing industry had the highest number of severe injury reports, followed by construction. Sub-industries with high numbers of reports include oil and gas well servicing, the Postal Service, hospitals and grocery stores. OSHA estimates that many severe injuries—perhaps 50% or more—are not being reported.

OSHA responded to 38% of all the severe injury reports in 2015 with an on-site inspection, but for 62% of reports employers were asked to conduct their own investigation. OSHA reports that most employers who conduct their own investigations move quickly to correct hazards. However, there have been a number of cases where OSHA inspections have found significant continuing violations that put workers at risk. But to date, OSHA has not yet reported comprehensive detailed results on these inspections and investigations.

OSHA recently increased its penalty for failing to report severe injuries to OSHA from \$1,000 to as much as \$7,000, the maximum penalty currently allowed for serious and other than serious violations. This amount will increase when the higher penalty levels approved by Congress take effect later in 2016.

Criminal Enforcement

Criminal enforcement under the Occupational Safety and Health Act has been rare. According to information provided by the Department of Labor (DOL), since the passage of the act in 1970, only 89 cases have been prosecuted under the act, with defendants serving a total of 110 months in jail. During this time, there were more than 395,000 workplace fatalities, according to National Safety Council and BLS data, about 20% of which were investigated by federal OSHA.^{30, 31}

By comparison, EPA reported in FY 2015 that there were 213 criminal enforcement cases initiated under federal environmental laws and 185 defendants charged, resulting in 129 years of jail time and \$200 million in fines and restitution—more cases, fines and jail time in one year

²⁹Michaels, David, Assistant Secretary of Labor for Occupational Safety and Health, Year One of OSHA's Severe Injury Reporting Program: An Impact Evaluation, March 17, 2016. <https://www.osha.gov/injuryreport/2015.pdf>.

³⁰"Criminal Referrals by OSHA to DOJ or US Attorneys or Significant Aid to Local Prosecutors (Updated April 8, 2016)," Information compiled by Office of the Solicitor of Labor. The information for the early years of the statute is incomplete and may not include all cases prosecuted.

³¹In addition to cases prosecuted under the Occupational Safety and Health Act and the U.S. federal criminal code (18 U.S.C. 1001), state and local prosecutors have prosecuted employers for deaths and injuries to workers under their state and local laws. There is no complete accounting of these cases.

than during OSHA's entire history.³² The aggressive use of criminal penalties for enforcement of environmental laws and the real potential for jail time for corporate officials serve as a powerful deterrent.

The criminal penalty provisions of the OSH Act are woefully inadequate. Criminal enforcement is limited to those cases in which a willful violation results in a worker's death or where false statements in required reporting are made. The maximum penalty is six months in jail, making these cases misdemeanors. Criminal penalties are not available in cases in which workers are endangered or seriously injured, but no death occurs. This is in contrast to federal environmental laws, where criminal penalties apply in cases where there is "knowing endangerment" and the law makes such violations felonies. As a result of the weak criminal penalties under the OSH Act, few cases are prosecuted by the Justice Department under the statute. Instead, in some instances DOJ will prosecute OSHA cases under other federal statutes with stronger criminal provisions if those laws have been violated.

In response to the OSH Act's severe limitations, in 2005 the Justice Department launched a Worker Endangerment Initiative. This initiative focuses on companies that put workers in danger while violating environmental laws, and prosecutes such employers using the much tougher criminal provisions of environmental statutes. Under the initiative, the Justice Department has prosecuted McWane Inc., a major manufacturer of cast iron pipe, responsible for the deaths of several workers; Motiva Enterprises for negligently endangering workers in an explosion that killed one worker and caused major environmental releases; British Petroleum for a 2005 explosion at a Texas refinery that killed 15 workers; W.R. Grace for knowing endangerment of workers exposed to asbestos-contaminated vermiculite in Libby, Mont.; and Tyson Foods for exposing employees to hydrogen sulfide gas, which resulted in the poisoning of several workers at multiple facilities. These prosecutions have resulted in many convictions and significant jail time for defendants.^{33,34}

In recent years, the Department of Labor (DOL) has placed a greater emphasis on criminal enforcement, referring more cases for criminal prosecution to the Department of Justice and U.S. attorneys. In addition, DOL has expanded assistance to local prosecutors in the investigation and prosecution of cases involving worker deaths and injuries. In FY 2015, DOL referred or assisted with the criminal prosecution of 12 cases involving worker deaths or injuries compared with 27 cases in FY 2014.

In December 2015 the Department of Labor and Department of Justice announced an expansion of the Worker Endangerment Initiative and entered into a formal memorandum of understanding (MOU) to provide for greater coordination of efforts on cases involving potential criminal

³²<https://www.epa.gov/enforcement/enforcement-annual-results-numbers-glance-fiscal-year-fy-2015>

³³"Frontline: A Dangerous Business Revisited," March 2008, www.pbs.org/wgbh/pages/frontline/mcwane/penalty/initiative.html.

³⁴Goldsmith, Andrew D., Worker Endangerment Initiative, PowerPoint Presentation, American Bar Association, Occupational Safety and Health Committee, Miami Beach, Fla., February 2009.

prosecution for worker safety.^{35, 36} Under the MOU, the Justice Department’s Environment and Natural Resources Divisions and the U.S. Attorney’s Offices will work with OSHA and other DOL agencies to investigate and prosecute worker endangerment violations utilizing all available statutes. This initiative is intended to enhance criminal penalties for worker safety violations, which under the Occupational Safety and Health Act are treated only as a misdemeanor. It is hoped that this expanded DOJ involvement and utilization of other statutes can lead to more meaningful criminal penalties and increase deterrence.

While this increased emphasis on criminal enforcement is most welcome, criminal prosecutions for worker safety violations still are very rare. As long as the criminal penalty provisions of the OSH Act remain so weak, it is likely that there will be few criminal prosecutions for job safety violations, even those that result in worker deaths.

Voluntary Programs

Under the Bush administration, OSHA placed great emphasis on the expansion of its voluntary programs, particularly OSHA’s program of alliances and Voluntary Protection Programs (VPP). The resources devoted to these programs increased, and the number of voluntary programs increased significantly. Under the Obama administration, the emphasis has changed to focus more on strengthening enforcement programs. Voluntary programs still are part of the OSHA program, but are viewed as supplemental to, not a replacement for, enforcement. In FY 2015, OSHA formed 18 new alliances, down from 25 in FY 2014. The total number of active alliances in FY 2015 is 226, down from 348 in FY 2014. In OSHA’s Voluntary Protection Program (VPP), 46 new VPP sites were approved in FY 2015, up from 28 in FY 2014, bringing the total number of federal OSHA VPP sites at the end of FY 2015 to 1,442.³⁷

Coverage

The current OSHA law still does not cover 8 million state and local government employees in 24 states and the District of Columbia, although these workers encounter the same hazards as private-sector workers and in many states have a higher rate of injury than their private-sector counterparts.^{38, 39}

Similarly, millions who work in the transportation and agriculture industries and at Department of Energy contract facilities lack full protection under the OSH Act. These workers theoretically are covered by other laws, which in practice have failed to provide equivalent protection.

³⁵Department of Justice, Office of Public Affairs News Release, “The Departments of Justice and Labor Announce Expansion of Worker Endangerment Initiative to Address Environmental and Worker Safety Violations,” December 17, 2015, <https://www.justice.gov/opa/pr/departments-justice-and-labor-announce-expansion-worker-endangerment-initiative-address>.

³⁶Memorandum of Understanding between the U.S. Departments of Labor and Justice on Criminal Prosecutions of Worker Safety Laws, December 17, 2015. <https://www.justice.gov/enrd/file/800526/download>.

³⁷OSHA Directorate of Cooperative and State Programs.

³⁸Under the OSH Act, states may operate their own OSHA programs. Twenty-one states and one territory have state OSHA programs covering both public- and private-sector workers. Connecticut, Illinois, Maine, New Jersey and New York have state programs covering state and local employees only. Maine’s state program went into effect August 5, 2015.

³⁹Some states provide safety and health protection to public employees under state laws that are not OSHA-approved plans. In 2014, the commonwealth of Massachusetts enacted legislation establishing legally binding safety and health protections for public employees, but this law has not been submitted for federal OSHA approval.

In 2013, there was major progress in extending OSHA coverage to flight attendants when the Federal Aviation Administration (FAA) rescinded a longstanding policy and ceded jurisdiction on a number of key safety and health issues to OSHA. Specifically, FAA issued a new policy that extended OSHA regulations and jurisdiction on hazard communication, bloodborne pathogens, hearing conservation, recordkeeping and access to employee exposure and medical records to cabin crews.⁴⁰

This policy action was the culmination of decades of effort by the flight attendant unions to secure OSHA protections for flight attendants. It finally was implemented in response to the FAA Modernization and Reform Act of 2012 (PL 112-95).

Whistleblower Protection

Under the Obama administration, the Department of Labor has made the protection of a “worker’s voice” a priority initiative. As part of this effort, OSHA has undertaken a major effort to strengthen the Whistleblower Protection Program to protect workers who raise job safety issues and exercise other rights from employer retaliation.

In addition to enforcing the anti-discrimination provisions under section 11(c) of the Occupational Safety and Health Act, OSHA has the responsibility to enforce the whistleblower provisions of 21 other statutes, ranging from the Federal Rail Safety Act to the Sarbanes-Oxley finance law. A number of these laws deal with safety and health matters, but others do not. Many of these are relatively new statutes that have been assigned to OSHA for whistleblower enforcement without any accompanying increase in resources.

To strengthen anti-retaliation protections, in 2012 the Obama administration elevated the whistleblower program, creating a new separate Directorate of Whistleblower Protection Programs (WPP) at OSHA. (Previously, the program had been part of OSHA’s enforcement directorate.) This new office is charged with overseeing and coordinating whistleblower policy and enforcement, and reports directly to the OSHA assistant secretary’s office. To improve the timeliness and consistency of case handling, the agency updated and revised its investigators’ manual and has trained staff on policies and procedures.

In December 2012, OSHA announced the formation of a new Whistleblower Protection Advisory Committee (WPAC) composed of representatives from labor, management and the public. The new committee is charged with overseeing and providing advice and guidance to OSHA on its whistleblower protection program.

OSHA also has created a separate budget line item for the whistleblower program that allows the amount of resources dedicated to this effort to be easily ascertained. For FY 2016, the budget for the program is \$17.5 million, with 135 staff assigned, the same as in FY 2015. For FY 2017, the Obama administration has requested a \$4.1 million increase and 22 more positions, similar to the increase requested in FY 2016.

⁴⁰Department of Transportation, Federal Aviation Administration, Occupational Safety and Health Standards for Cabin Crew Members, Aug. 21, 2013.

While the whistleblower program enforces the anti-retaliation provisions of 22 statutes, the OSHA 11(c) program is responsible for the majority of cases. In FY 2015, 60% of the cases received (2,031 out of 3,310) were 11(c) complaints. Large numbers of whistleblower cases also were filed under the Surface Transportation Act (419), the Federal Rail Safety Act (283) and the Sarbanes-Oxley Act (162).

In the last several years, the number of whistleblower complaints received by the agency has grown significantly, from 2,160 complaints in FY 2009 to 3,310 complaints received in FY 2015. While some of this increase is a result of the new statutes assigned to the program, the majority of the increase has been in the number of 11(c) cases filed under the OSH Act. From FY 2009 to FY 2015, the number of 11(c) cases received increased by 60%, from 1,267 cases to 2,031 cases.⁴¹ It is not clear whether this represents an increase in workplace discrimination for safety and health activities or an increase in filing due to enhanced outreach on worker rights by the Obama administration.

As a result of the increase in the number of filed cases, the backlog in cases has grown, and is a serious problem. Overall, the case backlog has increased from 1,247 cases in FY 2009 to 2,407 in FY 2015. For OSHA 11(c) cases, the number of backlogged or pending cases has grown from 663 to 1,361 during the same time period. After steadily increasing since FY 2009, the amount of time for cases to be resolved decreased in FY2015 to an average of 291 days from an average of 305 days in FY 2014. For OSHA 11(c) cases, the average time to complete cases also decreased slightly from 283 days in FY 2014 to 277 days in FY 2015. The long amount of time to resolve cases is particularly problematic under the OSH Act and those other statutes where there is no opportunity for preliminary reinstatement for workers while the case is being resolved, nor a separate right of action for the complainant to pursue the case on his or her own if the secretary fails or declines to act. Other whistleblower statutes provide for these rights. During this time, workers are left in limbo with no recourse or redress for discriminatory actions.

Under the Obama administration, OSHA has stepped up its enforcement actions under the Whistleblower Protection Program. In FY 2015, 848 retaliation cases were determined to be meritorious, with a total of \$25.4 million in remedies (back pay, damages, etc.) secured, compared with 450 merit cases and \$13.2 million in damages in FY 2009. The biggest awards were for cases brought under the Sarbanes-Oxley Act and the Federal Rail Safety Act, which in FY 2015 had average damages of \$311,435 and \$90,169 per case. For the 11(c) program, damage awards were much smaller. In FY 2014, there were 560 meritorious 11(c) cases, with damages averaging \$7,939 per case.

OSHA also has been addressing the issue of injury reporting through its whistleblower program, in particular programs and policies that retaliate against workers or discourage workers from reporting injuries. In recent years there has been a growth in employers' use of such programs in a wide range of industries.

Under OSHA regulations, reporting work-related injuries is a protected activity, and employers are prohibited from retaliating against workers who report injuries. The Federal Rail Safety Act,

⁴¹Occupational Safety and Health Administration, OSHA Whistleblower Investigation Data, FY 2009–FY 2015.

for which OSHA enforces the whistleblower provisions, also includes specific provisions that prohibit retaliation against workers who report injuries.

OSHA whistleblower enforcement data confirms that retaliation against workers who report job injuries is a significant problem. In FY 2015, 489 out of 3,278 discrimination cases processed involved retaliation for injury reporting. OSHA 11(c) cases accounted for 290 of these claims, of which 105 (36%) were found to have merit. Claims under the Federal Rail Safety Act accounted for 182 of the injury reporting retaliation cases, of which 49 cases (27%) were deemed meritorious.

To address the problems of retaliation related to injury reporting, OSHA issued a policy memorandum in March 2012 to provide guidance to the field.⁴² The memo outlines the types of employer safety incentive and disincentive policies and practices that could constitute illegal retaliation under section 11(c) and other whistleblower statutes, and the steps that investigators should take in responding to complaints of employer retaliation for injury reporting. The memo does not expand current rights or protections, but reaffirms that reporting an injury is a protected activity, and employer actions that interfere with or discourage the reporting of injuries are illegal. This policy memo has been very helpful to workers and unions in addressing employer practices that discourage workers from reporting injuries.

Over the past several years, in response to a growing number of worker anti-retaliation claims, OSHA has taken a number of actions to enforce against retaliation for reporting injuries. In a number of high-profile cases in the rail industry, including cases at Burlington Northern Santa Fe (BNSF) Railway, Union Pacific and Metro-North Railroad, OSHA has taken aggressive action, ordering reinstatement of workers and the cessation of injury discipline policies, and seeking punitive damages.

Action also has been taken against other employers under 11(c) of the OSH Act for similar practices. In a major enforcement action in February 2014, the Department of Labor filed suit under 11(c) against AT&T on behalf of 13 workers who had received unpaid suspensions after reporting work-related injuries. In addition, the states of Michigan and Indiana have taken enforcement actions against AT&T for retaliating against workers for reporting job injuries. And in February 2016, federal OSHA filed suit against US Steel Corporation for disciplining two workers for not immediately reporting workplace injuries, even though the workers were unaware that they had suffered injuries since symptoms didn't develop for several days, charging that the discipline of the two employees was a violation of 11(c).

These enforcement actions have brought about changes by some employers. For example, in January 2013, OSHA signed an accord with the BNSF Railway Co. under which BNSF agreed to revise several policies that OSHA alleged dissuaded workers from reporting job injuries and violated the whistleblower provisions of the Federal Railroad Safety Act. Under the agreement, BNSF agreed to eliminate a policy that assigned points to employees who sustained work-related

⁴²Richard E. Fairfax, Deputy Assistant Secretary, Memorandum for Regional Administrators, Whistleblower Program Managers, "Employer Safety Incentive and Disincentive Policies and Practices," March 12, 2012.

injuries, and changed the company's disciplinary policy so that job injuries no longer are a factor in determining probations.

As a result of the lawsuits filed by the U.S. Department of Labor against AT&T for retaliating against workers for reporting injuries and grievances filed by the Communications Workers of America (CWA), the union representing the AT&T workers, the company changed its policy in 2014. The new policy requires an investigation and review of each accident /injury to determine whether the employee is at fault. If the investigation determines the worker is not at fault, no disciplinary action is taken. AT&T also agreed to fully compensate all affected CWA Ohio members/technicians and remove all references to related disciplinary action from their personnel files.

Even with the significant improvements that have been made in the whistleblower program, serious problems remain. The funding for this program is woefully inadequate. As noted above, OSHA now is responsible for enforcing the anti-retaliation provisions of 22 statutes. Few additional resources have been provided by Congress to enforce the additional statutes for which the agency has been given enforcement responsibility.

But the biggest impediments to protecting workers from retaliation for exercising their job safety rights are the deficiencies in the OSH Act itself. The anti-retaliation provisions of the law were adopted 45 years ago and are weak and outdated compared with more recently adopted statutes. The OSH Act provides for only 30 days for filing a discrimination complaint, compared with 180 days provided by a number of other laws. If a worker fails to file a complaint within this time period, he or she simply is out of luck.

The OSH Act also has extremely limited procedures for the enforcement of discrimination cases. If there is no agreement or settlement of the findings, the secretary of labor must bring cases in U.S. District Court. Most other statutes provide for an administrative proceeding. The formal procedures of the OSH Act mean that meritorious cases may be dropped, simply because the solicitor of labor does not have the resources to pursue them. Moreover, unlike other statutes, such as the Mine Safety and Health Act and Surface Transportation Assistance Act, the OSH Act does not allow a complainant the right to pursue the case on his or own if the secretary fails to act within a designated time frame or declines to act at all. And the OSH Act does not provide for preliminary reinstatement, as other statutes such as the Mine Safety Act do, which means that workers who are retaliated against for exercising their job safety rights have no remedy while final action on their case is pending. These deficiencies in the whistleblower program can be remedied only through improvements in the OSH Act itself.

REGULATORY ACTION

When the Obama administration took office in 2009, OSHA set an ambitious agenda to develop and issue much-needed standards to protect workers from life-threatening safety and health hazards, focusing first on rules that were stalled under the Bush administration. New standards to protect workers from silica dust, combustible dust and infectious diseases, and to require

employers to set up safety and health programs to find and fix hazards, were top priorities, and OSHA began to move forward to develop and issue important, long-overdue rules.

In August 2010, OSHA completed the cranes and derricks in construction rule that was recommended by a negotiated rulemaking committee in 2004. In May 2011, OSHA finalized the standard on general working conditions in shipyard employment that had been proposed in 2007.

And in March 2012, OSHA finalized the standard on global harmonization that was proposed in 2009. The new Hazard Communication–Globally Harmonized System (GHS) rule adopts an international hazard identification and warning system for hazardous substances, so that U.S. labels, signs and safety data sheets contain similar information to those in other countries.

With the election of a Republican majority in the U.S. House of Representatives in 2010, the regulatory environment became extremely hostile. Business opposition to regulations intensified, and Republicans in Congress launched a major assault on regulations, trying to block the development and issuance of new rules and roll back existing protections.

In the face of this intense assault, progress on needed protections stalled, and many OSHA safety and health rules were delayed. The Office of Management and Budget blocked or delayed important safety and health rules, holding them for regulatory review for many months or even years. The most significant delay involved the development and promulgation of OSHA's silica dust standard, a rule to protect workers from silicosis, lung cancer and other diseases. The draft silica proposed rule was held for review by OMB for two and one-half years—from February 2011 until August 2013, when it finally was released. Under the executive order on regulatory review, OMB is supposed to complete its review within 120 days.

OSHA's rule to require employers to identify which recorded injuries and illnesses are musculoskeletal disorders (MSDs) by checking a box on the OSHA 300 log also was delayed and sidetracked. This provision was included in the 2000 OSHA recordkeeping rule repealed by the Bush administration. The purpose of this rule is to enhance information about the extent and nature of musculoskeletal disorders (MSDs). It is similar to a requirement that existed for 30 years prior to the repeal action by the Bush administration. This MSD injury reporting rule was scheduled for final promulgation in February 2011, but was delayed by the Obama administration due to objections from the business community to seek further input from small businesses, which was done during summer 2011. In December 2011, business groups and Republicans succeeded in winning a rider in OSHA's FY 2012 funding bill that prohibited OSHA from acting on this rule. That prohibition expired in January 2014, but to date there has been no further action on this rule.

The development of OSHA rules on injury and illness prevention programs, combustible dust and other hazards also was delayed. A small business review panel on the draft injury and illness prevention program rule, initiated in January 2012, soon was suspended and remains on hold. In 2015, OSHA issued draft updated Safety and Health Program Management Guidelines to replace voluntary guidelines issued in 1989, acknowledging that the injury and illness prevention program rule would not move forward during the Obama administration. The new draft guidelines are an improvement over the existing guidelines and include important new provisions

of coordination and communication at multi-employer worksites, but are no substitute for a mandatory standard. The new guidelines are expected to be finalized in summer 2016.

In the summer of 2013, the *de facto* freeze on safety and health regulations began to thaw.

As noted above, in August 2013, OMB released the proposed silica rule, which was published by OSHA on Sept. 12, 2013. The proposed rule reduced the permissible exposure limit to 50 $\mu\text{g}/\text{m}^3$ from the current levels of 100 $\mu\text{g}/\text{m}^3$ in general industry and 250 $\mu\text{g}/\text{m}^3$ in construction. OSHA held three weeks of public hearings on the proposed rule and provided nearly a year to submit comments. Unions and public health groups strongly supported the proposed silica rule. But business groups lined up in solid opposition, claiming the rule was not needed and too costly. In 2014 and 2015, Congressional opponents tried to block the rule through an appropriations rider, but were unsuccessful.

On March 25, 2016, 19 years after the silica rulemaking began, OSHA issued the final silica rule, which included a standard for general industry and a separate standard for construction. The final standards set the permissible exposure limit at 50 $\mu\text{g}/\text{m}^3$ and included provisions on exposure monitoring, medical surveillance and training. Under the construction standard, employers who implement specified control measures for individual tasks set forth in the standard are relieved of obligations to conduct exposure monitoring. This approach will make it much easier for workers and employers to determine if appropriate controls have been implemented. Construction employers must come into compliance with the standard by June 2017; employers in general industry are given until June 2018; and employers involved with fracking have until June 2021 to comply. OSHA estimates that the standards when implemented will save 642 lives a year and prevent 918 cases of silicosis annually.

Numerous industry groups have filed legal challenges to the final standards. In addition, there are likely to be attempts in Congress to delay or even overturn the new silica standards through a rider on OSHA's FY 2017 appropriations or through a resolution of disapproval under the Congressional Review Act. Even if such measures pass the Congress, President Obama is certain to veto them.

In addition to the silica rule, OSHA also has moved forward on a number of other regulatory actions. In November 2013, a proposed rule to improve tracking of workplace injuries and illnesses was issued that would require employers to report establishment-specific injury and illness information to OSHA. This rule builds on the OSHA Data Initiative, which since 1995 has required approximately 80,000 employers in high-hazard industries to submit establishment-specific injury information annually to OSHA, which has been used for inspection targeting. The new rule would expand the reporting of summary data on injuries and illnesses to 440,000 establishments, and for establishments of more 250 employees, also would require quarterly reporting of detailed case-specific data on all injuries and illnesses. To address issues of injury underreporting, the unions have urged OSHA to include provisions in the final rule that would prohibit employer policies and practices that discourage injury reporting or retaliate against workers for reporting injuries. Final action on this rule is expected in spring 2016.

In December 2014, OSHA issued another rule on injury record-keeping and reporting. This final rule updated the list of industries that are subject to OSHA's injury record-keeping requirements and those that are exempt based upon the injury rates in the industries. The rule also expanded the requirement to report injuries and fatalities directly to OSHA. Specifically, the new rule requires employers to report all work-related fatalities to OSHA within eight hours, and injuries resulting in in-patient hospitalization as well as amputations and loss of an eye within 24 hours of the event. This rule went into effect in the federal OSHA states in January 2015. State OSHA plans were required to adopt the rule by January 2016.

OSHA has also taken action to update its regulations on chemical process safety in response to the 2013 fertilizer plant explosion in West, Texas, which killed 15 people, the majority of them volunteer responders. The explosion revealed major gaps in the regulation and oversight of facilities that manufacture, use or store hazardous chemicals. The West, Texas fertilizer plant was not subject to the OSHA Process Safety Management (PSM) standard, and had not been inspected by OSHA since 1985. Ammonium nitrate, the cause of the explosion, is not subject to EPA's Risk Management Plan (RMP) rules, and the local authorities had no information about the chemicals being stored at the facility. Following the West, Texas tragedy, in August 2013, President Obama issued Executive Order 13650, directing OSHA, the Environmental Protection Agency and the Department of Homeland Security to develop recommendations for improving chemical facility safety and security, including possible new regulations to fill gaps in protection.

In December 2013, OSHA issued a request for information on process safety management and prevention of major chemical accidents. The agency is now working on a draft proposed rule, and had planned to initiate the required small business review in June 2015, but that has not occurred. In the meantime, in March 2016, EPA issued proposed changes to its RMP rule, which include enhanced process hazard analysis for some processes and enhanced emergency preparedness requirements. EPA hopes to finalize the rule this year.

OSHA has also moved forward on some other key rules. In 2014 OSHA promulgated a final safety rule on electric power generation, transmission and distribution, and in 2015 issued a final standard on confined space entry in construction—both of which had been in the works for years. OSHA had also planned to finalize a new standard on walking and working surfaces in 2015, but that standard was delayed to complete the silica rule, and will hopefully be finalized this summer.

In August 2015, the agency proposed a new rule on the toxic metal beryllium, which would reduce permissible exposure levels to $0.2 \mu\text{g}/\text{m}^3$ from $2 \mu\text{g}/\text{m}^3$. OSHA first proposed to tighten the beryllium standard in 1975, but that rulemaking was abandoned due to industry opposition. This new standard was in response to a joint recommendation by the United Steelworkers and Materion-Brush, the major beryllium producer. Public hearings on the new proposal were held in March 2014, but it is unclear whether a final standard will be issued before the end of the Obama administration.

Even with this progress, a number of other important rules are still awaiting action, including proposed rules on infectious diseases, combustible dust and back-over protection. OSHA hopes to initiate small business review panels on both the combustible dust and back-over rules this

year, and issue the proposed infectious disease rule before January 2017. But given the history of delays in the rulemaking process, it is uncertain what further progress will be made in the remaining months of the administration.

KEY ISSUES IN SAFETY AND HEALTH: STATUS AND PROGRESS

There are a large number of safety and health hazards and issues in need of attention. But there are several issues that pose broad and growing threats to workers that warrant special focus and action.

Workplace Violence

Workplace violence is a major cause of death on the job. In 2014, 724 workers were killed as a result of violence by a person at work, with 409 of these deaths attributed to workplace homicides. Among workplace homicides, women are four times more likely to be killed by a relative or domestic partner than men. Suicides in the workplace have increased by 12% since 2011. Toxic work environments that include workplace bullying and increased work pressures most likely have contributed to this growing problem.

Fatalities alone do not paint a complete or accurate picture of the workplace violence problem. Violent but nonfatal attacks on workers are serious, underreported, and often leave workers physically and emotionally scarred for life. The Bureau of Labor Statistics reported that in private industry, more than 26,000 workplace violence incidents led to injuries involving days away from work in 2014. Women workers are at greatest risk of injuries from workplace violence, experiencing more than two-thirds of such reported injuries.

This is the fourth successive year that injuries related to violence have increased. The injury rate for workplace violence has been increasing even as the overall injury and illness rate in the U.S. has been decreasing. Workplace violence rates in health care and social assistance agencies have been increasing at an especially alarming rate. In 2014, the health care and social assistance sector accounted for 52% of the workplace violence events leading to injuries involving days away from work. Private sector rates of workplace violence in health care and social assistance (for injuries and illnesses leading to days away from work) increased 64% between 2005 and 2014. Rates for hospitals increased 110%; and for psychiatric hospitals in particular (since 2006—the first year BLS recorded data for this group), rates increased 102%. Since 2005, the rate of violence in nursing and residential care facilities has increased 50%, in home health services 130%, and social assistance 57%.

Psychiatric aides and psychiatric technicians were among the leading occupations (i.e., those with the highest rates) suffering injuries requiring days away from work as a result of a workplace violence event, and a patient was the responsible party in nearly half of the cases. Home health is now playing a larger role in health care delivery, and personal care aides are now the third-highest occupation for lost-time injuries that result from workplace violence.

It is not just a problem in the private sector. Survey results released in 2012 by the Merit Systems Protection Board reported that one in eight federal government employees witnessed workplace

violence.⁴³ The majority of these accounts came from the Veterans Administration, where 23% of employees said they had witnessed at least one act of violence at work over a two-year period. In health care specifically, state government health care and social service workers continue to have extraordinarily high rates: In 2014, the rates for state government workers in health care and social assistance were nearly 10 times higher than the private sector (135.2 vs. 4.4, per 10,000 workers). In state government, psychiatric aides experienced violence at a rate of 636.6 per 10,000 workers; psychiatric technicians at 383.0 per 10,000 workers; and health care support occupations at 255.1 per 10,000 workers.

These rates only reflect injuries that led to days away from work, not all violence-related injuries that are reported or all that occur.

In the past several years, OSHA has taken a number of non-regulatory actions to address the growing problem of workplace violence. In April 2015, OSHA updated its “Guidelines for Preventing Workplace Violence for Healthcare and Social Service Workers,”⁴⁴ a comprehensive document outlining the contents of violence prevention programs using hazard assessments and the hierarchy of controls. Over the past several years, OSHA has issued several guidance documents for other high-risk populations, including “Recommendations for Workplace Violence Prevention Programs in Late-Night Retail Establishments,” and a fact sheet, “Preventing Violence against Taxi and For-Hire Drivers.”^{45,46}

In 2011, the agency issued a directive, “Enforcement Procedures for Investigating or Inspecting Incidents of Workplace Violence,” which establishes uniform procedures for OSHA field staff when responding to incidents and complaints of workplace violence.⁴⁷ The directive also applies when conducting inspections in industries considered vulnerable to workplace violence, such as health care and social service settings, and late-night retail establishments. Since this directive was issued, OSHA has taken 33 enforcement actions resulting in citations under the general duty clause (section 5(a)(1)) for workplace violence hazards. This directive is expected to be updated by the end of 2016.

On Feb. 1, 2016, federal OSHA Region VIII (Billings, Bismarck, Sioux Falls, Denver and Englewood) instituted a regional emphasis program that describes policies and procedures for enforcement efforts outlined in Residential Mental Intellectual and Developmental Disability Facilities (NAICS 623210).⁴⁸ This program will focus more OSHA resources on more effective

⁴³U.S. Merit Systems Protection Board, “Employee Perceptions of Federal Workplace Violence: A Report to the President and the Congress of the United States,” 2012,

www.mspb.gov/netsearch/viewdocs.aspx?docnumber=759001&version=761840&application=ACROBAT.

⁴⁴U.S. Department of Labor, OSHA, “Guidelines for Preventing Workplace Violence for Healthcare and Social Service Workers,” April 2015, www.osha.gov/Publications/osha3148.pdf.

⁴⁵U.S. Department of Labor, OSHA, “Recommendations for Workplace Violence Prevention Programs in Late-Night Retail Establishments,” OSHA 3153-12R. 2009. <https://www.osha.gov/Publications/osha3153.pdf>.

⁴⁶U.S. Department of Labor, OSHA, “Preventing Violence against Taxi and For-Hire Drivers,” April 2010. <https://www.osha.gov/Publications/taxi-driver-violence-factsheet.pdf>.

⁴⁷U.S. Department of Labor, OSHA, “Enforcement Procedures for Investigating or Inspecting Workplace Violence.” CPL 02-01-052. Sept. 8, 2011.

https://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=DIRECTIVES&p_id=5055.

⁴⁸U.S. Department of Labor, OSHA, “Regional Notice 16-09 (CPL04-01),” Feb. 1, 2016, https://www.osha.gov/dep/leps/RegionVIII/reg8_fy2016_workplace_violence_16-09_CPL_04-01.pdf.

investigations related to workplace violence in this industry, which OSHA selected based on its history of enforcement activity in this region. The program evaluation for this emphasis program is expected by Oct. 31, 2016.

In FY 2015, OSHA strengthened workplace violence hazard enforcement through the general duty clause (section 5(a)(1)), conducting 85 workplace violence inspections—eight of these were fatality or catastrophe investigations, and 26 of the inspections were assigned penalties that resulted in a current median penalty of only \$3,637. This compares to 90 inspections in FY 2014 and five inspections in FY 2013. When there are workplace violence hazards, but general duty clauses citations cannot be issued, OSHA can issue a Hazard Alert Letter to warn employers about the dangers of workplace violence and identify corrective actions. OSHA issued HALs in 18 investigations in FY 2015, an increase from seven investigations total in FY 2014 and FY 2013.

The 2015 Death on the Job Report featured the case of a young woman who was stabbed to death by a client in 2012 while working as a caseworker for Integra Health Management Inc. Following an investigation, OSHA cited Integra for a serious violation of Section 5(a)(1) of the Occupational Safety and Health Act, the general duty clause, for exposing employees to “the hazard of being physically assaulted by members with a history of violent behavior.” Actions the employer should have taken include methods to: create a written workplace violence prevention program, determine behavioral history of new and transferred clients, develop procedures to communicate to staff any incident of workplace violence among clients, ensure sufficient training, implement and maintain a buddy system based on a hazard assessment, provide staff with rapid assistance when needed and establish a liaison with law enforcement representatives. OSHA also cited the company for an other-than-serious violation of 29 C.F.R. § 1904.39(a) for failing to report the employee's death in a timely manner to OSHA. OSHA sought a total of \$10,500 in penalties.

In June 2015, Administrative Law Judge Dennis L. Phillips affirmed the citations and the penalties as proposed,⁴⁹ but Integra appealed the serious citation to the Occupational Safety and Health Review Commission, and the OSHRC granted the petition for discretionary review in July 2015. The commission sought comments on the extent to which a health care provider should be able to protect its employees from the potential violent acts of third parties, and whether an employer's failure to do so should be considered a violation of the general duty clause.

The AFL-CIO and several unions filed briefs in support of OSHA's citations against Integra, citing OSHA's clear authority over enforcing violence prevention in the workplace and experience in workplace violence recognition and abatement measures, as well as industry recognition of the problem.⁵⁰ The client in the Integra case had a clear history of violent behavior and a criminal history; and the case worker had inadequate training: She had been hired just a few months before and hadn't completed her safety training when she was assigned the case and

⁴⁹Secretary of Labor, Complainant, v. Integra Health Management, Inc., Respondent. OSHRC Docket No. 13-1124. June 22, 2015. <http://op.bna.com.s3.amazonaws.com/env.nsf/r%3FOpen%3drdae-a2lt26>.

⁵⁰Brief of the American Federation of Labor and Congress of Industrial Organizations As *Amicus Curiae* in Support of Complainant, Secretary Of Labor. OSHRC Docket No. 13-1124. Dec. 18, 2015.

began her attempts to speak with the potential client at his home, after documenting that she did not feel safe going to his home alone. The commission has not yet issued a ruling on the case. Its ruling could affect OSHA's ability to use the general duty clause to cite employers for workplace violence violations, and to set a specific workplace violence standard.

A number of states have taken action to adopt laws, standards and policies on workplace violence, which vary widely. New York has the most comprehensive workplace violence standard, but it only covers the public sector. Public employers are required to develop and implement programs to prevent and minimize workplace violence.

Connecticut, Illinois, Maryland, New Jersey and Washington have adopted some form of legislation specifically focused on health care settings. The Maryland legislation, which was implemented on Oct. 1, 2014, addresses all workplace injuries in health care facilities by means of an overall safety program, which includes workplace violence hazards. The measure requires public and private health care employers to establish a safety committee consisting of management and employees; and it requires the committee to establish a safety program that consists of: 1) a written policy; 2) an annual comprehensive risk assessment and recommendations for injury prevention; 3) a process for reporting, responding to and tracking incidents of workplace injuries; and 4) regular safety and health training.

California is expected to release its final, comprehensive standard in 2016 to protect health care workers in the public and private sectors from workplace violence; this standard was developed through consensus rulemaking and is expected to be a good model for a comprehensive regulatory approach to combat workplace violence. This process also aims to update the state's "Guidelines for Workplace Security," "Guidelines for Security & Safety of Health Care and Community Service Workers" and "Model Injury & Illness Prevention Program for Workplace Security" sample programs issued with California's Injury and Illness Prevention Program, which went into effect in 1991.⁵¹

Since 1991, California has required employers to establish a comprehensive safety and health program, including identification and evaluation of hazards and procedures, and training to address the hazards identified; this has been used to enforce the reduction of workplace violence hazards. California also separately requires a security and safety assessment and protection plan in hospitals. In response to a 2014 petition from a teacher, the California Occupational Safety and Health Standards Board tasked an advisory committee to examine workplace violence prevention in all California workplaces, specifically in educational workplaces, which is currently in process.

State and local ordinances are an important piece in addressing workplace policies and practices related to workplace violence, but a stronger, more comprehensive solution is needed to address this growing national problem.

There is no federal standard for workplace violence, even though it is the second leading cause of job-related death in the United States. In December 2013, Reps. George Miller (D-CA) and

⁵¹California Department of Industrial Relations. Title 8, Division 1, Chapter 4, Subchapter 7, §3203. <https://www.dir.ca.gov/title8/3203.html>.

Joseph Courtney (D-CT) requested the Government Accountability Office examine existing workplace violence prevention programs and policies, and the need for these programs and policies, including the need for an OSHA workplace violence prevention standard for health care and social service workers. In April 2016, Rep. Bobby Scott (D-NC), ranking member of the Committee on Education and the Workforce, and colleagues announced the GAO's findings to the public. The report found that workplace violence is a serious and growing concern for 15 million health care workers and can be prevented through violence prevention programs.⁵² The GAO recommended that OSHA improve workplace violence citation training for its inspectors, follow up on hazard alert letters, assess current efforts, and determine whether regulatory action should be taken by the agency.

Health care unions supported the release of the report and have called for OSHA to address workplace violence through a federal standard.

Infectious Diseases

The 2014–2015 Ebola epidemic in West Africa was a grim reminder that infectious diseases pose a significant threat to the public and workers, and these outbreaks quickly can become global threats. This Ebola outbreak, believed to have begun with the infection of a small boy in Guinea in December 2013, was the largest recorded. According to the World Health Organization, as of March 27, 2016, there have been 28,646 cases of Ebola disease reported, resulting in 11,323 deaths. The vast majority of these cases have been in Guinea, Liberia and Sierra Leone.⁵³

Health care workers caring for Ebola victims were particularly hard hit. As of mid-April 2015, 864 health care workers in the African countries most affected had contracted the disease. The mortality rate among these workers was high—58% of health care workers infected with the virus (503 individuals) died.

Health care workers in other countries were also affected. Here in the United States, two health care workers at Texas Presbyterian Hospital in Dallas—Nina Pham and Amber Vinson—were infected in September 2014 after caring for an Ebola-infected patient from Liberia who came to the hospital for emergency treatment. Those health care workers were treated at specialized Ebola treatment centers and survived. The Ebola-infected patient—Thomas Eric Duncan—died.

The investigation of the outbreak at Texas Presbyterian revealed the hospital was totally unprepared to care for patients infected with Ebola or other serious infectious disease. There were no protocols in place; health care workers were not provided adequate protective equipment; and workers had not been trained. Following the outbreak in Texas, it became clear that the vast majority of health care facilities were unprepared to receive and care for patients with serious infectious diseases.

Subsequent to the Texas outbreak, the Centers for Disease Control and Prevention strengthened its recommended infection control measures for caring for Ebola patients and issued guidance on

⁵²U.S. Government Accountability Office, “Additional Efforts Needed to Help Protect Health Care Workers from Workplace Violence,” March 2016, <http://www.gao.gov/products/GAO-16-11>.

⁵³World Health Organization, Ebola Situation Report, 27 March 2016, <http://apps.who.int/ebola/current-situation/ebola-situation-report-30-march-2016>.

protecting other workers who could be exposed to the Ebola virus in the course of their work (e.g., emergency medical technicians, waste workers and airline workers). But CDC guidelines are only voluntary and have no legal force.

The lack of preparedness for responding to the Ebola virus was reminiscent of the experience during the 2009 H1N1 influenza pandemic. Despite years of planning, many health care facilities were not prepared for the pandemic flu outbreak. Many health care employers had not trained workers about potential risks and appropriate protective measures prior to the outbreak, and failed to do so after the pandemic emerged. In many facilities, there were inadequate supplies of respirators and other protective equipment, and the proper equipment was not provided. Infection control procedures failed to separate infected patients from those who were not infected, particularly during the earlier stages of the outbreak. In the wake of the pandemic, billions of federal dollars were spent to improve preparedness, particularly for health care facilities. Unfortunately, the experience with the Ebola outbreak indicates those efforts were not sufficient or lasting.

The experience with the H1N1 pandemic influenza virus underscored—and the recent Ebola outbreak reinforced—the need for mandatory measures to protect health care workers and other workers at high risk from exposures to infectious diseases. OSHA has some standards to help protect workers from Ebola and other infectious diseases, including rules on bloodborne pathogens, personal protective equipment and respiratory protection. But there is no broad-based infectious disease standard to protect workers from airborne or contact-transmissible diseases such as tuberculosis, influenza or MERS.⁵⁴ Previous efforts by OSHA to strengthen protections for health care workers, including a standard on tuberculosis, never reached fruition.

Following the H1N1 pandemic, OSHA began work on an infectious disease standard. In 2010, OSHA issued a request for information to seek input from the public on the rule. In 2014, after several delays, the draft proposed rule was reviewed by a small business panel as required by the Small Business Regulatory Enforcement Fairness Act. OSHA is currently working on preparing the proposed rule and the required analysis for publication, which must be submitted for OMB review before being issued. At this point it is unclear whether the proposed infectious disease rule will be issued before the end of the Obama administration. But hopefully, this current effort to establish mandatory measures to protect health care workers and other workers from infectious diseases will move forward, and a final rule will be put in place before the next serious infectious disease outbreak occurs.

Oil and Gas Extraction

The rapid growth in the oil and gas industry during the past decade has been accompanied by a sharp increase in fatal injuries for workers. According to the BLS, between 2003 and 2014, 1,333 oil and gas workers were killed on the job. In 2014, the number of worker deaths in the industry reached an all-time high, with 144 oil and gas workers killed by on-the-job injuries. This is

⁵⁴In May 2009, the California Occupational Safety and Health Standards Board adopted a Cal/OSHA standard on airborne transmissible diseases. The standard covers all airborne transmissible infectious diseases. It requires covered health care employers to develop infection control plans, to utilize engineering controls and appropriate personal protective equipment, to provide training for workers, and to develop and implement isolation plans for identified or suspected cases.

similar to 2012, when 142 workers were killed in the oil and gas industry. In 2013, 112 workers died, but fatalities in this industry still accounted for 72% of the total fatalities in the mining sector.^{55,56} In 2014, oil and gas fatalities accounted for 79% of the total fatalities in mining.

BLS fatality rate data for the oil and gas industry is limited, but available data during the past six years reported fatality rates in oil and gas extraction that are four to seven times the national fatality rate. In a number of years, the fatality rate in oil and gas exceeded the fatality rate in coal mining.⁵⁷ In 2014, the fatality rate for the oil and gas sector was 15.6 per 100,000 workers; the overall mining sector rate was 14.1 per 100,000 workers. Not surprisingly, states with large amounts of oil and gas activity also have high job fatality rates.

A large number of oil and gas worker deaths have been among Latino and immigrant workers. Since 2009, 192 Latino workers have died performing oil and gas work. In 2012, 11 of the 12 Latino workers who died in North Dakota were immigrant workers. More than one-third of Latino worker deaths in mining, quarrying, and oil and gas were immigrant workers. The number of Latinos who died on the job in support activities for oil and gas operations increased more than fivefold from 2009 to 2014, increasing each year and nearly doubling from 2013 to 2014, with seven deaths in 2009, 11 in 2010, 14 in 2011, 23 in 2012, 24 in 2013 and 41 in 2014. The trend of increasing numbers of Latino deaths was also true for the entire oil and gas industry: 21 Latino deaths in 2009, 21 in 2010, 25 in 2011, 32 in 2012, 34 in 2013 and 59 in 2014.

In FY 2015, federal OSHA conducted 603 inspections and issued 11 HALs in the oil and gas extraction industries. In FY 2013 and FY 2014, OSHA conducted a total of 1,326 inspections and issued five HALs. In FY 2015, OSHA investigated 52 fatalities and catastrophes related to oil and gas, compared with 44 fatalities between Oct. 1, 2013, and Dec. 31, 2014.

Many oil and gas workers die from traumatic injuries from being struck by or against tools or equipment, caught in/between equipment, falls, electric shock, and burns or scalds. Deaths from acute chemical exposures often are undercounted. While some deaths are appropriately classified as inhalation deaths, others can be labeled as cardiac arrhythmia or respiratory failure, without further investigation as to whether the health event was induced by acute chemical exposure.

Death from inhalation of toxic chemical fumes near oil tanks is a serious problem in the oil and gas industry. In response to these growing concerns, in February 2016, NIOSH and OSHA published a hazard alert, “Health and Safety Risks for Workers Involved in Manual Tank Gauging and Sampling at Oil and Gas Extraction Sites” to inform employers and workers of the dangers during these operations and methods to control exposure.⁵⁸ Many recommendations in

⁵⁵The oil and gas industry is classified as an extractive industry and is part of the mining sector (NAICS Code 21). For the purpose of identifying fatalities in the oil and gas extractive industries, BLS includes oil and gas extraction (NAICS 21111), drilling oil and gas wells (NAICS 213111), and support activities for oil and gas operations (NAICS 213112).

⁵⁶Oil and gas production and related employment has been declining since late 2015. The most recent injury, fatality and enforcement information available is for the time period prior to these recent changes in the industry.

⁵⁷Bureau of Labor Statistics, Hours-based fatal work injury rates, 2008–2014.

⁵⁸National Institute for Occupational Safety and Health, “Health and Safety Risks for Workers Involved in Manual Tank Gauging and Sampling at Oil and Gas Extraction Sites,” February 2016, <https://www.osha.gov/Publications/OSHA3843.pdf>.

the hazard alert are based on OSHA investigations and NIOSH's previous research in this area. For example, in 2014, a peer-reviewed NIOSH publication reported on worker exposures to volatile organic chemicals during flowback and production testing operations at oil and gas sites. Notably, 15 of 17 personal breathing samples measuring benzene exposure for workers gauging flowback or production tanks exceeded the NIOSH recommended exposure limit of 0.1 ppm.⁵⁹

But as NIOSH notes, even though workers were exposed to higher than recommended levels of benzene—a known carcinogen—none of the personal breathing zone sampling results for benzene, toluene, ethyl benzene and xylenes exceeded OSHA's permissible exposure limits, despite being dangerous levels. OSHA's PEL for benzene in the oil and gas sector is 10 ppm, which is 10 times more lenient than OSHA's benzene standard in other sectors (1 ppm). Even so, 1 ppm is well above NIOSH's recommended exposure limit of 0.1 ppm for benzene. OSHA's weak PELs limit the agency's ability to adequately protect workers.

NIOSH also documented flammable atmosphere measurements adjacent to separators and flowback tanks that are indicative of a high risk of fires, which normally are triggered by direct reading personal and fixed flammable gas monitors. Based upon its field investigations in the oil and gas industry, NIOSH has recommended a number of methods to reduce the potential for occupational exposure to acute health and flammable hazards in these work settings. These include: alternative tank gauging procedures; dedicated sampling ports; worker training; limiting the time spent in proximity to hydrocarbon sources; monitoring workers for benzene and other contaminants; and the use of portable flammable gas monitors with alarms. In 2014, OSHA issued a guidance document outlining recommendations to reduce flowback hazards in hydraulic fracturing.⁶⁰

Silica dust exposure has been identified as a major health hazard in hydraulic fracturing operations in the oil and gas industry, where silica is used in large quantities along with water and chemicals in the extraction process. In 2012, NIOSH released the findings of a two-year assessment of chemical hazards in hydraulic fracturing that reported high levels of silica dust exposures, particularly in sand handling and transfer operations. NIOSH reported that 47% of the breathing zone samples taken exceeded the OSHA permissible exposure limit (100 $\mu\text{g}/\text{m}^3$), 79% exceeded the NIOSH recommended exposure limit (50 $\mu\text{g}/\text{m}^3$) and 31% of the samples were greater than 10 times the NIOSH recommended limit.

In response to these findings, in June 2012, OSHA and NIOSH issued a hazard alert on silica hazards in hydraulic fracturing, outlining the risks of exposure and recommended measures to control worker exposures to respirable silica dust in these operations.⁶¹ OSHA's final general industry rule on protecting workers from silica exposure—issued in March 2016—includes hydraulic fracturing operations in its scope, but allows five years for implementation in this industry.

⁵⁹Esswein EJ, Snawder J, King B, Breitenstein M, Alexander-Scott M, Kiefer M, "Evaluation of Some Potential Chemical Exposure Risks During Flowback Operations in Unconventional Oil and Gas Extraction: Preliminary Results," *Journal of Occupational and Environmental Hygiene*, Vol.11, No. 10, D174–D184, Oct. 2014.

⁶⁰Occupational Safety and Health Administration, "Hydraulic Fracturing and Flowback Hazards Other Than Respirable Silica," 2014, www.osha.gov/Publications/OSHA3763.pdf.

⁶¹Occupational Safety and Health Administration, "Worker Exposure to Silica during Hydraulic Fracturing," 2012, www.osha.gov/dts/hazardalerts/hydraulic_frac_hazard_alert.html.

Other potential safety and health hazards in oil and gas operations that are less well-studied include exposure to diesel particulate and exhaust gases from equipment, high or low temperature extremes, noise, heavy metals and naturally occurring radioactive material.

As noted previously, the oil and gas extraction industry is classified as part of the mining industry (NAICS 21) and has fatality rates that are similar to those experienced in coal mining. But unlike the rest of the mining industry, which is subject to the Mine Safety and Health Act, oil and gas extraction is covered by the Occupational Safety and Health Act. As a result, the oil and gas industry is subject to much weaker regulations and oversight than other dangerous extractive industries.

Under the Mine Act, all underground mines are subject to mandatory comprehensive inspection by the Mine Safety and Health Administration four times a year, in addition to other inspections that may be conducted in response to complaints, fatalities or other information. All surface mines covered by MSHA, including quarrying operations, must be inspected at least twice a year. By comparison, there are no routine mandatory inspections under OSHA, and OSHA's ability to inspect workplaces, including those in the oil and gas industry, is quite limited. In FY 2015, federal OSHA conducted only 603 inspections in the oil and gas extraction industries; in FY 2014, 663 inspections. Worksites in this industry often are remote and mobile, making oversight even more difficult.

Similarly, MSHA has detailed regulations that address the specific hazards in coal mining and metal and nonmetal mining regulations. Oil and gas extraction is subject to OSHA general industry and construction regulations, none of which are designed to address the particular safety and hazards in the oil and gas industry. Indeed, the oil and gas sector, at the urging of the industry, has been exempted from a number of OSHA regulations, including standards for benzene and process safety management. In 1983, OSHA issued a proposed standard to address the specific safety hazards in the oil and gas industry, but that rule was never issued.

Safety and health practices and protections in the oil and gas industry need to be strengthened and improved. Given the extreme hazards in the industry, and growing reliance on oil and gas as an energy source, it is time to consider a strict regulatory and enforcement system for the oil and gas sector similar to what exists in the rest of the mining industry.

Ergonomics

Ergonomic injuries still are the biggest job safety hazard faced by workers. In 2014, musculoskeletal disorders accounted for 32.3% of all serious workplace injuries, with nearly 300,000 MSDs resulting in days away from work reported by employers.

During the Bush administration, efforts to address ergonomic hazards suffered huge setbacks. In March 2001, the OSHA ergonomics standard was repealed under the Congressional Review Act. Soon after, the administration also repealed the OSHA recordkeeping requirement to identify all MSDs on the workplace injury and illness log. The Bush administration's "comprehensive plan" to address ergonomic hazards announced in 2002 turned out to be a sham. The administration

issued just four ergonomics guidelines—for the nursing home industry, retail grocery stores, poultry processing and the shipbuilding industry. During the Bush administration, federal OSHA issued a total of 20 general duty clause citations for ergonomic hazards, with only one ergonomic citation issued in 2005, no ergonomic citations issued in 2006 or 2007, and only three citations in 2008. The average penalty for these citations was \$1,874.

The Obama administration has not developed specific initiatives to address ergonomic hazards. With the repeal of the ergonomics standard under the Congressional Review Act, OSHA is prohibited from issuing a new rule that is substantially the same as the original rule unless the new rule is authorized by Congress. In the current political environment, the chance of such action is remote, and the development of even a different type of ergonomics regulation (e.g., a rule limited to high-risk industries) would be politically difficult. Enforcement against ergonomic hazards under OSHA's general duty clause remains limited. According to OSHA, under the Obama administration, there have been only 21 federal OSHA enforcement cases with general duty clause citations for ergonomic hazards. There have been no efforts by the administration to develop a new comprehensive ergonomic enforcement strategy, although in recent years there has been an increase in OSHA ergonomic enforcement activity.

In April 2012, OSHA launched a national emphasis program for nursing and residential care facilities, which in part focuses on ergonomic hazards. To date, this initiative has resulted in eight citations for ergonomic hazards. In 2015, OSHA's ergonomics enforcement activities included three employers cited for general duty violations for ergonomic hazards. The most significant enforcement action was for violations at a Twin Towers health care facility in Ohio, where OSHA identified widespread exposure to musculoskeletal hazards through not implementing a Safe Resident Handling Program. This company was previously cited (in May 2012) for not providing a workplace free of hazards that were likely to cause MSDs. In December 2014, OSHA cited the employer for these and other serious and repeat violations and proposed \$33,000 in penalties for these violations. The penalties were later reduced to \$18,200.

In October 2015, federal OSHA began a regional emphasis program for Region Four (Alabama, Florida, Georgia and Mississippi) and Region Six (Arkansas, Louisiana, Oklahoma and Texas) to address fatalities, injuries and illnesses in poultry processing plants. Ergonomics is a key element of the emphasis program due to the repeated and sustained manual handling and manual exertion work tasks, such as deboning, picking and packing. In 2014, workers in the private poultry processing industry were almost five times more likely to experience a serious injury as a result of repetitive motion compared to workers in all private industries. Allen Harim Foods' Harbeson plant in Delaware was cited by OSHA under the general duty clause for failing to address workers' exposure to MSD hazards when performing deboning and packing tasks. This serious violation resulted in a \$7,000 penalty and a total penalty of \$38,000 from all violations.

OSHA also has expanded the use of HALs to address ergonomic hazards. These letters are issued in cases where OSHA has identified serious ergonomic hazards, but is not able to meet the legal burden for issuing a general duty citation. In FY 2015, OSHA issued 39 HALs for ergonomic hazards, less than the 81 letters issued in FY 2014. In recent years, the majority of the letters involved health care employers; however, two involved poultry processing employers. Allen Harim Foods, which was cited for ergonomic hazards, was also issued a HAL about deficiencies

in the facility's medical management program. The company was not referring workers with MSD injuries to outside health care providers and was using the first aid station to evaluate and treat MSDs. In addition, the workers were discouraged from reporting symptoms and injuries.

At the state level, efforts to adopt ergonomic protections also have been met with great industry opposition. In 2003, industry groups led a successful ballot initiative to overturn the Washington state ergonomics rule. Efforts to enact ergonomics legislation stalled in Connecticut and Minnesota. In March 2011, after nearly a decade of effort to develop and issue an ergonomics rule, the Republican governor of Michigan signed a bill into law that prohibits the Michigan Occupational Safety and Health Administration from issuing an ergonomics standard.

One area in which there has been significant progress on ergonomics is the adoption of safe patient handling legislation. Eleven states now have safe patient handling requirements: California, Hawaii, Illinois, Maryland, Minnesota, New Jersey, New York, Ohio, Rhode Island, Texas and Washington. A number of additional states are considering similar legislation.

MINE SAFETY AND HEALTH

The April 5, 2010, explosion at the Massey Energy Upper Big Branch mine in West Virginia killed 29 miners in the worst coal mine disaster in the United States in 40 years. The UBB disaster shocked and outraged the nation. It exposed serious problems at the Massey mine and deficiencies in mine safety laws and oversight. The UBB explosion, the related investigation and its findings have formed the backdrop for many of the MSHA activities and initiatives during the Obama administration.

MSHA's investigation of the UBB disaster found that the 29 miners who perished at UBB died in a massive coal dust explosion that started as a methane ignition.

According to MSHA's investigation report:

The physical conditions that led to the explosion were the result of a series of basic safety violations at UBB and were entirely preventable. PCC/Massey disregarded the resulting hazards. While violations of particular safety standards led to the conditions that caused the explosion, the unlawful policies and practices implemented by PCC/Massey were the root cause of this tragedy. The evidence accumulated during the investigation demonstrates that PCC/Massey promoted and enforced a workplace culture that valued production over safety, including practices calculated to allow it to conduct mining operations in violation of the law.

The investigation also revealed multiple examples of systematic, intentional, and aggressive efforts by PCC/Massey to avoid compliance with safety and health standards, and to thwart detection of that noncompliance by federal and state regulators.⁶²

⁶²United States Department of Labor, Mine Safety and Health Administration, "Coal Mine Safety and Health, Report of Investigation Fatal Underground Mine Explosion," April 5, 2010, Upper Big Branch Mine-South, Montcoal, Raleigh County, West Virginia, ID No. 46-08436.

Following the investigation, MSHA imposed a fine of \$10.8 million for civil violations, the largest in the agency's history, for more than 369 citations and orders, including 21 flagrant violations.

The Department of Justice launched a criminal investigation of the UBB explosion, both of the company and of company officials. In December 2011, DOJ announced a settlement in the criminal case against the company, with Alpha Natural Resources (which had purchased Massey Energy) agreeing to pay a total of \$209 million for penalties, payments to families and investments to improve mine safety.

The criminal investigation was conducted by the U.S. attorney for the Southern District of West Virginia. In the first years of the investigation, three Massey management officials pled guilty or were convicted of criminal offenses related to the explosion and related violations. In November 2014, the criminal investigation reached the top management of the company. Don Blankenship, CEO of Massey Energy at the time of the UBB explosion, was indicted by a federal grand jury on charges including conspiracy to violate mandatory federal mine safety and health standards, conspiracy to impede federal mine safety officials, making false statements to the Securities and Exchange Commission, and securities fraud. In December 2015, Blankenship was found guilty of conspiracy to violate mine safety standards. In April 2016, Blankenship was sentenced to one year in prison and fined \$250,000—the maximum penalty allowed under the Mine Safety and Health Act. The conviction and sentencing, while welcome, underscored the weakness of the criminal provisions of the Mine Act, under which even criminal violations that result in the death of workers are treated as a misdemeanor, not a felony.

The Massey mine disaster raised serious questions about the adequacy of MSHA oversight and mine safety law and regulations, particularly how a mine with such a significant history of violations could continue to operate.

An internal review of MSHA's activities prior to the UBB explosion in April 2010 found that inspectors failed to identify deficiencies in Massey's dust control program and ventilation and roof control plans, despite repeated inspections of the mine. Lack of inspector training, inexperience and management turnover were identified as factors that led to these failures.

Since the UBB explosion, MSHA has moved on a number of fronts to address shortcomings and strengthen regulations and enforcement.

In April 2010, immediately after the UBB tragedy, MSHA launched a new program of "impact" inspections to target mines with poor safety records or at high risk of explosions. As of March 1, 2016, 1,113 impact inspections of mines had been conducted, resulting in a total of 15,979 citations, 1,309 orders and 58 safeguards, many of them for serious or life-threatening conditions.

MSHA also has strengthened its procedures for addressing patterns of violations. Under the Federal Mine Safety and Health Act, MSHA is authorized to issue a POV notice to mine operators that demonstrate a disregard for the health and safety of miners through a pattern of significant and substantial violations. If a mine receives a POV notice, all subsequent S&S

violations identified at that mine must be issued as withdrawal orders, and immediate action must be taken to correct the violations. Prior to 2010, MSHA never had used this authority, and no mine had been placed on a POV status.

In December 2010, new POV screening criteria were put in place to identify mines that had a history of repeated violations. Using those criteria, MSHA identified 51 mines for further review. The top 12 mines identified in the 2010 screening were cited collectively for a combined total of 5,541 violations, 2,050 of which were S&S violations.⁶³

In January 2013, OSHA issued a new regulation to further strengthen enforcement for patterns of violations. The regulation allows MSHA to issue a POV notice without first having to issue a “potential” notice. It also provides for violations that are not yet final orders to be considered in determining a pattern, so that coal operators cannot use litigation and contests to avoid these stricter enforcement procedures. If a mine receives a POV notice, all subsequent S&S violations identified at that mine must be issued as withdrawal orders, and immediate action must be taken to correct the violations.

The POV enforcement program has had an impact, resulting in mine operators taking action to correct serious hazards that constitute violations. Since the program was implemented in 2010, the number of mines identified as having a potential pattern of violations has steadily declined, dropping from 51 mines in 2010 to 12 mines in 2014. In 2015, only one mine was identified as having a potential pattern of violations.⁶⁴

In addition to strengthening enforcement programs, MSHA has moved forward to develop and promulgate new mine safety and health standards. In September 2010, the agency issued an emergency temporary standard on rock dusting to reduce the risk of coal dust explosions; it finalized the rule in June 2011. MSHA also finalized a new rule requiring operators to conduct pre-shift examinations of mines to identify hazards and correct them, and a rule to adjust penalties for inflation.

In February 2015, MSHA issued a Request for Information seeking input on other regulatory improvements that should be made based upon the findings from the investigation of the UBB mining disaster. The RFI requests input on a broad range of issues, including information on mine ventilation and roof control plans; atmospheric monitoring systems and new technology for remote monitoring systems; methods to suppress the propagation of coal dust explosions; and criteria and procedures for certification, recertification and decertification of persons qualified to conduct mine examinations.

MSHA has taken action on other key mine safety and health issues. In April 2014, a final rule to reduce miners’ exposure to coal dust was issued to reduce the risk of black lung, which after years of decline has been on the rise. The new rule, which went into effect in August 2014, lowered exposure levels to 1.5 mg/m³ from the prior 2.0 mg/m³ level, and put in place other dust

⁶³U.S. Department of Labor, Mine Safety and Health Administration, press release, “MSHA Chief: Pattern of Violations Reforms Have Made Mine Safer,” Oct. 2, 2014, www.msha.gov/MEDIA/PRESS/2014/NR141002.asp.

⁶⁴Main, Joseph, Assistant Secretary, Mine Safety and Health Administration, U.S. Department of Labor, PowerPoint Presentation, AFL-CIO Staff Safety and Health Committee, Washington, D.C., March 7, 2016.

control, exposure monitoring and medical surveillance measures. The new coal dust rule has already had a dramatic effect. According to MSHA, as of Feb. 1, 2016, nearly 99% of the 87,534 coal dust samples collected from underground and surface coal mines by MSHA and coal operators met compliance levels.⁶⁵

In January 2015, MSHA issued a final rule to require proximity detection systems on continuous mining machines in underground coal mines to prevent injuries and deaths from contact with this equipment. The rule had been proposed in August 2011, but final action was delayed by a lengthy review by OMB.

A companion rule on proximity detection systems for mobile mining equipment also has been delayed. A draft proposed rule was sent to OMB for review in September 2011. After being held by OMB for more than two years, in January 2014, the proposed rule was withdrawn from review. A new draft proposal was submitted to OMB for review on March 28, 2015, and proposed in the Federal Register on Sept. 2, 2015. Hopefully, this rule can be finalized before the end of the Obama administration.

Two other important rules previously designated as priorities by MSHA also have been delayed. A rule on safety and health management systems has been removed from the regulatory agenda. A new standard on silica has yet to be proposed, but now that OSHA has finalized its silica rule, hopefully the proposed MSHA silica rule will move forward.

MSHA also has undertaken a major initiative—Miners’ Voice—to encourage miners to exercise their rights under the Mine Act and to support them in these efforts. The agency has conducted an extensive outreach campaign to inform workers of their rights. A survey to evaluate the ability of miners to access information on workplace rights, their understanding of those rights and their ability to exercise those rights without fear of retaliation is being conducted. A new training curriculum is being developed to educate miners’ representatives on their rights and how they can participate effectively in MSHA investigations and other activities under the act.

As part of this initiative, MSHA has stepped up enforcement of its anti-retaliation protections. The Mine Safety and Health Act protects miners from being discriminated against for exercising their rights under the act. The mine safety law protections are much stronger than the comparable provisions under the Occupational Safety and Health Act, providing for preliminary reinstatement while the case is being adjudicated, an administrative process for resolving complaints and the right of miners to take up the case if the secretary of labor fails or declines to act.

In 2015, MSHA filed 41 discrimination complaints on behalf of miners (compared with nine such cases filed in 2008), and sought preliminary reinstatement for 20 miners, compared with three such cases in 2008.⁶⁶

⁶⁵Mine Safety and Health Administration Web Posting, Feb. 1, 2016, “Respirable Coal Mine Dust Rule in Phase II – The Rule Is Achieving Goal of Lowering Miners’ Exposure to Dust,” <http://www.msha.gov/news-media/assistant-secretary/2016/02/01/respirable-coal-mine-dust-rule-phase-ii-%E2%80%93-rule-achieving>.

⁶⁶Main, *op. cit.*

JOB SAFETY BUDGET

Funding for the nation's job safety and health programs historically has been limited, particularly when compared with the scope of responsibilities of the job safety agencies and the extent of the problems that need to be addressed. During the Bush administration there was a decrease in funding and staffing for the agencies, further limiting their capacity. The Obama administration has made funding for the job safety agencies, particularly the enforcement programs, a priority, moving in the early years of the administration to restore the agencies to their FY 2001 levels of operation.

During the first year of the Obama administration, OSHA and MSHA received significant increases in their budgets. For FY 2010, the omnibus appropriations bill, enacted by the Democratic-controlled Congress, provided \$559 million in funding for OSHA, \$357 million for MSHA and \$302 million for NIOSH. This compared with FY 2009 levels of \$513 million for OSHA, \$347 million for MSHA and \$290 million for NIOSH. In subsequent years there were additional increases sought and received for OSHA and MSHA.

But in FY 2013, as a result of Republican opposition in Congress and following the government shutdown and sequester, OSHA's budget was reduced to \$535 million from \$564.8 million in FY 2012. In FY 2014, OSHA funding was partially restored to a level of \$552.2 million. In FY 2015, OSHA received a very small increase, with a budget of \$552.8 million and 2,224 positions funded.

In FY 2013, MSHA's budget also was cut as a result of the budget sequester, with \$354 million in funding provided. However, in FY 2014, MSHA's funding was increased to \$375.9 million, higher than the pre-sequester level. The FY 2015 appropriation maintained this level of funding for MSHA.

For FY 2016, the Obama administration proposed significant increases in the OSHA and MSHA budgets, seeking \$592 million in funding for OSHA and \$394.9 in funding for MSHA. However, in the omnibus funding bill for FY 2016, neither agency received an increase in funding.

For FY 2017, the administration has once again proposed major increases in the OSHA and MSHA budgets, requesting \$595 million for OSHA and \$397.4 million for MSHA. But once again, it seems unlikely that the Republican majority in Congress will provide any increase, making it harder and harder for these agencies to fulfill their missions.

Unfortunately, NIOSH has not received the same ongoing support as OSHA and MSHA for funding under the Obama administration. While increased funding for NIOSH was sought and received in FY 2010, with the agency receiving \$302 million in funding, in subsequent budget requests, the administration has proposed cuts to NIOSH's funding.

Specifically, beginning with the FY 2012 budget request, and every year thereafter, the Obama administration has proposed approximately \$50 million in cuts for NIOSH through the elimination of programs for agriculture, fishing, and logging safety and health research, and the Educational Research Center program to train occupational safety and health professionals. As a

result of strong opposition to these cuts by the entire safety and health community and labor and business groups, Congress has rejected these proposals and has maintained NIOSH's funding. In FY 2015, NIOSH was funded at a level of \$334.9 million; however, this increase in funding was due to transfer of administrative budget items to NIOSH from the CDC, and there was no net increase in funding for NIOSH programs. In FY 2016, Congress increased NIOSH's budget, providing \$339.1 million in funding. For FY 2017, the budget proposal for NIOSH includes the same cuts, but hopefully these will again be rejected by Congress.

Congress is still in the process of working on the FY 2017 appropriations for government agencies. At this point, hearings have been held, but no formal action has been taken on any appropriations bills. Given the deadlock in Congress on most legislative matters, it is unlikely that Congress will finalize FY 2017 appropriations. The most likely outcome is a continuing resolution that continues funding at current levels until sometime after the election or possibly next year.

SAFETY AND HEALTH LEGISLATION

With the Republicans in control of the House and Senate, the political environment in the 114th Congress for worker protections and public protections is very challenging. Winning any new legislative improvements in worker safety and health laws has been difficult. But in 2015, there were two significant safety and health measures enacted.

As discussed previously, in November 2015, Congress passed the Federal Civil Penalties Inflation Adjustment Act Improvements Act of 2015 as part of the Bipartisan Budget Act of 2015. This legislation included provisions to extend coverage of the Inflation Adjustment Act to the Occupational Safety and Health Act, which was previously excluded from inflationary penalty adjustments. (The last time Congress increased OSHA penalties was 1990.) Under the new law, maximum penalties under the Occupational Safety and Health Act will now automatically be adjusted for inflation, with the first increase slated to be implemented in July 2016. With these adjustments, the maximum penalty for a serious OSHA violation will increase from \$7,000 to approximately \$12,500, and the maximum penalty for a willful or repeat violation will increase from \$70,000 to \$125,000.

In December 2015, Congress passed the James Zadroga 9/11 Health and Compensation Reauthorization Act (H.R. 1786, S. 928). This bill continues medical treatment and compensation programs for 9/11 responders and survivors. The original legislation, enacted in 2010, only authorized these programs for five years. Tens of thousands of responders are now sick as a result of toxic exposures following the 9/11 attacks, and thousands have died. The new legislation extends the health program until 2090 and the compensation program for another five years, ensuring that sick responders will get the care and support they need and deserve.

Despite these victories, the major legislative efforts have been focused on defending current laws and protections from attack.

The primary legislative threat to worker safety and health and other public protections has come from a wide range of “regulatory reform” bills that have been pushed in the House and the Senate. These bills would make it more difficult, if not impossible, for agencies to issue needed safeguards. The Regulations from the Executive in Need of Scrutiny Act would set up Congress as the gatekeeper on regulations. Politics, not scientific judgment or expertise of agencies, would dictate all regulatory actions. The Regulatory Accountability Act would upend 40 years of law to make costs to businesses, not the protection of workers and the public, the primary consideration. The Small Business Regulatory Flexibility Improvements Act would add a host of new analytical requirements to the regulatory process, further delaying needed safeguards.

The House of Representatives has passed a number of these bills. The Senate has held numerous hearings and has reported several anti-regulatory bills from committee. Though not as far-reaching as the House bills, these measures would add new analytical requirements and steps to the regulatory process, further delaying rules, and require agencies to conduct mandatory retrospective reviews of all major rules, forcing agencies to spend limited resources and staff looking backward, rather than addressing pressing needs. At this point, the plan and schedule for legislative action on these bills by the full Senate is uncertain. The Obama administration has issued statements of administration policy opposing the bills passed by the House, and has indicated the president is likely to veto them.

In addition to broad “regulatory reform” legislation, there have been concerted attempts by Republicans to block individual regulations through amendments to appropriations bills. Last year, during consideration of the FY 2016 appropriations bills, the Republicans attached scores of riders to agency funding bills to block or delay action on key rules. Among the riders included in the Labor-HHS appropriations bills were amendments to block OSHA’s final silica standard and the DOL rules on financial advice and overtime and to bar implementation of the NLRB election rules. Due to concerted opposition by a broad coalition of labor and public interest groups, Congressional Democrats and the Obama administration, these and other ideological riders were not included in the final FY 2016 funding bills. However, Republicans have made it clear that they will attempt to include similar measures in the FY 2017 appropriations bills.

Republicans have also sought to block final rules through resolutions of disapproval under the Congressional Review Act, a law enacted in 1996 that establishes procedures for Congress to review major agency rules and seek to overturn them through a fast-track procedure that requires a simple majority vote.⁶⁷

In March 2015, Republicans voted to overturn new NLRB union election rules, but this action was vetoed by the president. In 2016, Republicans are likely to try to use the CRA to overturn new DOL rules, including those on overtime, financial advice and possibly silica. But President Obama is likely to veto any such measures that are passed by Congress during the remainder of his term.

In the past several sessions of Congress, legislation to strengthen the Occupational Safety and Health Act and the Mine Safety and Health Act has been introduced. The Protecting America’s

⁶⁷The CRA was used in 2001 during the Bush administration to overturn OSHA’s ergonomics standard—to date the only successful effort to overturn a regulation under this law.

Workers Act would expand OSHA coverage, strengthen enforcement and enhance whistleblower protections. The Robert C. Byrd Mine and Workplace Safety and Health Act proposed to revamp the provisions for patterns of violations, enhance criminal and civil penalties, provide MSHA subpoena power and other enforcement tools, and strengthen miners' whistleblower protections. But with Republicans in control of Congress, there has been no consideration of any of these bills.

WHAT NEEDS TO BE DONE

Very simply, workers need more job safety and health protection. Eight years of inaction and neglect by the Bush administration on major hazards and increased emphasis on employer assistance and voluntary compliance left workers' safety and health in serious danger. The Obama administration restored OSHA and MSHA to their missions to protect workers, and the leaders at the agencies have charted a new course and moved forward. The Obama administration has strengthened enforcement, focusing on serious repeat violators, increased the job safety budget and enhanced workers' rights. During its second term, the Obama administration has moved forward to issue key safety and health regulations, including final rules to reduce exposure to coal dust and silica.

But much work needs to be done, and there is less than a year left for the current administration to act. First and foremost, the important gains that have been won, including OSHA's new silica standard, must be defended from political and legal attacks. Other important rules still must be finalized, including OSHA rules on injury reporting modernization/anti-retaliation, walking and working surfaces, and beryllium. Action is needed to develop and propose rules on combustible dust, infectious diseases and chemical process safety so the next administration can proceed with rulemaking to address these hazards.

Funding and staffing at the agencies should be increased to provide for enhanced oversight of worksites and timely and effective enforcement.

Efforts to strengthen OSHA's Whistleblower Protection Program must continue. The widespread problem of injury underreporting must be addressed, and employer policies and practices that discourage the reporting of injuries through discipline or other means must be prohibited. OSHA needs to keep up with new hazards that face workers as workplaces, the nature of work and employment relationships change.

Workplace violence is a growing and serious threat, particularly to women workers and in the health care industry. OSHA must enhance enforcement against workplace violence under the general duty clause and move quickly to develop a standard to protect workers at greatest risk of violence on the job.

The serious safety and health problems and increased risk of fatalities and injuries faced by Latino and immigrant workers must be given increased attention.

Similarly, the high number of fatalities and injuries in the oil and gas extraction industry demand intensive and comprehensive intervention. Without action, the workplace fatality crisis in this industry only will get worse.

At MSHA, initiatives to focus increased attention on mines with a record of repeated violations and stronger enforcement action against mines with patterns of violations must continue. The new coal dust rule must be enforced, and the promised rules on silica and proximity detection for mobile equipment must be issued.

Congress must strengthen job safety laws to prevent tragedies like the Massey mining disaster. Improvements in the Mine Safety and Health Act are needed to give MSHA more authority to shut down dangerous mines and to enhance enforcement against repeat violators.

The Occupational Safety and Health Act now is more than 45 years old and is out of date. Congress should pass the Protecting America's Workers Act to extend the law's coverage to workers currently excluded, strengthen civil and criminal penalties for violations, and strengthen the rights of workers, unions and victims. Improvements to update and strengthen the Occupational Safety and Health Act's anti-retaliation provisions are particularly needed so workers can report job hazards and injuries and exercise safety and health rights without fear.

Rather than move forward, the Republican majority in Congress is threatening to turn back the clock and block new safety and health protections. These efforts to roll back and weaken worker protections must be stopped.

The nation must renew its commitment to protect workers from injury, disease and death, and make this a high priority. We must demand that employers meet their responsibilities to protect workers and hold them accountable if they put workers in danger. Only then can the promise of safe jobs for all of America's workers be fulfilled.

**LOOKING BACK OVER TWENTY-FIVE
YEARS OF SAFETY AND HEALTH**

**DEATH ON THE JOB: THE TOLL OF
NEGLECT**

25 YEARS OF THE DEATH ON THE JOB REPORT

Twenty-five years ago, the AFL-CIO published the first edition of *Death on the Job: The Toll of Neglect*, reporting that “20 years after the passage of the Occupational Safety and Health Act, more than 10,000 workers are killed on the job every year, and more than 6 million workers are injured on the job every year.”⁶⁸ Now, more than 45 years after the passage of the Occupational Safety and Health Act, approximately 4,800 workers are killed and more than 3 million workers are injured at work every year. The overall job fatality rate and injury and illness rate in the U.S. have dropped since OSHA was formed. But safety and health remains a serious problem for workers across the country, and remain a low priority to many employers and politicians. There have been improvements in the past 25 years, but at the same time, some conditions have gotten worse. There is much more work to be done.

For example, the agriculture, forestry and fishing sector remains the most dangerous industry, with a fatality rate of 24.0 deaths per 100,000 workers in 1992 and 25.6 in 2014.⁶⁹ And while the mining sector fatality rate has decreased, it remains very high; a growing number of the fatalities in this sector are due to the oil and gas extraction industry, which now accounts for 79% of mining sector fatalities, compared with 47% of mining fatalities in 1992. Some of the states with the highest fatality rates in 1992 continue to be the most dangerous, such as Alaska and Wyoming. The states with the lowest fatality rates in 1992 (Connecticut, Massachusetts, New York, Rhode Island and New Jersey) continue to have rates below 2.8 deaths per 100,000 workers.

While the overall reported injury rate has declined since 1992, some types of injuries, like workplace violence, are on the rise. In 1992, there were 22,800 assaults resulting in days away from work, with a rate of 3.8 injuries per 10,000 workers for workplace violence incidents. In 2014, the number of assaults resulting in days away from work was 26,540, with a rate of 4.0 assaults per 10,000 workers. Musculoskeletal disorders continue to be a major injury problem, just as they were in 1992. The number of recorded MSDs has decreased in similar proportion to the number of overall reported injuries; however, the percentage of injuries that are MSDs has remained constant, with MSDs accounting for 33.6% of injuries in 1992 and 32.3% in 2014. While the overall number and rate of reported injuries and illnesses have declined over time, the true toll of injuries and illnesses are actually magnitudes higher; injuries and illnesses have been severely underreported and undercounted since they first started being officially recorded.⁷⁰

As is evident in this look back, OSHA—the agency that has been given the monumental task of protecting all workers in the U.S.—has consistently been underfunded and understaffed. And those resources are declining. In 1992, there were 1,953 federal and state OSHA inspectors; in 2016, there are only 1,840 inspectors, even though the workforce has increased 28% and the

⁶⁸Donahue, Thomas. “Workplace Safety,” C-SPAN video, 28:00, April 28, 1992, <http://www.c-span.org/video/?25804-1/workplace-safety-study>.

⁶⁹The Bureau of Labor Statistics reclassified this sector in 2003 to include hunting along with agriculture, forestry and fishing.

⁷⁰Leigh, J.P., Marcin, J.P. and Miller, T.R., “An Estimate of the U.S. Government’s Undercount of Nonfatal Occupational Injuries,” *Journal of Occupational and Environmental Medicine*, Vol. 46, No. 1, January 2004.

number of establishments has increased 44% over the past 25 years. As a result, OSHA's capacity to inspect and enforce safety and health regulations also has declined. In 1992, federal OSHA could inspect workplaces on average once every 84 years; today, it would take the agency 145 years. After inflation, the budget allocated to OSHA by the president and Congress has remained fairly static over the past 25 years, making tight resources even tighter for the agency.

When the first *Death on the Job* report was issued in 1992, we stated that "OSHA is clearly an agency with a weak bark and an even weaker bite. And in effect, the nation's employers are not afraid to neglect or ignore the health and safety of their employees."⁷¹ Today, while there has been some progress and improvement, the toll of job injury, disease and death on America's working men and women remains unacceptably high.

⁷¹Donahue, *op. cit.*

25-Year Comparison of Death on the Job, 1992–2016

Characteristic	Subcharacteristics	1992 Report	2016 Report ¹
Fatalities ²	Total number	6,083	4,821
	Total rate (per 100,000 workers)	9.0	3.4
	Private industry	5.0	3.7
	Agriculture, forestry, fishing	24.0	25.6
	Mining	27.0	14.2
	Construction	14.0	9.8
	Manufacturing	4.0	2.3
	Wholesale trade	5.0	5.1
	Retail trade	4.0	1.9
	Government	4.0	1.9
Injuries and Illnesses	Number	6.8 million	3 million
	Rate (per 100 workers)	8.8	3.2
	Number, private industry	2,331,100	916,440
	Median days away from work	6	9
Workforce	Annual establishments	6,517,561	9,361,354
	Annual average employment	107,321,596	136,613,609
OSHA Resources	Full-time equivalent staff	2,421	2,173
	Inspectors (federal and state)	1,953	1,840
	Years to inspect (federal)	84	145
	Inspector per workers	1 : 54,952	1 : 74,247
	Budget	\$296,500,000	\$552,787,000
Penalty for serious violation	National average ³ (federal and state)	\$620	\$1,598

Sources: AFL-CIO Death on the Job: The Toll of Neglect, April 1992; U.S. Department of Labor, Bureau of Labor Statistics, Census of Fatal Occupational Injuries, Survey of Occupational Injuries and Illnesses, and Employment and Wages Annual Averages, 1992 and 2014; U.S. Department of Labor, Occupational Safety and Health Administration, Congressional Budget Justification, 2014; and U.S. Department of Labor, Occupational Health Administration, IMIS and OIS databases, FY 2015.

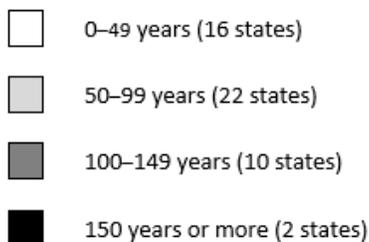
¹The 2016 report published 2014 fatality data from the U.S. Bureau of Labor Statistics, Census of Fatal Occupational Injuries (CFOI).

²In 1992, the U.S. Bureau of Labor Statistics initiated the Census of Fatal Occupational Injuries, which provided more complete data on the number and rate of work fatalities. The 1992 data first was released by the agency in October 1993.

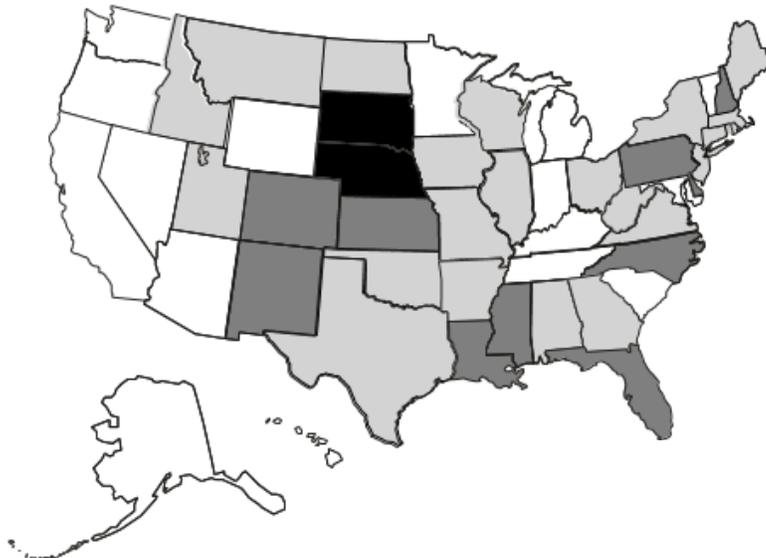
³National penalty data from AFL-CIO Death on the Job Report, 1993. Penalty data from the 1992 report was sourced from the Dayton Daily News and only included penalties related to fatal and serious injuries.

OSHA Inspection Capacity Has Greatly Declined over the Past 25 Years

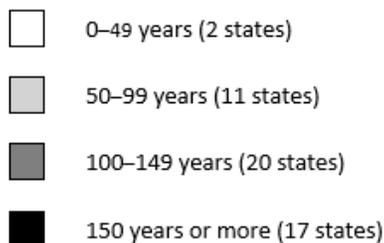
1992 Report



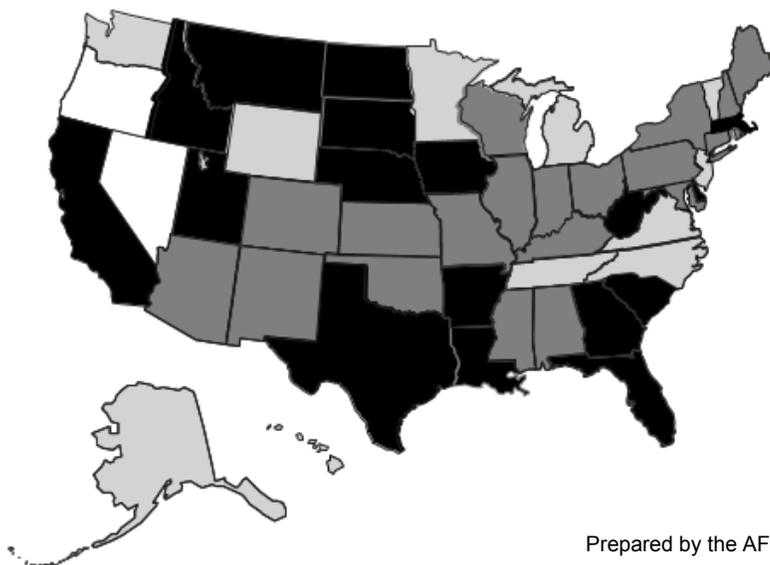
- Federal OSHA inspection, average: Once every 84 years
- Best: Nevada, once every 11 years
- Worst: Nebraska, once every 167 years



2016 Report



- Federal OSHA inspection, average: Once every 145 years
- Best: Oregon, once every 32 years
- Worst: South Dakota, once every 348 years



Prepared by the AFL-CIO

Sources: AFL-CIO Death on the Job: The Toll of Neglect, April 1992. U.S. Department of Labor, Bureau of Labor Statistics, "Employment and Wages Annual Averages 2014." Occupational Safety and Health Administration IMIS and OIS data on worksite Inspections, FY 2105.

NATIONAL SAFETY AND HEALTH OVERVIEW

Workplace Fatalities 1970–2007^{1,2}

(Employment-Based Fatality Rates)

Year	Work Deaths	Employment (000) ³	Fatality Rate ⁴
1970	13,800	77,700	18
1971	13,700	78,500	17
1972	14,000	81,300	17
1973	14,300	84,300	17
1974	13,500	86,200	16
1975	13,000	85,200	15
1976	12,500	88,100	14
1977	12,900	91,500	14
1978	13,100	95,500	14
1979	13,000	98,300	13
1980	13,200	98,800	13
1981	12,500	99,800	13
1982	11,900	98,800	12
1983	11,700	100,100	12
1984	11,500	104,300	11
1985	11,500	106,400	11
1986	11,100	108,900	10
1987	11,300	111,700	10
1988	10,800	114,300	9
1989	10,400	116,700	9
1990	10,500	117,400	9
1991	9,900	116,400	9
1992 ²	6,217	117,000	5.2
1993	6,331	118,700	5.2
1994	6,632	122,400	5.3
1995	6,275	126,200	4.9
1996	6,202	127,997	4.8
1997	6,238	130,810	4.8
1998	6,055	132,684	4.5
1999	6,054	134,666	4.5
2000	5,920	136,377	4.3
2001	5,915 ⁵	136,252	4.3
2002	5,534	137,700	4.0
2003	5,575	138,928	4.0
2004	5,764	140,411	4.1
2005	5,734	142,894	4.0
2006	5,840	145,501	4.0
2007	5,657	147,215	3.8

¹Fatality information for 1971 to 1991 from National Safety Council Accident Facts, 1994.

²Fatality information for 1992 to 2007 is from the Bureau of Labor Statistics, Census of Fatal Occupational Injuries (CFOI). In 1994, the National Safety Council changed its reporting method for workplace fatalities and adopted the BLS count. The earlier NSC numbers are based on an estimate; the BLS numbers are based on an actual census.

³Employment is an annual average of employed civilians 16 years of age and older from the Current Population Survey, adjusted to include data for resident and armed forces from the Department of Defense.

⁴Deaths per 100,000 workers are based on annual average of employed civilians 16 years of age and older from 1992 to 2007. In 2008, CFOI switched from an employment-based fatality rate to an hours-based fatality rate calculation.

⁵Excludes fatalities from the events of September 11, 2001.

Workplace Fatalities 2006–2014¹
(Hours-Based Fatality Rates)

Year	Work Deaths	Total Hours Worked (Millions)²	Fatality Rate³
2006	5,840	271,815	4.2
2007	5,657	275,043	4.0
2008	5,214	271,958	3.7
2009	4,551	254,771	3.5
2010	4,690	255,948	3.6
2011	4,693	258,293	3.5
2012	4,628	264,374	3.4
2013	4,585	268,127	3.3
2014	4,821	272,663	3.4

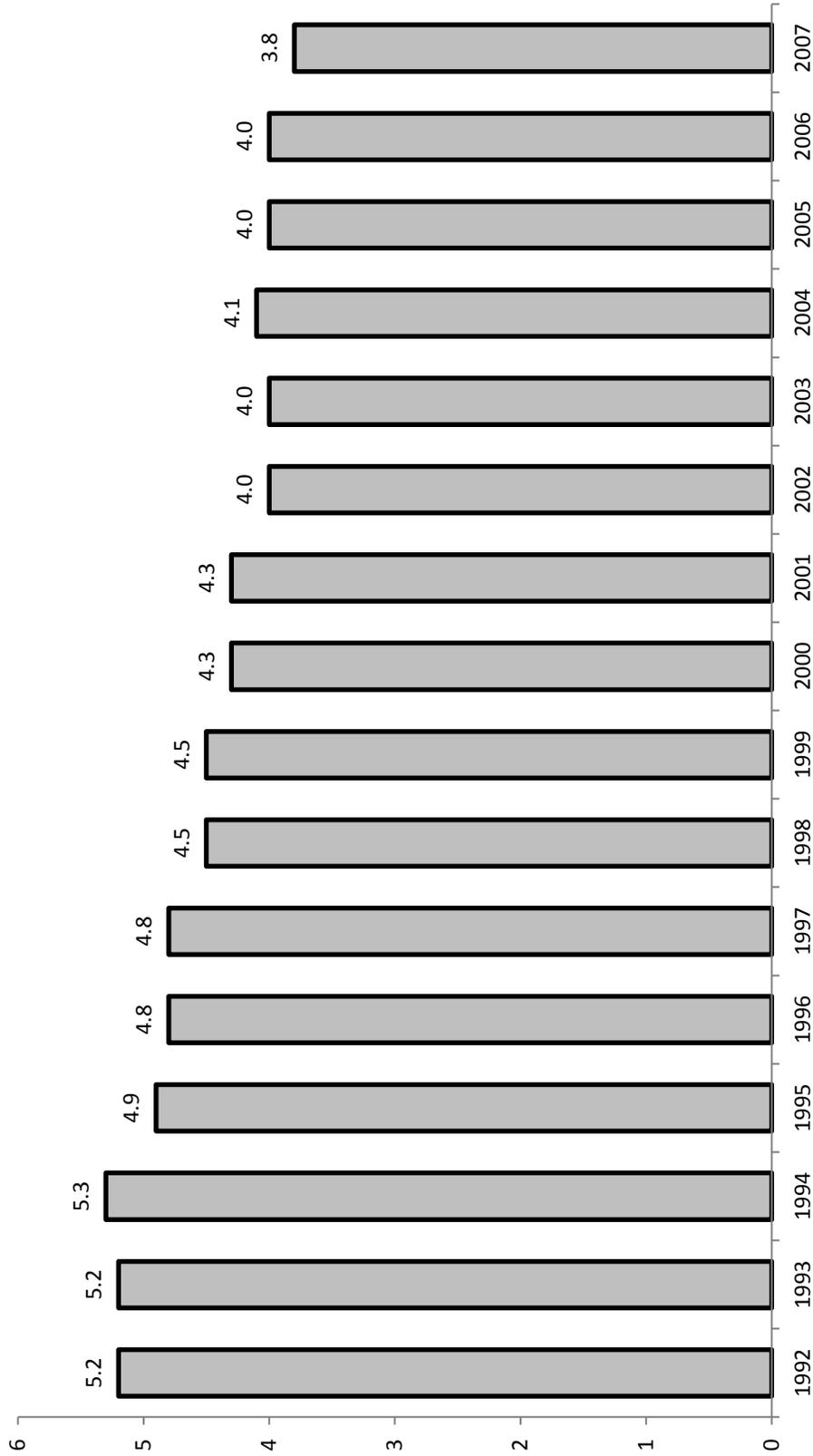
¹Fatality information is from the U.S. Department of Labor, Bureau of Labor Statistics, Census of Fatal Occupational Injuries (CFOI).

²The total hours worked figures are annual average estimates of total at work multiplied by average hours for civilians, 16 years of age and older, from the Current Population Survey (CPS).

³Deaths per 100,000 workers. In 2008, CFOI switched to an hours-based fatality rate calculation from an employment-based calculation used from 1992 to 2007. Fatality rates for 2006 and 2007 were calculated by CFOI using both approaches during the transition to hours-based rates. Hours-based fatality rates should not be compared directly with the employment-based rates CFOI calculated for 1992 to 2007.

Rate of Fatal Work Injuries Per 100,000 Workers, 1992–2007¹

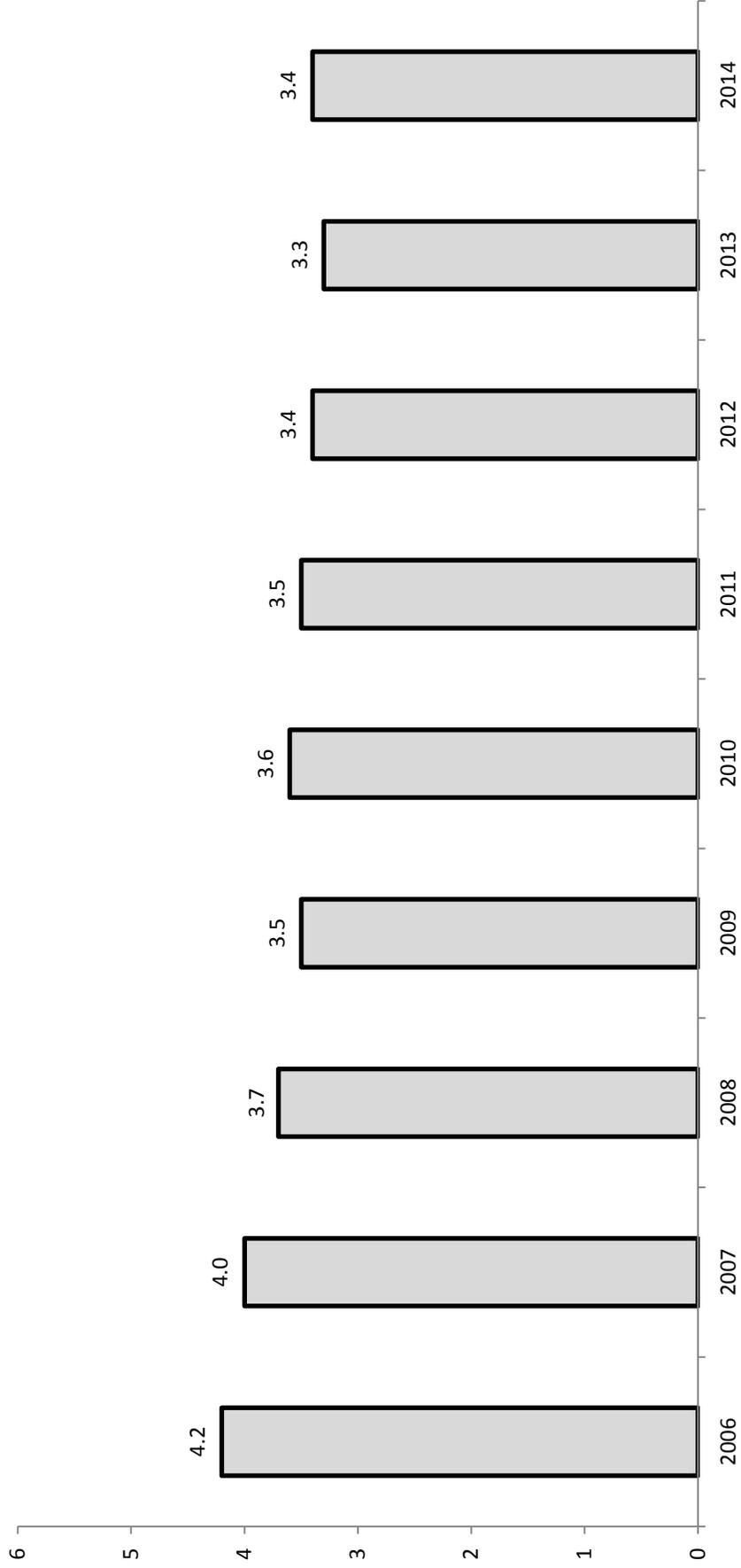
(Employment-Based Rates)



Sources: U.S. Department of Labor, Bureau of Labor Statistics, Current Population Survey, Census of Fatal Occupational Injuries; U.S. Bureau of the Census; and U.S. Department of Defense.

¹Fatality rate is an employment-based calculation using employment figures that are annual average estimates of employed civilians, 16 years of age and older, from the Current Population Survey (CPS). In 2008, CFOI switched to an hours-based fatality rate calculation. Employment-based fatality rates should not be compared directly with hours-based rates.

Rate of Fatal Work Injuries per 100,000 Workers, 2006–2014¹ (Hours-Based Rates)



Source: U.S. Department of Labor, Bureau of Labor Statistics, Census of Fatal Occupational Injuries (CFOI).

¹Fatality rate is an hours-based calculation using total hours worked figures that are annual average estimates of total at work multiplied by average hours for civilians, 16 years of age and older, from the Current Population Survey (CPS). Hours-based fatality rates should not be compared directly with the employment-based rates CFOI calculated for 1992 to 2007.

Workplace Fatality Rates by Industry Sector, 1970–2002^{1,2}

Year	All Ind.	Mfg.	Const.	Mining	Gov't	Agri.	Trans/Util.	Ret. Trade	Service	Finance
1970	18.0	9	69	100	13	64	N/A	N/A	N/A	N/A
1971	17.0	9	68	83	13	63	N/A	N/A	N/A	N/A
1972	17.0	9	68	100	13	58	N/A	N/A	N/A	N/A
1973	17.0	9	56	83	14	58	38	8	11	N/A
1974	16.0	8	53	71	13	54	35	7	10	N/A
1975	15.0	9	52	63	12	58	33	7	10	N/A
1976	14.0	9	45	63	11	54	31	7	9	N/A
1977	14.0	9	47	63	11	51	32	6	8	N/A
1978	14.0	9	48	56	11	52	29	7	7	N/A
1979	13.0	8	46	56	10	54	30	6	8	N/A
1980	13.0	8	45	50	11	56	28	6	7	N/A
1981	13.0	7	42	55	10	54	31	5	7	N/A
1982	12.0	6	40	50	11	52	26	5	6	N/A
1983	12.0	6	39	50	10	52	28	5	7	N/A
1984	11.0	6	39	50	9	49	29	5	7	N/A
1985	11.0	6	40	40	8	49	27	5	6	N/A
1986	10.0	5	37	38	8	55	29	4	5	N/A
1987	10.0	5	33	38	9	53	26	5	6	N/A
1988	10.0	6	34	38	9	48	26	4	5	N/A
1989	9.0	6	32	43	10	40	25	4	5	N/A
1990	9.0	5	33	43	10	42	20	4	4	N/A
1991	8.0	4	31	43	11	44	18	3	4	N/A
1992	5.2	4	14	27	4	24	13	4	2	2
1993	5.2	4	14	26	3	26	13	4	2	2
1994	5.3	4	15	27	3	24	13	4	3	1
1995	4.9	3	15	25	4	22	12	3	2	2
1996	4.8	3.5	13.9	26.8	3.0	22.2	13.1	3.1	2.2	1.5
1997	4.8	3.6	14.1	25.0	3.2	23.4	13.2	3.0	2.0	1.2
1998	4.5	3.3	14.5	23.6	3.0	23.3	11.8	2.6	2.0	1.1
1999	4.5	3.6	14.0	21.5	2.8	24.1	12.7	2.3	1.9	1.2
2000	4.3	3.3	12.9	30.0	2.8	20.9	11.8	2.7	2.0	0.9
2001	4.3	3.2	13.3	30.0	3.1	22.8	11.2	2.4	1.9	1.0
2002	4.0	3.1	12.2	23.5	2.7	22.7	11.3	2.1	1.7	1.0

¹Data for 1970–1991 is from the National Safety Council, Accident Facts, 1994. Fatality information for 1992–2002 is from the Bureau of Labor Statistics, Census of Fatal Occupational Injuries (CFOI). In 1994, the National Safety Council changed its reporting method for workplace fatalities and adopted the BLS count. The earlier NSC numbers are based on an estimate; the BLS numbers are based on an actual census. Beginning with 2003, CFOI began using the North American Industry Classification (NAICS) for industries. Prior to 2003, CFOI used the Standard Industrial Classification (SIC) system. The substantial differences between these systems result in breaks in series for industry data.

²Deaths per 100,000 workers.

Workplace Fatality Rates by Industry Sector, 2003–2007^{1,2}

(Employment-Based Rates)

Industry Sector	2003	2004	2005	2006	2007
<u>All Industries</u>	4.0	4.1	4.0	4.0	3.8
Agriculture, Forestry, Fishing and Hunting	31.2	30.5	32.5	30.0	27.9
Mining	26.9	28.3	25.6	28.1	25.1
Construction	11.7	12.0	11.1	10.9	10.5
Manufacturing	2.5	2.8	2.4	2.8	2.5
Wholesale Trade	4.2	4.5	4.6	4.9	4.7
Retail Trade	2.1	2.3	2.4	2.2	2.1
Transportation and Warehousing	17.5	18.0	17.7	16.8	16.9
Utilities	3.7	6.1	3.6	6.3	4.0
Information	1.8	1.7	2.0	2.0	2.3
Finance, Insurance, Real Estate	1.4	1.2	1.0	1.2	1.2
Professional and Administrative	3.3	3.3	3.5	3.2	3.1
Educational and Health Services	0.8	0.8	0.8	0.9	0.7
Leisure and Hospitality	2.4	2.2	1.8	2.3	2.2
Other Services, Except Public Administration	2.8	3.0	3.0	2.6	2.5
Government	2.5	2.5	2.4	2.4	2.5

Source: U.S. Department of Labor, Bureau of Labor Statistics, Census of Fatal Occupational Injuries.

¹Deaths per 100,000 workers.

²Fatality rate is an employment-based calculation using employment figures that are annual average estimates of employed civilians, 16 years of age and older, from the Current Population Survey (CPS). In 2008, CFOI switched to an hours-based fatality rate calculation. Employment-based fatality rates should not be compared directly with hours-based rates.

Note: Beginning with the 2003 reference year, both CFOI and the Survey of Occupational Injuries and Illnesses began using the 2002 North American Industry Classification System (NAICS) for industries. Prior to 2003, the surveys used the Standard Industrial Classification (SIC) system. The substantial differences between these systems result in breaks in series for industry data.

Workplace Fatality Rates by Industry Sector, 2008–2014^{1,2}
(Hours-Based Rates)

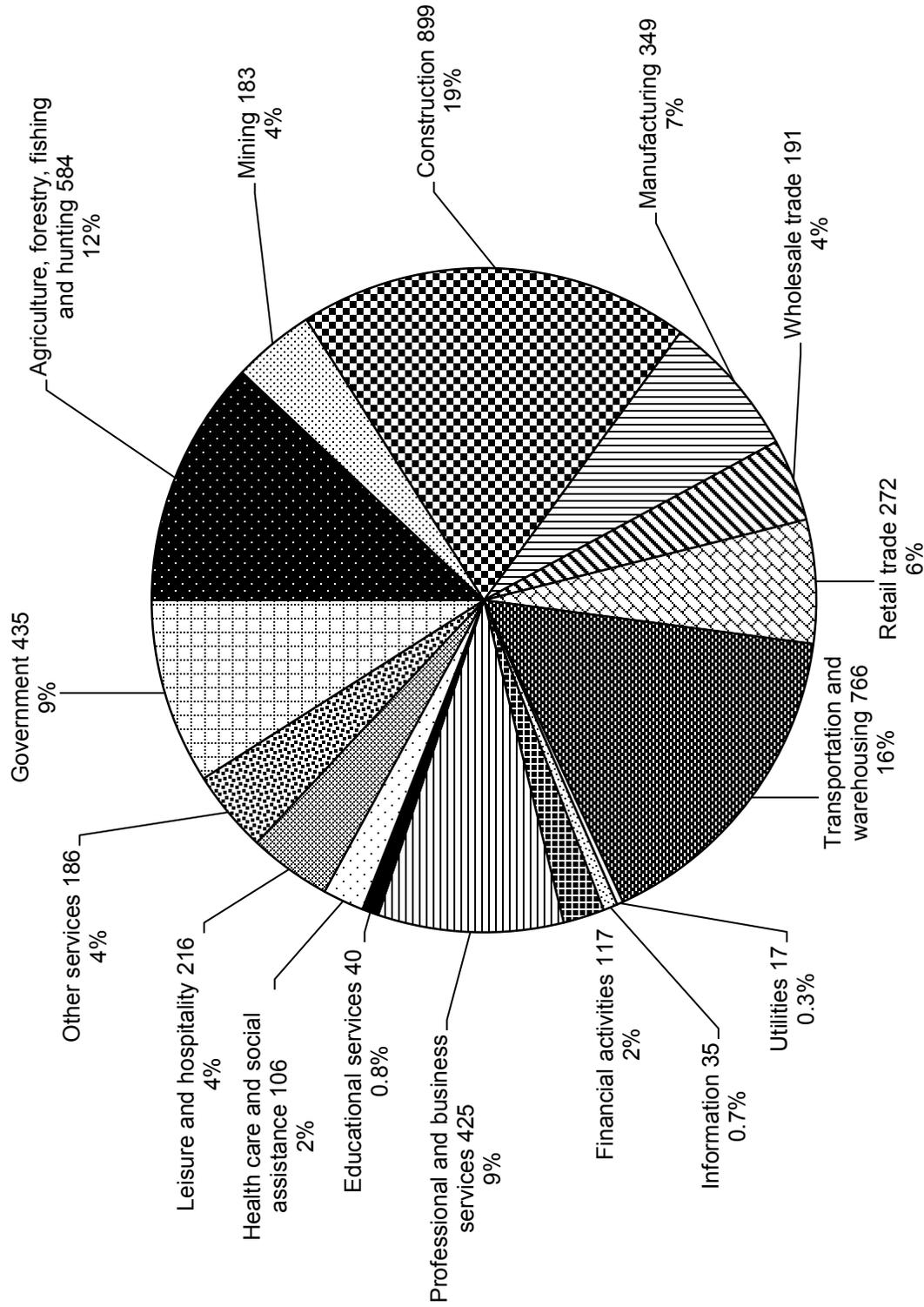
Industry Sector	2008	2009	2010	2011	2012	2013	2014
<u>All Industries</u>	3.7	3.5	3.6	3.5	3.4	3.3	3.4
Agriculture, Forestry, Fishing and Hunting	30.4	27.2	27.9	24.9	22.8	23.2	25.6
Mining, Quarrying, and Oil and Gas Extraction	18.1	12.4	19.8	15.9	15.9	12.4	14.2
Construction	9.7	9.9	9.8	9.1	9.9	9.7	9.8
Manufacturing	2.5	2.3	2.3	2.2	2.2	2.1	2.3
Wholesale Trade	4.4	5.0	4.9	4.9	5.4	5.3	5.1
Retail Trade	2.0	2.2	2.2	1.9	1.9	1.9	1.9
Transportation and Warehousing	14.9	13.3	13.7	15.3	14.6	14.0	14.1
Utilities	3.9	1.7	2.8	4.2	2.5	2.6	1.7
Information	1.5	1.1	1.5	1.9	1.5	1.5	1.2
Financial Activities	1.1	1.2	1.3	1.1	0.9	0.9	1.2
Professional and Business Services	2.8	3.1	2.6	2.9	2.7	2.8	2.7
Educational and Health Services	0.7	0.8	0.9	0.8	0.7	0.7	0.7
Leisure and Hospitality	2.2	2.2	2.3	2.2	2.2	1.9	2.0
Other Services, Except Public Administration	2.6	2.8	3.0	3.0	2.7	2.7	2.7
Government	2.4	1.9	2.2	2.2	2.0	2.0	1.9

Source: U.S. Department of Labor, Bureau of Labor Statistics, Census of Fatal Occupational Injuries.

¹Deaths per 100,000 workers.

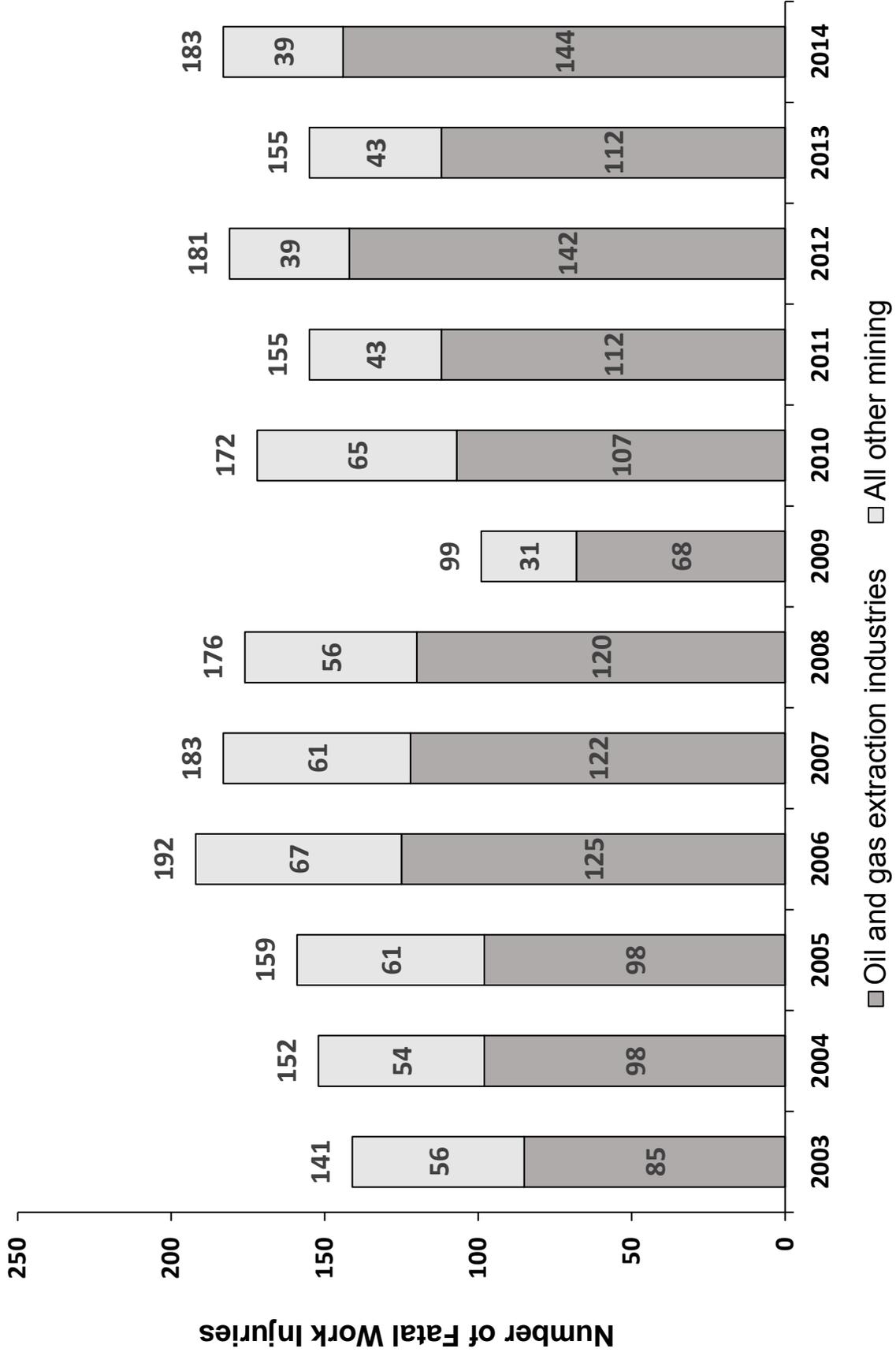
²In 2008, CFOI switched to an hours-based fatality rate calculation from an employment-based calculation. Fatality rates for 2007 were calculated using both approaches during the transition to hours-based rates. Fatality rate is an hours-based calculation using total hours worked figures that are annual average estimates of total at work multiplied by average hours for civilians, 16 years of age and older, from the Current Population Survey (CPS). Hours-based fatality rates should not be compared directly with employment-based rates that CFOI calculated for 1992 to 2007.

Occupational Fatalities by Industry Sector, 2014 Private Sector, Government and Self Employed (Total Fatalities 4,821)



Source: U.S. Department of Labor, Bureau of Labor Statistics, Census of Fatal Occupational Injuries, 2014.

Fatal Occupational Injuries in the Private Sector Mining, Quarrying, and Oil and Gas Extraction Industry, 2003–2014

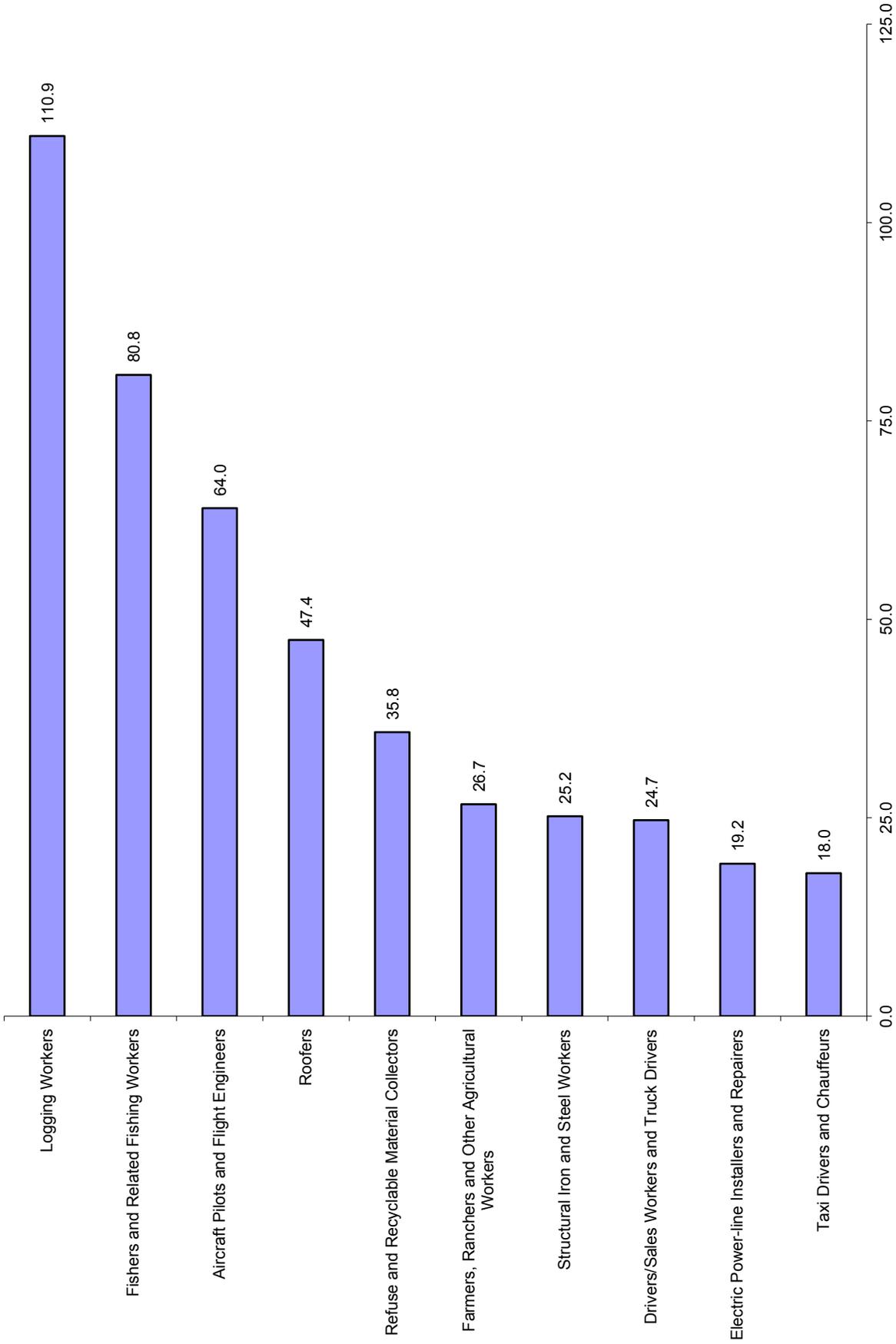


Source: U.S. Bureau of Labor Statistics, U.S. Department of Labor.

Note: Oil and gas extraction industries include oil and gas extraction (NAICS 2111), drilling oil and gas wells (NAICS 21311), and support activities for oil and gas operations (NAICS 21312).

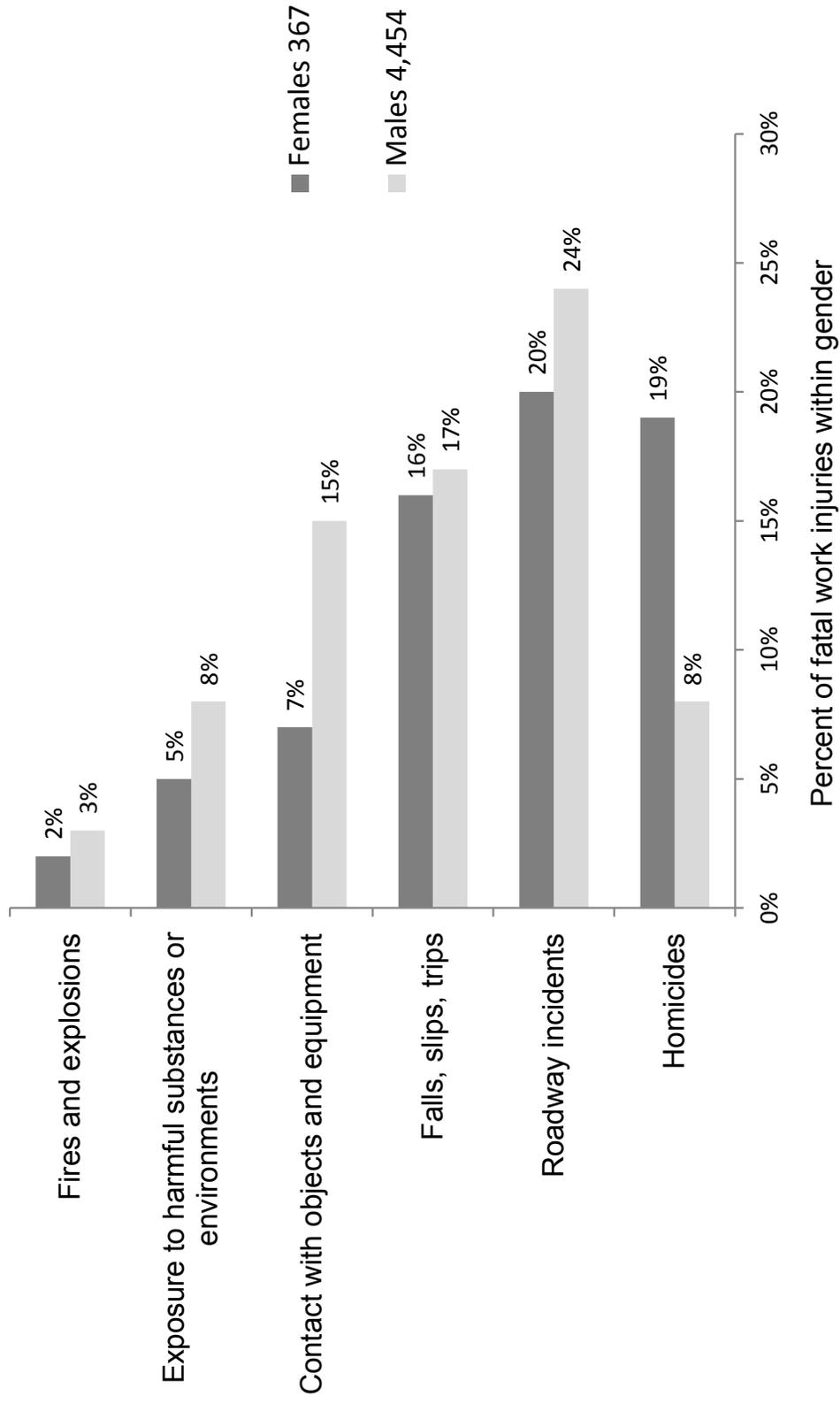
Selected Occupations With High Fatality Rates, 2014

(Per 100,000 Workers)
National Fatality Rate = 3.4



Source: U.S. Department of Labor, Bureau of Labor Statistics, Census of Fatal Occupational Injuries, 2014.

Distribution of Fatal Injury Events by Gender of Worker, 2014



Profile of Workplace Homicides, 2014

Characteristic	Subcharacteristics	Deaths
Total Homicides		409
Gender	Women	68
	Men	341
Employee Status	Wage and salary workers	293
	Self employed	116
Race	White	200
	Black	88
	Latino	71
Leading Primary Source	Assailant, suspect	216
	Co-worker or work associate	61
	Other client or customer	46
	Relative or domestic partner	30
Leading Secondary Source	Firearm	308
	Knives	33
Leading Worker Activity	Tending a retail establishment	129
	Protective service activities	89
	Vehicular and transportation operations	46
Leading Location	Public building	182
	Street or highway	66
	Private residence	54
Leading Occupations	Supervisors of sales workers	58
	Motor vehicle operators	50
	Law enforcement workers	46
Leading Industries	Retail trade	106
	Local government	53
	Accommodations and food services	47
	Transportation and warehousing ¹	47

Source: U.S. Department of Labor, Bureau of Labor Statistics, Census of Fatal Occupational Injuries, 2014.

¹Taxi service accounted for 27 of these deaths.

Total Worker Fatality Rates Compared with Aging Worker Fatality Rates, 1992–2014¹



Source: U.S. Department of Labor, Bureau of Labor Statistics, Survey of Occupational Injuries and Illnesses, 1992–2014.

¹All rates per 100,000 workers.

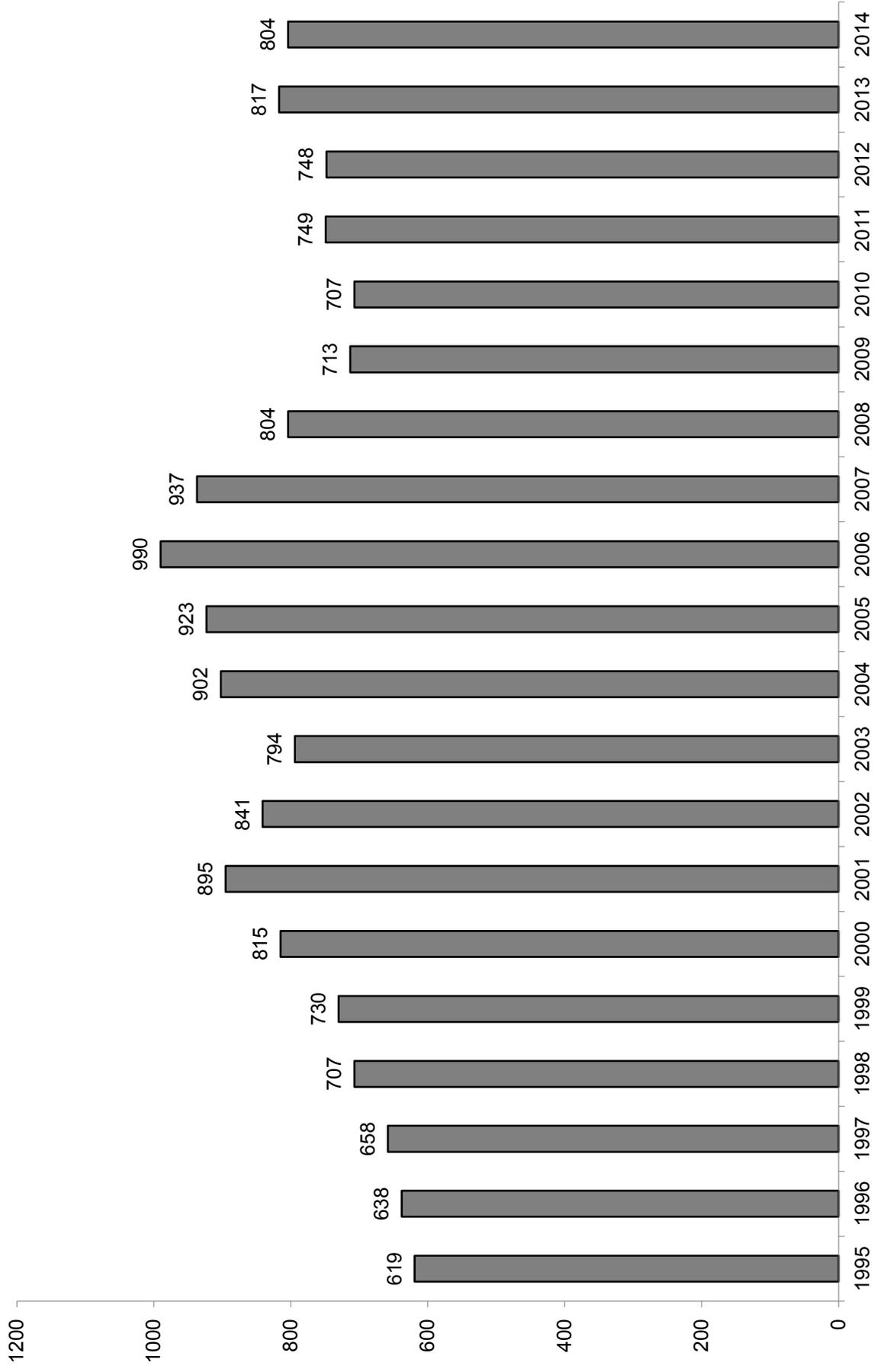
Fatal Work Injuries by Race, 1994–2014

	1994	1995	1996	1997	1998	1999	2000	2001 ¹	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Total Fatalities	6,632	6,275	6,202	6,238	6,055	6,054	5,920	5,900	5,534	5,575	5,764	5,734	5,840	5,657	5,214	4,551	4,690	4,693	4,628	4,585	4,821
White	4,954	4,599	4,586	4,576	4,478	5,019	4,244	4,175	3,926	3,988	4,066	3,977	4,019	3,867	3,663	3,204	3,363	3,323	3,177	3,125	3,332
Black or African American	695	684	615	661	583	627	575	565	491	543	546	584	565	609	533	421	412	440	486	439	475
Latino	624	619	638	658	707	730	815	895	841	794	902	923	990	937	804	713	707	749	748	817	804
Asian or Pacific Islander	179	161	170	195	148	192	185	182	140	158	180	163	159	172	152	148	149	124	154	125	142
American Indian or Alaskan Native	39	27	35	34	28	57	33	48	40	42	28	50	46	29	32	33	32	30	37	35	34
Other Races/Not Reported	141	185	158	114	111	146	68	50	96	50	42	35	61	43	30	32	27	27	26	44	34

Source: U.S. Department of Labor, Bureau of Labor Statistics, Census of Fatal Occupational Injuries, 1994–2014.

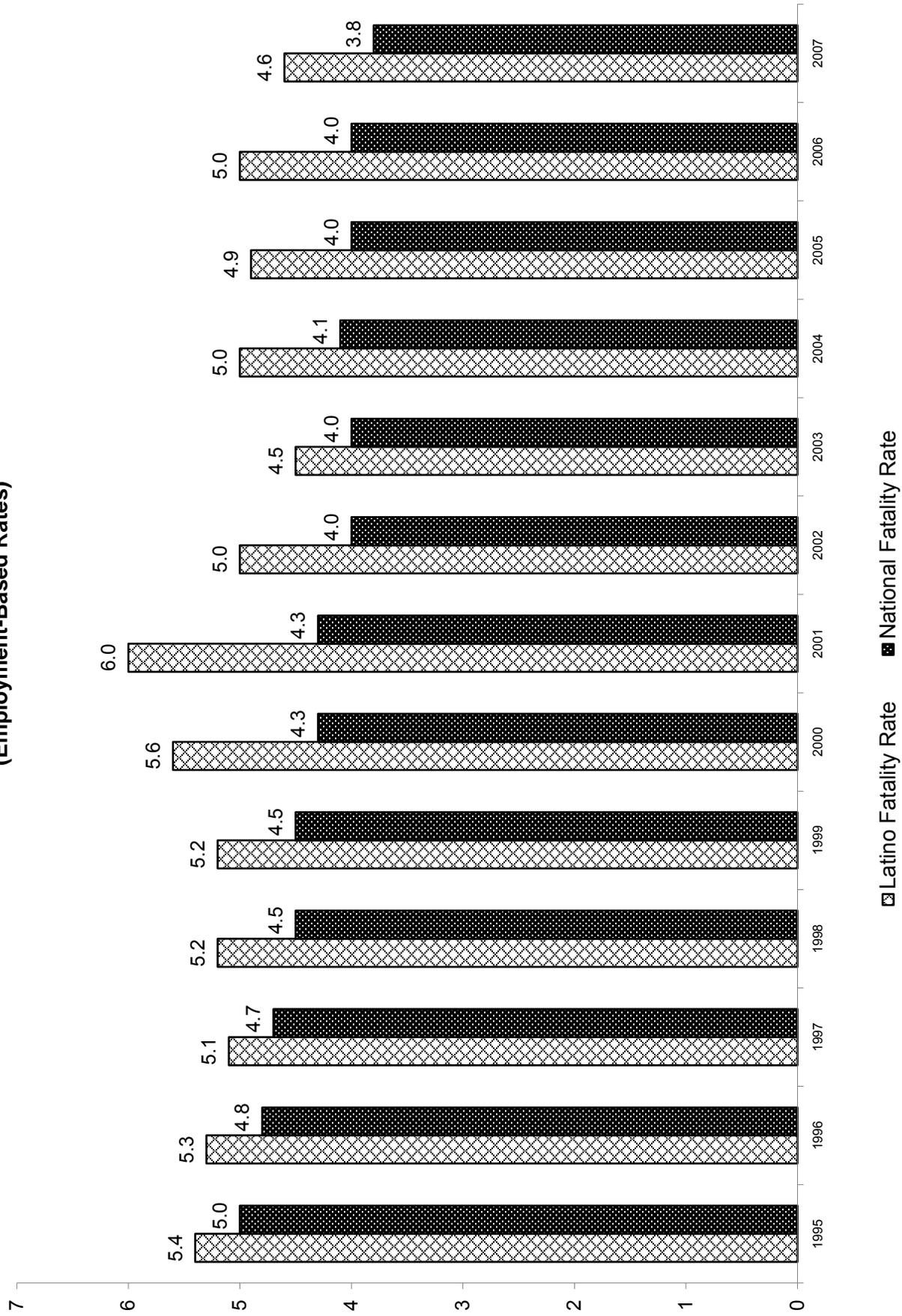
¹Excludes fatalities from the September 11 terrorist attacks.

Number of Fatal Occupational Injuries to Hispanic and Latino Workers, 1995–2014



Source: U.S. Department of Labor, Bureau of Labor Statistics, Census of Fatal Occupational Injuries.

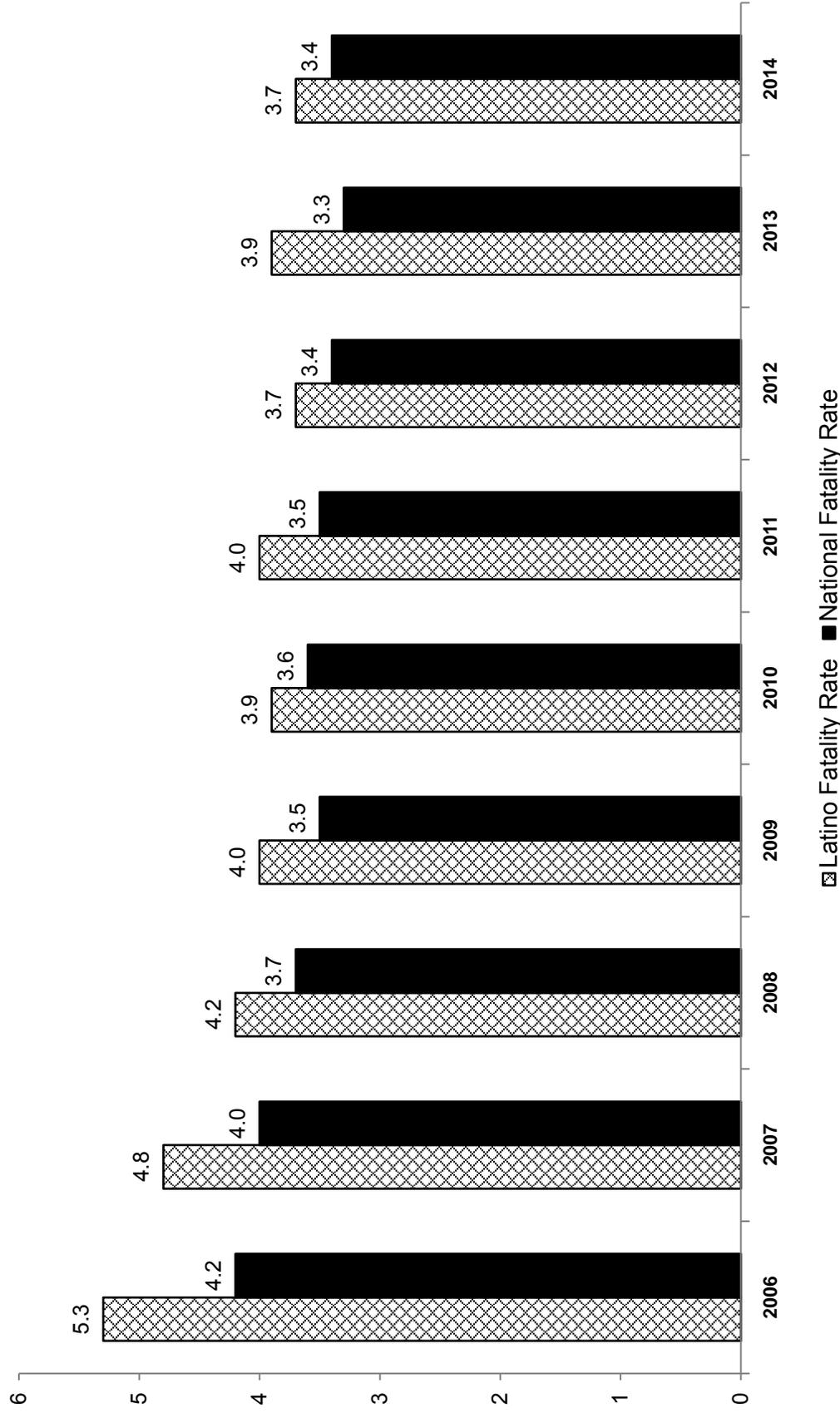
Rate¹ of Fatal Occupational Injuries to Hispanic and Latino Workers, 1995–2007 (Employment-Based Rates)



Source: U.S. Department of Labor, Bureau of Labor Statistics, Census of Fatal Occupational Injuries (CFOI).

¹Incidence rate represents the number of fatalities per 100,000 workers. Fatality rate is an employment-based calculation. In 2008, CFOI switched to an hours-based fatality rate calculation. Employment-based fatality rates should not be compared directly with hours-based rates.

Rate of Fatal Occupational Injuries to Hispanic and Latino Workers, 2006–2014¹ (Hours-Based Rates)



Source: U.S. Department of Labor, Bureau of Labor Statistics, Census of Fatal Occupational Injuries (CFOI).

¹Incidence rate represents the number of fatalities per 100,000 workers. In 2008, CFOI switched to an hours-based calculation from an employment-based calculation it used from 1992 to 2007. Fatality rate is an hours-based calculation using total hours worked figures that are annual average estimates of total at work multiplied by average hours for civilians, 16 years of age and older, from the Current Population Survey (CPS). Fatality rates for 2006 and 2007 were calculated by CFOI using both employment-based and hours-based calculations during the transition to hours-based rates beginning exclusively in 2008.

Profile of Hispanic and Latino Worker Fatalities, 2014

Characteristic	Subcharacteristics	Deaths
Total Fatalities		804
Country of Birth	Native-born	291
	Foreign-born	513
Leading Birthplace Countries	Mexico	336
	United States	291
	Guatemala	39
Employee Status	Wage and salary workers	697
	Self employed	107
Gender	Men	763
	Women	41
Leading Occupations	Construction trades workers	186
	Motor vehicle operators	122
	Grounds maintenance	59
	Agricultural workers	44
Leading Industries	Construction	233
	Administrative and support and waste management and remediation services ¹	100
	Transportation and warehousing ²	84
Leading Event or Exposure	Transportation incidents	289
	Fall, slip, trip	178
	Contact with object/equipment	122
	Violence ³	107

Source: U.S. Department of Labor, Bureau of Labor Statistics, Census of Fatal Occupational Injuries, 2014.

¹Landscaping services accounted for 63 of these deaths.

²Truck transportation accounted for 60 of these deaths.

³Excludes animal- and insect-related incidents.

Profile of Foreign-Born Worker Fatalities, 2014

Characteristic	Subcharacteristics	Number
Total Fatalities		846
Leading Birthplace Countries	Mexico	340
	Guatemala	40
	Cuba	34
	India	28
Employee Status	Wage and salary workers	691
	Self employed	155
Gender	Men	791
	Women	55
Leading Occupations	Construction trades workers	177
	Motor vehicle operators	139
	Grounds maintenance	50
	Agricultural workers	44
	Material moving workers	36
Leading Industries	Construction	217
	Transportation and warehousing ¹	136
	Administrative and support and waste management and remediation services ²	93
	Retail trade	75
Leading Event or Exposure	Transportation incidents	280
	Fall, slip, trip	183
	Violence ³	178
	Contact with object/equipment	118

Source: U.S. Department of Labor, Bureau of Labor Statistics, Census of Fatal Occupational Injuries, 2014.

¹Truck transportation accounted for 82 of these deaths.

²Landscaping services accounted for 56 of these deaths.

³Excludes animal- and insect-related incidents.

Workplace Injury and Illness Incidence Rates, Private Sector, 1973–2014 (Per 100 Workers)

Year	Total Case Rate	Cases with Days Away from Work, Job Transfer or Restriction		
		Total	Cases with Days Away from Work	Cases with Job Transfer or Restriction ¹
1973	11.0	3.4	N/A	N/A
1974	10.4	3.5	N/A	N/A
1975	9.1	3.3	N/A	N/A
1976	9.2	3.5	3.3	0.2
1977	9.3	3.8	3.6	0.2
1978	9.4	4.1	3.8	0.3
1979	9.5	4.3	4.0	0.3
1980	8.7	4.0	3.7	0.3
1981	8.3	3.8	3.5	0.3
1982	7.7	3.5	3.2	0.3
1983	7.6	3.4	3.2	0.3
1984	8.0	3.7	3.4	0.3
1985	7.9	3.6	3.3	0.3
1986	7.9	3.6	3.3	0.3
1987	8.3	3.8	3.4	0.4
1988	8.6	4.0	3.5	0.5
1989	8.6	4.0	3.4	0.6
1990	8.8	4.1	3.4	0.7
1991	8.4	3.9	3.2	0.7
1992	8.9	3.9	3.0	0.8
1993	8.5	3.8	2.9	0.9
1994	8.4	3.8	2.8	1.0
1995	8.1	3.6	2.5	1.1
1996	7.4	3.4	2.2	1.1
1997	7.1	3.3	2.1	1.2
1998	6.7	3.1	2.0	1.2
1999	6.3	3.0	1.9	1.2
2000	6.1	3.0	1.8	1.2
2001	5.7	2.8	1.7	1.1
2002	5.3	2.8	1.6	1.2
2003	5.0	2.6	1.5	1.1
2004	4.8	2.5	1.4	1.1
2005	4.6	2.4	1.4	1.0
2006	4.4	2.3	1.3	1.0
2007	4.2	2.1	1.2	0.9
2008	3.9	2.0	1.1	0.9
2009	3.6	2.0	1.1	0.8
2010	3.5	1.8	1.1	0.8
2011	3.5	1.8	1.1	0.7
2012	3.4	1.8	1.0	0.7
2013	3.3	1.7	1.0	0.7
2014	3.2	1.7	1.0	0.7

Source: Department of Labor, Bureau of Labor Statistics.

¹Through 2001, this column includes cases involving restricted activity only.

Workplace Injury and Illness Rates by Industry Sector, 1973–2002¹ Per 100 Full-Time Workers

Year	Total Case Rate All Ind.	Total Case Rate Mfg.	Total Case Rate Const.	Total Case Rate Mining	Total Case Rate Finance	Total Case Rate Agri.	Total Case Rate Trans./Util.	Total Case Rate Trade	Total Case Rate Service
1973	11.0	15.3	19.8	12.5	2.4	11.6	10.3	8.6	6.2
1974	10.4	14.6	18.3	10.2	2.4	9.9	10.5	8.4	5.8
1975	9.1	13.0	16.0	11.0	2.2	8.5	9.4	7.3	5.4
1976	9.2	13.2	15.3	11.0	2.0	11.0	9.8	7.5	5.3
1977	9.3	13.1	15.5	10.9	2.0	11.5	9.7	7.7	5.5
1978	9.4	13.2	16.0	11.5	2.1	11.6	10.1	7.9	5.5
1979	9.5	13.3	16.2	11.4	2.1	11.7	10.2	8.0	5.5
1980	8.7	12.2	15.7	11.2	2.0	11.9	9.4	7.4	5.2
1981	8.3	11.5	15.1	11.6	1.9	12.3	9.0	7.3	5.0
1982	7.7	10.2	14.6	10.5	2.0	11.8	8.5	7.2	4.9
1983	7.6	10.0	14.8	8.4	2.0	11.9	8.2	7.0	5.1
1984	8.0	10.6	15.5	9.7	1.9	12.0	8.8	7.2	5.2
1985	7.9	10.4	15.2	8.4	2.0	11.4	8.6	7.4	5.4
1986	7.9	10.6	15.2	7.4	2.0	11.2	8.2	7.7	5.3
1987	8.3	11.9	14.7	8.5	2.0	11.2	8.4	7.4	5.5
1988	8.6	13.1	14.6	8.8	2.0	10.9	8.9	7.6	5.4
1989	8.6	13.1	14.3	8.5	2.0	10.9	9.2	8.0	5.5
1990	8.8	13.2	14.2	8.3	2.4	11.6	9.6	7.9	6.0
1991	8.4	12.7	13.0	7.4	2.4	10.8	9.3	7.6	6.2
1992	8.9	12.5	13.1	7.3	2.9	11.6	9.1	8.4	7.1
1993	8.6	12.1	12.2	6.8	2.9	11.2	9.5	8.1	6.7
1994	8.4	12.2	11.8	6.3	2.7	10.0	9.3	7.9	6.5
1995	8.1	11.6	10.6	6.2	2.6	9.7	9.1	7.5	6.4
1996	7.4	10.6	9.9	5.4	2.4	8.7	8.7	6.8	6.0
1997	7.1	10.3	9.5	5.9	2.2	8.4	8.2	6.7	5.6
1998	6.7	9.7	8.8	4.9	1.9	7.9	7.3	6.5	5.2
1999	6.3	9.2	8.6	4.4	1.8	7.3	7.3	6.1	4.9
2000	6.1	9.0	8.3	4.7	1.9	7.1	6.9	5.9	4.9
2001	5.7	8.1	7.9	4.0	1.8	7.3	6.9	5.6	4.6
2002	5.3	7.2	7.1	4.0	1.7	6.4	6.1	5.3	4.6

Source: U.S. Department of Labor, Bureau of Labor Statistics, Incidence Rates of Nonfatal Occupational Injuries and Illnesses by Industry Division, 1973–2002.

¹Beginning with the 2003 reference year, the Survey of Occupational Injuries and Illnesses began using the North American Industry Classification System (NAICS) for industries. Prior to 2003, the survey used the Standard Industrial Classification (SIC) system. The substantial differences between these systems result in breaks in series for industry data.

Workplace Injury and Illness Rates by Industry Sector, 2004–2014¹

	2004	2005	2006	2007	2008 ²	2009	2010	2011	2012	2013	2014
<u>Total Case Rate, Private Industry</u>	4.8	4.6	4.4	4.2	3.9	3.6	3.5	3.5	3.4	3.3	3.2
Natural resources and mining	5.3	5.1	4.9	4.4	4.1	4.0	3.7	4.0	3.8	3.9	3.8
Agriculture, forestry, fishing and hunting	6.4	6.1	6.0	5.4	5.3	5.3	4.8	5.5	5.5	5.7	5.5
Mining, quarrying, and oil and gas extraction	3.8	3.6	3.5	3.1	2.9	2.4	2.3	2.2	2.1	2.0	2.0
Construction	6.4	6.3	5.9	5.4	4.7	4.3	4.0	3.9	3.7	3.8	3.6
Manufacturing	6.8	6.3	6.0	5.6	5.0	4.3	4.4	4.4	4.3	4.0	4.0
Trade, transportation and utilities	5.5	5.2	5.0	4.9	4.4	4.1	4.1	3.9	3.9	3.8	3.6
Wholesale trade	4.5	4.5	4.1	4.0	3.7	3.3	3.4	3.2	3.3	3.1	2.9
Retail trade	5.3	5.0	4.9	4.8	4.4	4.2	4.1	3.9	4.0	3.8	3.6
Transportation and warehousing	7.3	7.0	6.5	6.4	5.7	5.2	5.2	5.0	4.9	4.7	4.8
Utilities	5.2	4.6	4.1	4.0	3.5	3.3	3.1	3.5	2.8	2.1	2.4
Information	2.0	2.1	1.9	2.0	2.0	1.9	1.8	1.6	1.4	1.5	1.4
Financial activities	1.6	1.7	1.5	1.4	1.5	1.5	1.3	1.4	1.3	1.3	1.2
Professional and business services	2.4	2.4	2.1	2.1	1.9	1.8	1.7	1.7	1.6	1.6	1.5
Educational and health services³	5.8	5.5	5.4	5.2	5.0	5.0	4.8	4.7	4.5	4.4	4.2
Leisure and hospitality	4.7	4.7	4.6	4.5	4.2	3.9	3.9	4.0	3.9	3.8	3.6
Other services, except public administration	3.2	3.2	2.9	3.1	3.1	2.9	2.7	2.6	2.5	2.5	2.5
State and local government					6.3	5.8	5.7	5.7	5.6	5.2	5.0
State government					4.7	4.6	4.6	4.6	4.4	3.9	4.1
Local government					7.0	6.3	6.1	6.1	6.1	5.7	5.4

Source: U.S. Department of Labor, Bureau of Labor

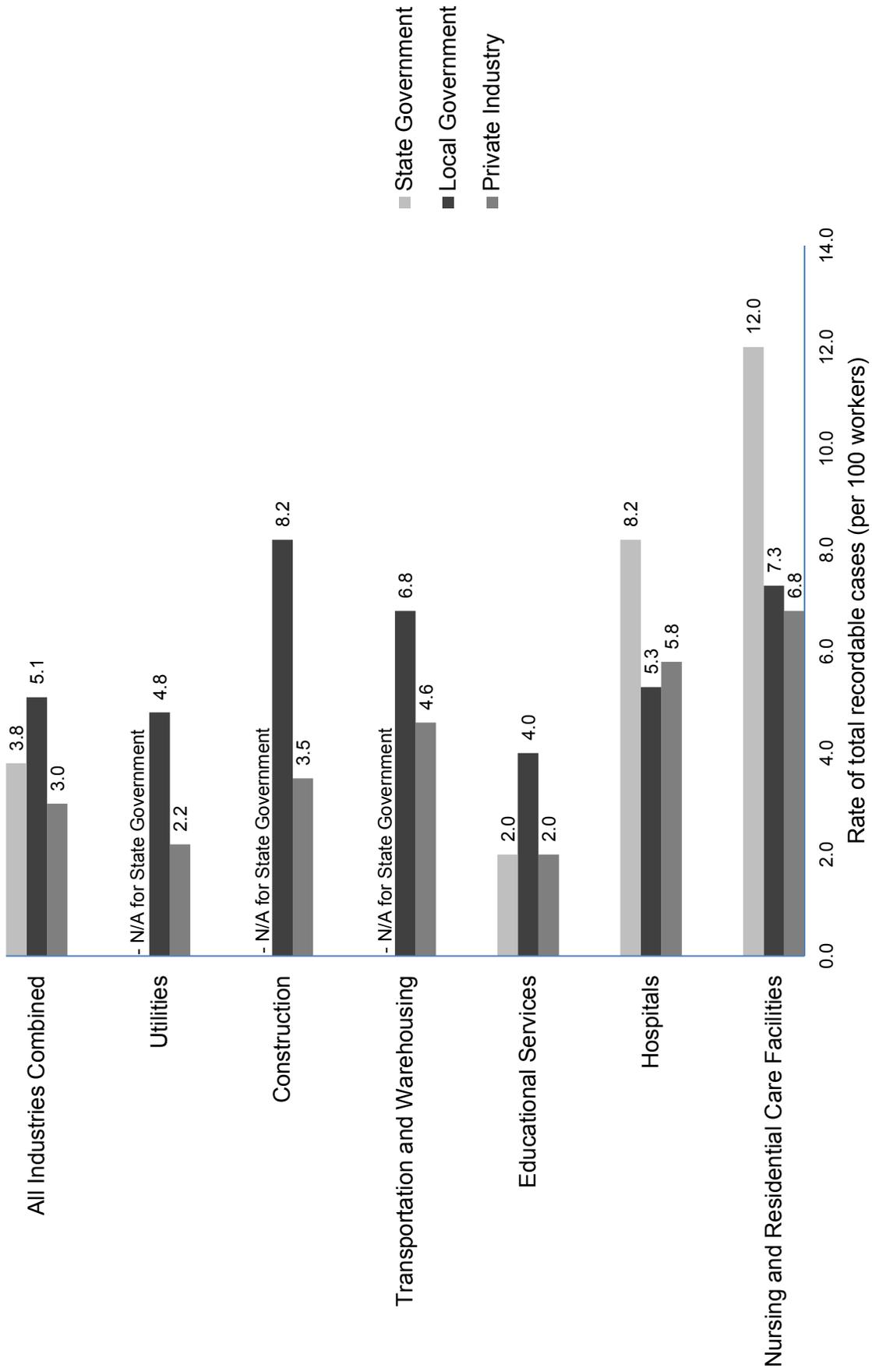
¹Total recordable cases per 100 workers.

²Beginning with 2008, the Bureau of Labor Statistics provided national public-sector estimates for state and local government workers.

³The injury and illness rate for nursing and residential care facilities was 7.1 in 2014.

Note: Beginning with the 2003 reference year, both CFI and the Survey of Occupational Injuries and Illnesses began using the 2002 North American Industry Classification System (NAICS) for industries. Prior to 2003, the surveys used the Standard Industrial Classification (SIC) system. The substantial differences between these systems result in breaks in series of industry data.

Rate of Workplace Injuries and Illnesses for Selected Industries in State Government, Local Government and Private Industry, 2014



Source: U.S. Department of Labor, Bureau of Labor Statistics.

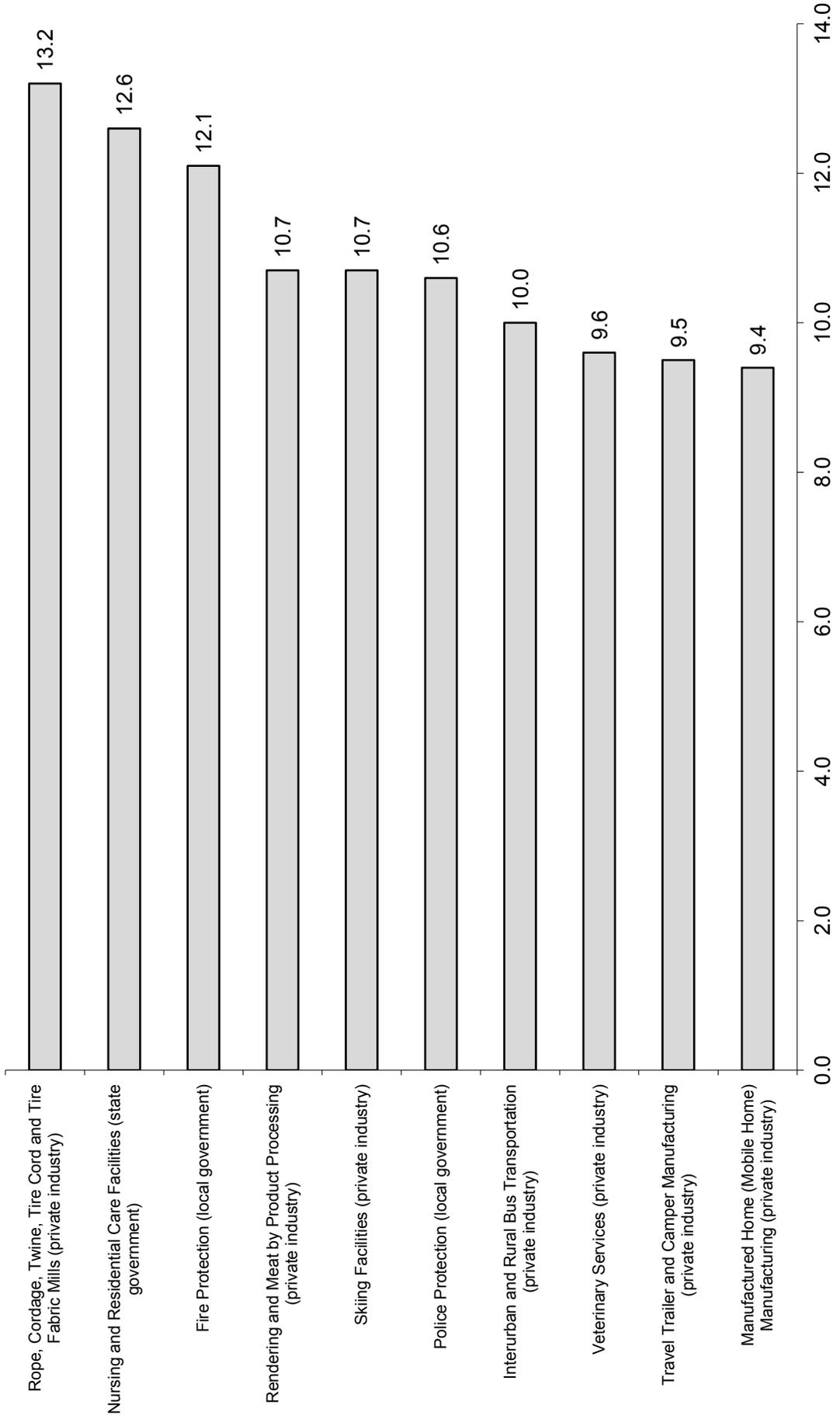
Industries with the Highest Total Nonfatal Injury and Illness Rates, 2014

(Per 100 Workers)

Private Industry = 3.2

State Government = 4.1

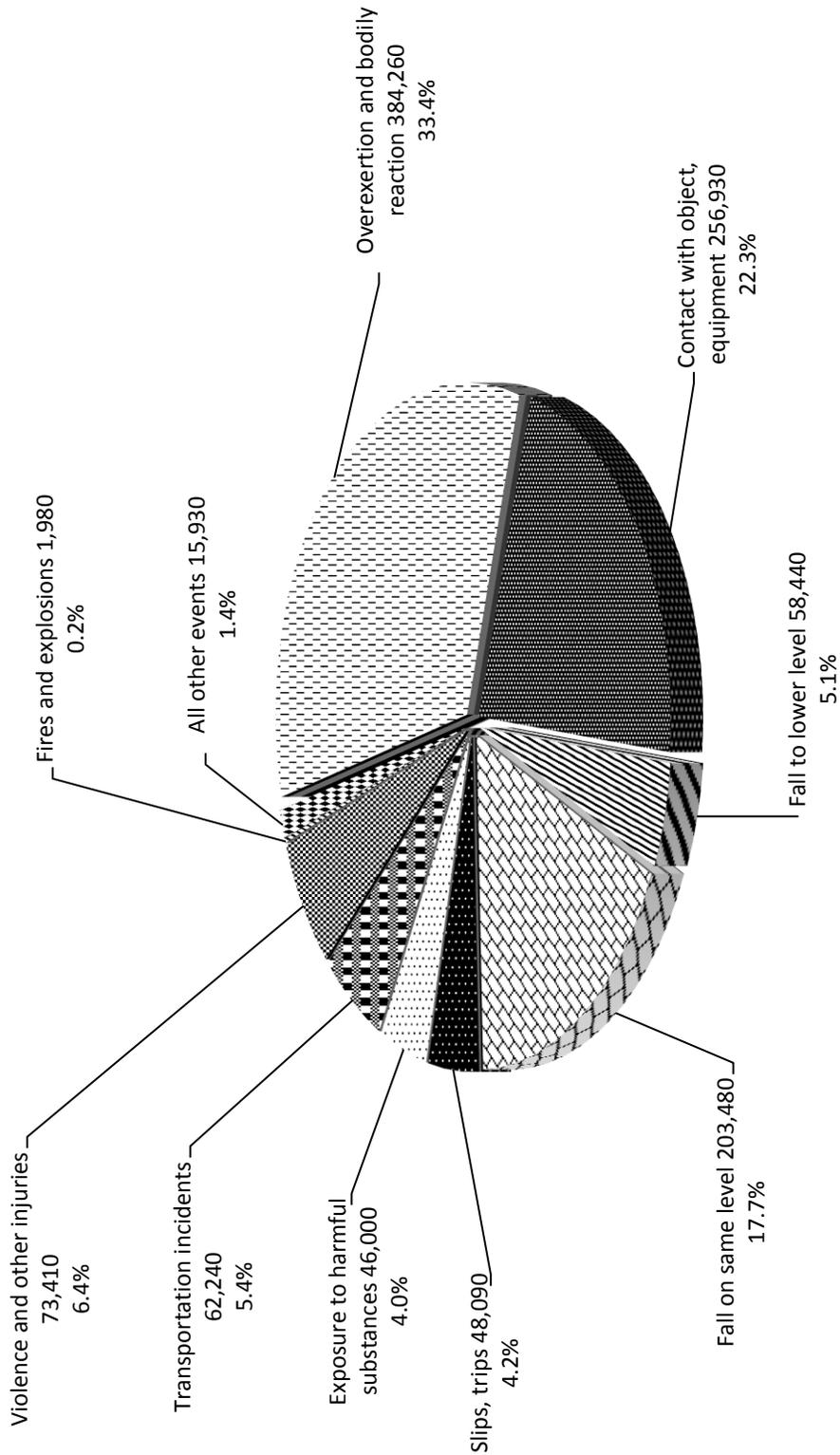
Local Government = 5.4



Source: U.S. Department of Labor, Bureau of Labor Statistics, Survey of Occupational Injuries and Illnesses, 2014.

Nonfatal Occupational Injuries and Illnesses with Days Away from Work by Event or Exposure, 2014¹

Total = 1,150,760



Source: U.S. Department of Labor, Bureau of Labor Statistics, Survey of Occupational Injuries and Illnesses, 2014.

¹Includes total number in private industry, state and local government.

Number of Injury and Illness Cases in Private Industry with Days Away from Work¹ Among Hispanic and Latino Workers, 1995–2014

Year	Number of Hispanic and Latino Worker Cases	Percent of Total Injury and Illness Cases
1995	191,665	9.4
1996	169,300	9.0
1997	187,221	10.2
1998	179,399	10.4
1999	182,896	10.7
2000	186,029	11.2
2001	191,959	12.5
2002 ²	180,419	12.6
2003 ³	161,330	12.3
2004 ³	164,390	13.1
2005 ³	163,440	13.2
2006 ³	159,440	13.5
2007 ³	157,320	13.6
2008 ³	145,870	13.5
2009 ³	125,790	13.0
2010 ³	122,970	13.2
2011 ³	117,210	12.9
2012 ³	118,940	13.1
2013 ³	124,330	13.6
2014	124,280	13.6

Source: U.S. Department of Labor, Bureau of Labor Statistics.

¹Days away from work include those that result in days away from work with or without restricted work activity. They do not include cases involving only restricted work activity.

²Days away from work cases include those that result in days away from work with or without job transfer or restriction.

³Classification of workers by race and ethnicity was revised in 2003 to conform to other government data. One result of this revision is that individuals may be categorized in more than one race or ethnic group. Cases reflected here are for those who reported Hispanic or Latino only and Hispanic or Latino and other race. Race and ethnicity data reporting is not mandatory in the BLS Survey of Occupational Injuries and Illnesses. This resulted in 30% or more of the cases not reporting race and ethnicity in 2003 through 2014.

Workplace Injuries and Illnesses to Women Involving Days Away from Work, Private Industry, 2014

Characteristic	Subcharacteristics	Number
Total Number of Injuries and Illnesses with Days Away from Work		348,720
Leading Industries	Hospitals	43,720
	Nursing and residential care facilities	43,150
	Food service and drinking places	27,910
Leading Occupations	Nursing, psychiatric and home health aides	41,990
	Building cleaning workers	24,510
	Registered nurses	20,490
Leading Nature	Sprains, strains, tears	132,330
	Soreness, pain, hurt, unspecified	63,750
	Bruises, contusions	35,620
Leading Event or Exposure	Overexertion and bodily reaction	121,190
	Falls, slips, trips	114,350
	Contact with objects and equipment	60,910
Leading Source	Bodily motion or position of injured, ill worker	54,940
	Floors ¹	50,120
	Patient	36,390
Median Days Away from Work	Total cases	9
	Women	7

Source: U.S. Department of Labor, Bureau of Labor Statistics, Survey of Occupational Injuries and Illnesses, 2014.

¹This category accounts for floors only. Floors, walkways and ground surfaces combined accounted for 87,050 injuries and illnesses involving days away from work for women.

Workplace Injuries and Illnesses to Men Involving Days Away from Work, Private Industry, 2014

Characteristic	Subcharacteristics	Number
Total Number of Injuries and Illnesses with Days Away from Work		560,970
Leading Industries	Specialty trade contractors	47,360
	Truck transportation	31,540
	Administrative and waste services	28,210
Leading Occupations	Driver/sales workers and truck drivers	79,940
	Laborers and material movers, hand	49,980
	Maintenance and repair workers, general	20,070
Leading Nature	Sprains, strains, tears	196,920
	Soreness, pain, hurt, unspecified	86,080
	Cuts, lacerations	56,110
Leading Event or Exposure	Overexertion and bodily reaction	190,020
	Contact with objects and equipment	163,180
	Falls, slips, trips	131,740
Leading Source	Bodily motion or position of injured, ill worker	79,830
	Containers non-pressurized	45,710
	Floors ¹	25,200
Median Days Away from Work	Total cases	9
	Men	10

Source: U.S. Department of Labor, Bureau of Labor Statistics, Survey of Occupational Injuries and Illnesses, 2014.

¹This category accounts for floors only. Floors, walkways and ground surfaces combined accounted for 71,190 injuries and illnesses involving days away from work for men.

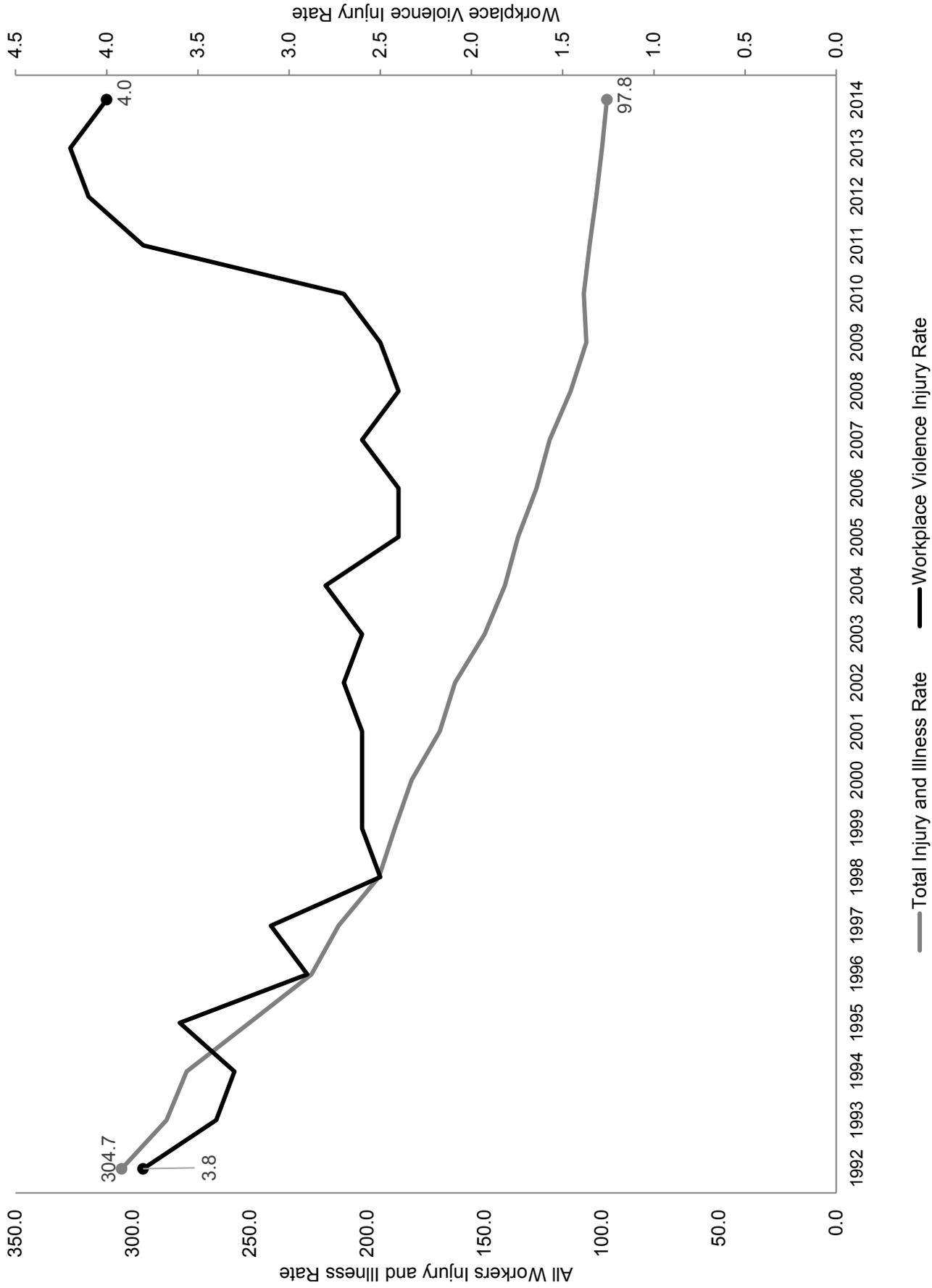
Workplace Violence Events Leading to Injuries Involving Days Away from Work, Private Industry, 2014¹

Characteristic	Subcharacteristics	Number
Total Events		26,540
Gender	Women	17,490
	Men	8,990
	Not reported	60
Leading Industries	Nursing and residential care facilities	7,360
	Hospitals	6,160
	Social assistance	3,030
	Ambulatory health care services	1,630
Leading Occupations	Nursing, psychiatric and home health aides	6,570
	Registered nurses	2,430
	Personal care aides	2,310
Leading Nature of Injury	Sprains, strains, tears	8,120
	Soreness, pain	4,860
	Bruises, contusions	4,070
Leading Source	Patient	13,010
	Other client or customer	4,790
	Student	2,920
Median Days Away from Work	Overall, all injuries and illnesses	9
	Intentional injury by person	5
	Injury by person—unintentional or intent unknown	7

Source: U.S. Department of Labor, Bureau of Labor Statistics, Survey of Occupational Injuries and Illnesses, 2014.

¹Violence events in private industry include intentional injury by person and injury by person—unintentional or intent unknown.

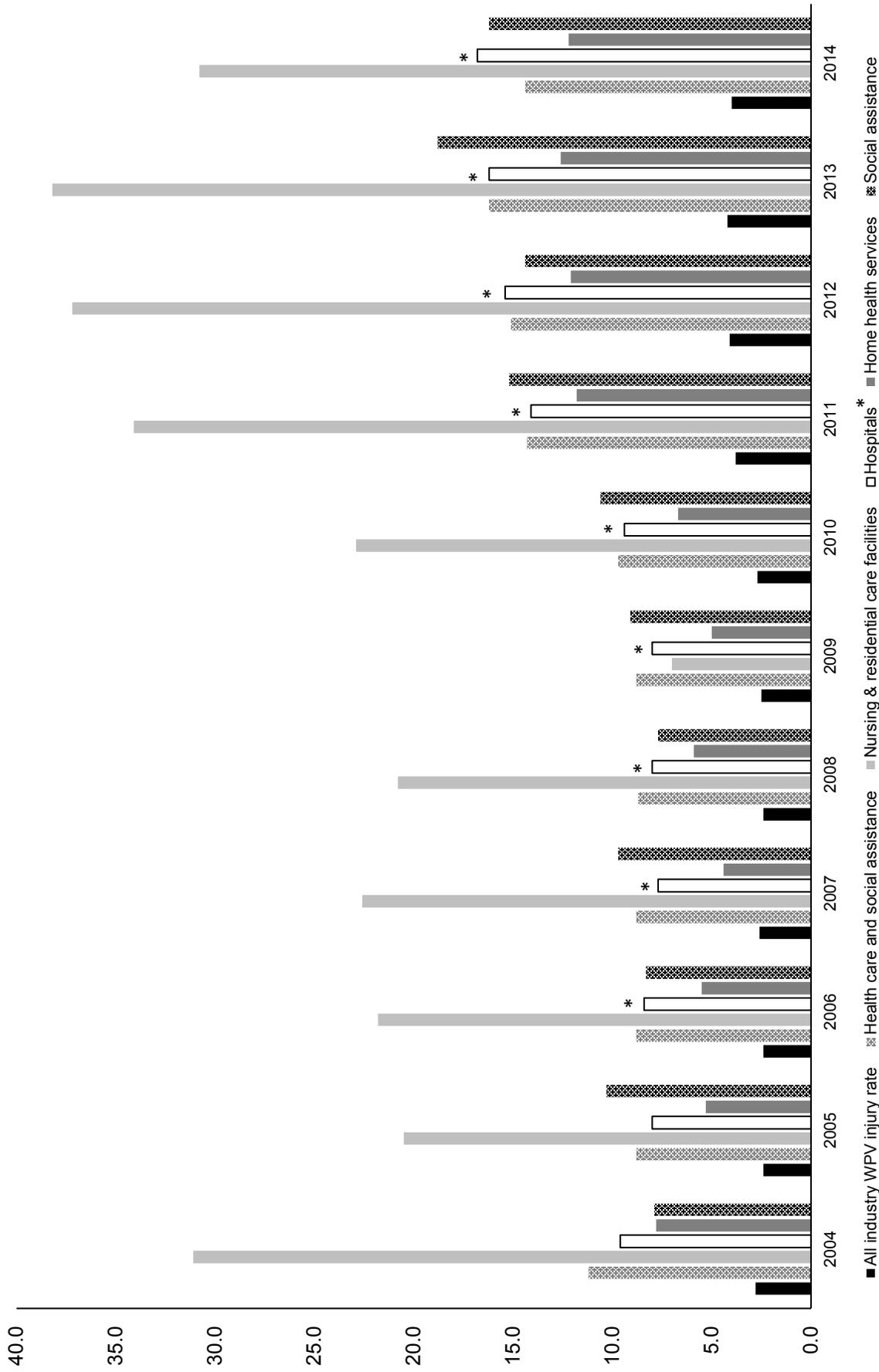
Total Injury and Illness Rates Compared with Workplace Violence Injury Rates, Private Industry, 1992–2014¹



Source: U.S. Department of Labor, Bureau of Labor Statistics, Survey of Occupational Injuries and Illnesses, 1992–2014.

¹Rate of injuries and illnesses leading to days away from work, per 10,000 workers.

Workplace Violence Rates for Injuries Leading to Days Away from Work in Selected Health Care Industries, Private Industry, 1992–2014



Source: U.S. Department of Labor, Bureau of Labor Statistics, Survey of Occupational Injuries and Illnesses, 2004–2014.

¹Rate per 10,000 workers

*The subcategory 'psychiatric and substance abuse hospitals' had a workplace violence injury rate of 170.2 per 10,000 workers in 2014; 134.6 in 2013; 111.7 in 2012; 117.6 in 2011; 77.0 in 2010; 77.9 in 2009; 70.2 in 2008; 60.1 in 2007; and 84.3 in 2006.

Estimated and Reported Cases of Musculoskeletal Disorders, Private Industry, 1994–2014^{1,2}

Year	Total MSD Cases ¹	MSD Cases with Days Away from Work, Job Transfer or Restriction ^{1,3}	MSD Cases with Job Transfer or Restriction ^{1,4}	MSDs Involving Days Away from Work ⁵	Percent of Cases Involving MSDs
1994	2,287,212	1,034,618	278,647	755,600	33.8%
1995	2,242,211	1,013,486	317,539	695,800	34.1%
1996	2,146,182	974,380	327,025	647,355	34.4%
1997	2,101,795	980,240	353,888	626,352	34.2%
1998	2,025,598	950,999	358,455	592,544	34.2%
1999	1,951,862	938,038	355,698	582,340	34.2%
2000	1,960,585	954,979	377,165	577,814	34.7%
2001	1,773,304	870,094	347,310	522,500	34.0%
2002	1,598,204	848,062	359,788	487,915	34.0%
2003	1,440,516	759,627	325,380	435,180	33.0%
2004	1,362,336	712,000	309,024	402,700	32.0%
2005	1,264,260	655,440	285,030	375,540	30.0%
2006	1,233,791	638,609	281,192	357,160	30.2%
2007	1,152,778	586,368	252,634	333,760	28.8%
2008	1,086,653	558,835	241,844	317,440	29.4%
2009	963,644	490,216	206,506	283,800	29.4%
2010	934,337	487,421	202,795	284,340	30.5%
2011	1,018,397	534,697	214,966	309,940	34.1%
2012	1,032,811	539,793	225,515	314,470	34.7%
2013	1,015,212	522,988	215,348	307,640	33.5%
2014	955,072	507,382	208,922	298,460	32.3%

Source: U.S. Department of Labor, Bureau of Labor Statistics.

¹Total MSD cases, MSD days away, job transfer or restriction cases, and MSD job transfer or restriction cases are estimated based upon the percentage of MSD cases reported by BLS for the total days away from work cases involving MSD in private industry.

²These figures are based on employer-reported cases of MSDs provided to BLS. The number of cases shown here does not reflect the impact of under-reporting, which would significantly increase the true toll of MSDs occurring among workers. OSHA has estimated that for every reported MSD, two MSDs go unreported.

³Through 2001, this column was titled Total MSD Lost Workday Cases. The new title reflects the change in the recordkeeping standard that went into effect Jan. 1, 2002. Lost workday cases were defined as those that involve days away from work, days of restricted work activity, or both. They do not include cases involving only restricted work activity.

⁴Through 2001, this column was titled MSD Cases with Days of Restricted Activity. The new title reflects the change in the recordkeeping standard that went into effect Jan. 1, 2002.

⁵Days away from work cases include those that result in days away from work or without job transfer or restriction. Prior to 2002, days away from work cases included those that resulted in days away from work or without restricted activity. They do not include cases involving only restricted work activity.

Occupations with Highest Numbers of Musculoskeletal Disorders, 2014^{1,2}

Occupation	Number of MSDs ³
Laborers and freight, stock and material movers, handlers	21,480
Nursing assistants	20,920
Heavy and tractor-trailer truck drivers	17,030
Janitors and cleaners, except maids and housekeeping cleaners	14,530
Stock clerks and order fillers	11,870
Registered nurses	11,360
Light truck or delivery services drivers	10,390
Maintenance and repair workers, general	8,880
Retail salespersons	7,380
Production workers, all other	7,140
Maids and housekeeping cleaners	6,650
Landscaping and grounds keeping workers	5,930
Construction laborers	5,790
Firefighters	5,760
Personal care aides	5,300
Police and sheriff patrol officers	5,180
First-line supervisors of retail sales workers	4,450
Assemblers and fabricators, all other	4,210
Automotive service technicians and mechanics	4,210
Cargo and freight agents	4,120

Source: U.S. Department of Labor, Bureau of Labor Statistics.

¹MSDs leading to days away from work with or without job transfer or restriction.

²Includes cases where the nature of injury is sprains, tears; back pain, hurt back; soreness, pain, hurt except back; carpal tunnel syndrome; hernia; musculoskeletal system and connective tissue diseases and disorders; and when the event or exposure leading to the injury or illness is bodily reaction/bending, climbing, crawling, reaching, twisting, overexertion or repetition. Cases of Raynaud's phenomenon, tarsal tunnel syndrome and herniated spinal discs are not included. Although these cases may be considered MSDs, the survey classifies these cases in categories that also include non-MSD cases.

³Includes total number in private industry, state and local government.

Highest Incidence Rates of Musculoskeletal Disorders by Industry, 2014

Industry (NAICS Code) ¹	Incidence Rate ²	Number of Total Cases	Median Days Away from Work
000 All Private Industry	31.9	298,460	13
481 Air transportation	236.2	8,500	28
492 Couriers and messengers	162.8	6,790	59
623 Nursing and residential care facilities	80.4	20,140	6
493 Warehousing and storage	80.3	5,460	21
484 Truck transportation	76.1	1,240	17
312 Beverage and tobacco product manufacturing	75.5	1,480	16
321 Wood product manufacturing	68.3	2,530	15
562 Waste management and remediation services	67.9	2,640	14
622 Hospitals	66.3	25,340	9
444 Building material and garden supply stores	62.6	6,370	10
711 Performing arts and spectator sports	62.0	1,690	13
424 Merchant wholesalers — nondurable goods	60.5	1,740	15
485 Transit and ground passenger transportation	57.0	1,880	13
327 Nonmetallic mineral product manufacturing	52.5	2,020	8
442 Furniture and home furnishings stores	50.7	1,760	16
445 Food and beverage stores	49.9	10,750	14
488 Support activities for transportation	48.3	2,800	9
336 Transportation equipment manufacturing	47.2	7,390	19
212 Mining (except oil and gas)	46.4	1,080	38
517 Telecommunications	44.2	3,750	21
316 Leather and allied product manufacturing	43.6	120	20
486 Pipeline transportation	43.3	190	1
721 Accommodation	43.1	6,340	10
326 Plastics and rubber products manufacturing	43.1	2,910	12
111 Crop production	42.3	1,610	7
311 Food manufacturing	42.1	6,310	13
452 General merchandise stores	41.4	9,400	8
532 Rental and leasing services	40.3	1,920	20
331 Primary metal manufacturing	40.3	1,680	15

Source: U.S. Department of Labor, Bureau of Labor Statistics.

¹Does not include state or local government.

²Rates of MSDs leading to days away from work, per 10,000 workers.

Highest Number of Musculoskeletal Disorders by Industry, 2014

Industry (NAICS Code) ¹	Number of Total Cases	Incidence Rate ²	Median Days Away from Work
000 All Private Industry	298,460	31.9	13
622 Hospitals	25,340	66.3	9
623 Nursing and residential care facilities	20,140	80.4	6
561 Administrative and support services	12,250	27.0	15
238 Specialty trade contractors	12,150	34.9	12
424 Merchant wholesalers — nondurable goods	11,740	60.5	15
621 Ambulatory health care services	11,320	22.1	11
484 Truck transportation	11,240	76.1	17
445 Food and beverage stores	10,750	49.9	14
722 Food services and drinking places	10,010	15.2	10
452 General merchandise stores	9,400	41.4	8
481 Air transportation	8,500	236.2	28
336 Transportation equipment manufacturing	7,390	47.2	19
423 Merchant wholesalers — durable goods	7,260	25.6	9
492 Couriers and messengers	6,790	162.8	59
624 Social assistance	6,710	32.0	7
444 Building material and garden equipment and supply dealers	6,370	62.6	10
721 Accommodation	6,340	43.1	10
311 Food manufacturing	6,310	42.1	13
332 Fabricated metal product manufacturing	5,620	38.1	10
493 Warehousing and storage	5,460	80.3	21
441 Motor vehicle and parts dealers	5,430	31.1	9
541 Professional and technical services	5,070	6.7	19
236 Construction of buildings	3,800	30.8	12
811 Repair and maintenance	3,770	32.8	20
517 Telecommunications	3,750	44.2	21
333 Machinery manufacturing	3,500	31.1	12
531 Real estate	2,930	22.7	9
326 Plastics and rubber products manufacturing	2,910	43.1	12

Source: U.S. Department of Labor, Bureau of Labor Statistics.

¹Does not include state or local government.

²Rates of MSDs leading to days away from work, per 10,000 workers.

Estimates of the True Toll of Workplace Injuries and Illnesses

	Estimated 2014 Figures Accounting for Impact of Undercounting Injuries and Illnesses ¹	2014 Data Reported by Bureau of Labor Statistics (BLS)
Total Number of Nonfatal Injuries and Illnesses in Private Industry	9.0 million	3.0 million
Total Nonfatal Injury and Illness Case Rate in Private Industry (cases per 100 workers)	9.6	3.2
Total Number of Injuries and Illnesses Involving Days Away from Work in Private Industry	2.7 million	916,440
Case Rate for Nonfatal Injuries and Illnesses Involving Days Away from Work (cases per 100 workers) in Private Industry	3.0	1.0
Total Number of Musculoskeletal Disorders – Cases Involving Days Away from Work in Private Industry	895,380	298,460
Total Number of Estimated Cases of Musculoskeletal Disorders in Private Industry	2,865,216	955,072

Source: U.S. Department of Labor, Bureau of Labor Statistics, 2014.

¹ A detailed comparison of individual injury and illness reports from various reporting systems found that only one in three workplace injuries and illnesses was reported on the OSHA Log and captured by the Bureau of Labor Statistics survey. This study did not address the number of injuries and illnesses that are not reported to any reporting system in the first place. Thus, this study represents a conservative estimate of under-reporting of the true toll of injuries and illnesses. For more details on the study, see the paper by Rosenman, et al., "How Much Work-Related Injury and Illness is Missed by the Current National Surveillance System?," *Journal of Occupational and Environmental Medicine*, 48(4): 357–365, April 2006.

Federal OSHA Inspection/Enforcement Activity, FY 2009–2015

	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014	FY 2015
Inspections	39,057	41,018	40,625	40,950	39,178	36,167	35,822
Safety	33,256	34,353	33,338	33,598	31,920	29,343	28,903
Health	5,801	6,665	7,287	7,352	7,258	6,824	6,917
Complaints	6,675	8,036	8,762	9,568	9,503	9,577	9,037
Programmed	24,336	24,752	23,319	23,082	22,170	19,207	16,527
Construction	23,952	24,441	22,624	22,507	20,430	18,223	17,549
Maritime	338	300	340	386	411	370	357
Manufacturing	7,312	7,921	8,566	8,399	7,945	7,602	8,051
Other	7,455	8,356	9,094	9,654	10,392	9,972	9,863
Average Case Hours/Inspections							
Safety	18.5	19.0	20.4	20.3	22.5	22.0	22.3
Health	34.8	33.8	33.9	34.6	40.1	45.2	39.7
Violations – Total	87,491	96,610	81,861	78,760	78,037	67,556	65,044
Willful	395	1,513	572	424	316	433	527
Repeat	2,750	2,749	3,029	3,031	3,119	2,954	3,088
Serious	67,439	74,721	59,547	57,155	58,234	49,416	47,934
Unclassified	10	2	7	1	-	1	1
Other	16,697	17,298	18,436	18,038	16,260	14,597	13,016
FTA	200	327	270	107	77	155	107
Penalties – Total (\$)	94,981,842	181,391,692	178,289,800	168,842,092	149,994,488	143,535,247	156,525,585
Willful	13,537,230	81,906,139	22,737,340	15,053,400	12,484,996	17,474,793	21,581,025
Repeat	10,644,022	12,007,280	21,076,053	21,884,028	19,563,867	20,407,958	24,042,251
Serious	65,072,944	78,632,344	125,459,324	123,274,497	110,326,980	97,427,404	102,971,432
Unclassified	128,000	1,700	317,775	1,200	-	0	4,200
Other	3,907,648	5,018,568	7,299,625	7,829,960	6,855,744	6,500,117	7,222,074
FTA	1,691,998	3,825,661	1,399,683	797,507	762,901	1,724,976	704,143
Average Penalty/ Violation (\$)	1,086	1,878	2,178	2,144	1,922	2,125	2,406
Willful	34,271	54,135	39,751	35,503	39,509	40,357	40,951
Repeat	3,871	4,368	6,958	7,220	6,272	6,909	7,786
Serious	965	1,052	2,107	2,157	1,895	1,972	2,148
Unclassified	12,800	850	45,396	1,200	-	0	4,200
Other	234	290	396	434	422	445	555
FTA	8,460	11,699	5,184	7,453	9,908	11,129	6,581
Percent Inspections with Citations Contested (%)	7.1%	8.0%	10.8%	11.4%	6.0%	6.6%	7.4%

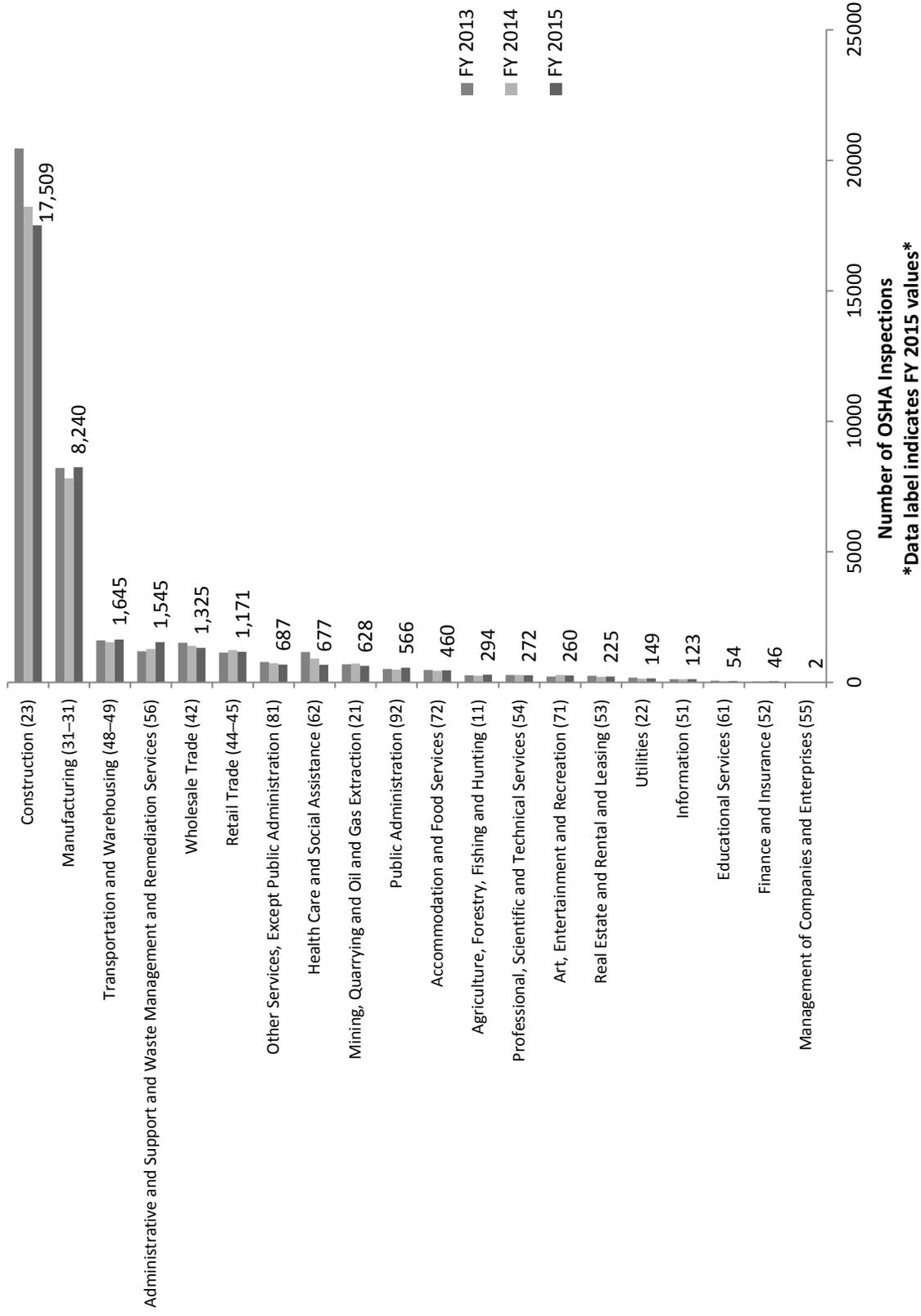
Source: OSHA IMIS Inspection Reports, FY 2009–FY 2013, and OIS Federal Inspection Reports, FY 2012–FY 2015.

**Federal OSHA and State Plan OSHA Inspection/Enforcement Activity
FY 2015**

	<u>FEDERAL OSHA</u>	<u>STATE PLAN OSHA</u>
Inspections	35,822	43,982
Safety	28,903	33,764
Health	6,917	10,218
Complaints	9,037	8,817
Programmed	16,527	21,914
Construction	17,549	18,033
Maritime	357	115
Manufacturing	8,051	6,927
Other	9,863	18,907
Average Case Hours/Inspection		
Safety	22	22.7
Health	40	33.6
Violations – Total	64,673	76,982
Willful	527	74
Repeat	3,088	1,519
Serious	47,934	38,810
Unclassified	1	18
Other	13,016	36,472
FTA	107	89
Penalties – Total (\$)	156,525,125	65,361,877
Willful	21,581,025	2,482,890
Repeat	24,042,251	4,357,263
Serious	102,971,432	51,096,676
Unclassified	4,200	57,850
Other	7,222,074	6,929,612
FTA	704,143	437,586
Average Penalty/Violation (\$)	2,420	849
Willful	40,951	33,553
Repeat	7,786	2,869
Serious	2,148	1,317
Unclassified	4,200	3,214
Other	555	190
FTA	6,581	4,917
Percent Inspections with Citations Contested	7.4%	11.6%

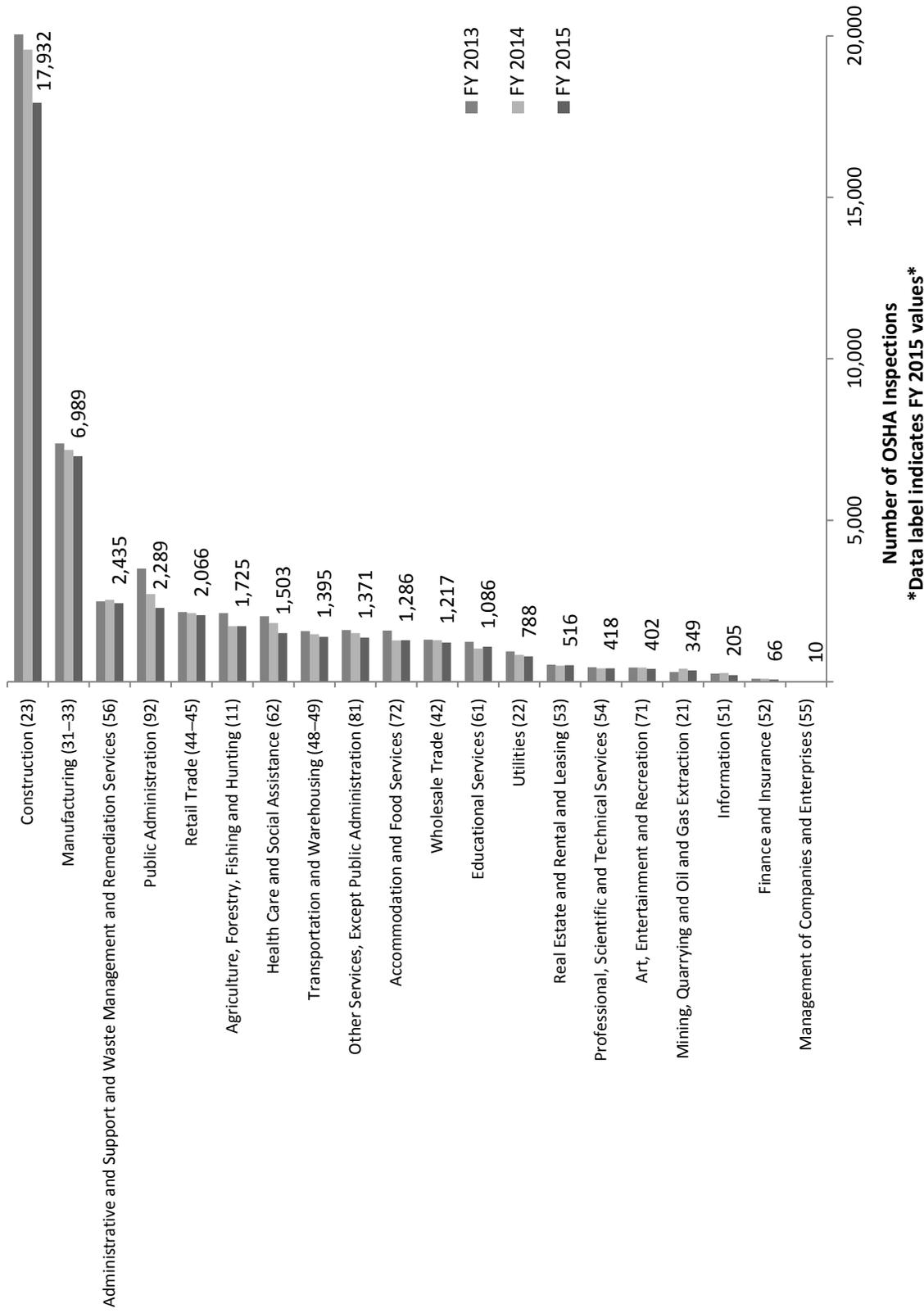
Sources: OSHA IMIS Inspection Reports, FY 2015, and OIS Federal Inspection Reports, FY 2015.

Number of Federal OSHA Inspections by Industry (Two-Digit NAICS Code), FY 2013–2015



Source: Occupational Safety and Health Administration, OIS inspection report, Feb. 2, 2016.

Number of State Plan OSHA Inspections by Industry (Two-Digit NAICS Code), FY 2013–2015



Source: Occupational Safety and Health Administration, IMIS and OIS inspection report, March 9, 2015.

Average Total Penalty per OSHA Fatality Inspection, FY 2008–2015

Fiscal Year	Number of Fatality Inspections Conducted	Total Penalties (\$)	Average Total Penalty Per Inspection (\$)
<u>FY 2008</u>			
Federal States	983	12,834,716	13,057
State Plan States	789	5,481,322	6,947
Nationwide	1,772	18,316,038	10,336
<u>FY 2009</u>			
Federal States	824	5,791,896	7,029
State Plan States	626	3,972,586	6,346
Nationwide	1,450	9,764,482	6,734
<u>FY 2010</u>			
Federal States	805	19,258,617	23,924
State Plan States	620	5,116,007	8,252
Nationwide	1,425	24,374,624	17,105
<u>FY 2011</u>			
Federal States	754	12,451,612	16,514
State Plan States	680	9,803,145	14,416
Nationwide	1,434	22,254,757	15,519
<u>FY 2012¹</u>			
Federal States	945	9,270,422	9,810
State Plan States	599	4,713,458	7,869
Nationwide	1,544	13,983,880	9,057
<u>FY 2013</u>			
Federal States	797	7,744,931	9,718
State Plan States	635	6,131,773	9,656
Nationwide	1,432	13,876,704	9,751
<u>FY 2014</u>			
Federal States	876	9,906,772	11,309
State Plan States	664	6,393,686	9,629
Nationwide	1,540	16,300,458	10,640
<u>FY 2015</u>			
Federal States	967	11,412,315	11,802
State Plan States	842	5,358,100	6,364
Nationwide	1,809	16,770,415	9,271

Sources: OSHA IMIS Fatality Inspection Reports, FY 2008–2015, and OSHA OIS Fatality Inspection Report, FY 2013–2015.

¹OSHA OIS Fatality Inspection Report for FY 2012 may include inspections that did not involve a fatality.

**Significant OSHA Enforcement Cases Based on Total Penalty Issued,
FY 2015¹**

Company Name	Inspection Number(s)	Date Citations Issued	Total Penalty Issued
Joseph Kehrer/Kehrer Brothers Construction Inc.	1043352	8/10/2015	\$1,792,000
Ashley Furniture	987512	1/29/2015	\$1,766,000
Case Farms Processing Inc.	1040829	8/13/2015	\$861,500
Lloyd Industries Inc.	1009661 1008085	5/11/2015	\$822,000
ExxonMobil Refining and Supply Company ²	1042440	8/13/2015	\$566,600
Fastrack Erectors	988059	5/11/2015	\$511,000
First Capital Insulation Inc.	1002754	4/20/2015	\$490,000
Case Farms Processing Inc.	1048762	9/22/2015	\$424,600
Hassell Construction Company Inc.	1031127	7/22/2015	\$420,300
CS Metals Inc.	982537	12/18/2014	\$378,070
Cotton Commercial USA Inc.	1022192	7/22/2015	\$362,500
AEE ³	1005186	12/5/2014	\$359,000
Central Transport LLC	976899	11/10/2014	\$330,800
Aluminum Shapes LLC	1059368	9/23/2015	\$308,000
Prestige Industries LLC	1049617	9/28/2015	\$305,300

Source: Occupational Safety and Health Administration.

¹OSHA defines significant enforcement cases as those resulting in a total proposed penalty of more than \$100,000. In FY 2015, 169 significant enforcement cases were brought by federal OSHA, and three significant enforcement cases against federal agencies.

²This significant case was issued in California, a state with its own OSHA plan. This state may have different criteria for a significant case, but exceeds the federal threshold for a significant case.

³This significant case was issued in Puerto Rico, a territory with its own OSHA plan. This territory may have different criteria for a significant case, but exceeds the federal threshold for a significant case.

Largest-Ever OSHA Enforcement Cases Based on Total Penalty Issued

Company Name	Inspection Number(s)	Date Citations Issued	Total Penalty Issued	Penalty Amount Paid ¹
BP Products North America	311962674 308314640	10/29/2009	\$81,340,000	\$50,610,000 \$14,567,000 \$205,000 (Formal settlements)
	308314640 308314988	9/21/2005	\$21,361,500	
IMC Fertilizer/Angus Chemical	107607863 107607871	10/31/1991	\$11,550,000	\$10,000,000
	310988712 311522858	7/25/2008	\$8,777,500	\$6,050,000 (Formal settlement)
O&G Industries Inc.	109179937 314295460	8/3/2010	\$8,347,000	\$1,000,000 (Formal settlement)
	107329740 106196801	9/21/1995	\$8,260,000	\$1,829,000 (Formal settlement)
CITGO Petroleum Dayton Tire	110416880 109061648	8/29/1991 4/18/1994	\$8,155,000 \$7,490,000	\$5,800,000 \$7,490,000
	100504950 018252858 102873288	10/26/1989 11/2/1989	\$7,275,300	\$3,268,845 (Formal settlement)
Keystone Construction Maintenance	109179952 314295445	8/3/2010	\$6,623,000	\$250,000* (Formal settlement)
	106612443 107365751	4/19/1990	\$6,395,200	\$410,000 (Formal settlement)
Hercules Inc.	108662420 100490705	9/8/1993	\$6,328,000	\$100,000 (ALJ decision)
	102281292 102281128	1/27/1993	\$5,085,000	\$5,085,000

Largest-Ever OSHA Enforcement Cases Based on Total Penalty Issued

Company Name	Inspection Number(s)	Date Citations Issued	Total Penalty Issued	Penalty Amount Paid ¹
E. Smalis Painting	108753690	6/31/1994	\$5,008,500	\$1,092,750 (OSHRC decision)
John Morrell	101456325	10/28/1988	\$4,330,000	\$990,000 (Formal settlement)
Bath Iron Works	101450336 101450294	11/4/1987	\$4,175,940	\$650,000 (Formal settlement)
Fraser Paper	102749868 102750395	9/17/1991	\$3,982,500	\$1,286,233 (Formal settlement)
Decoster Egg Farms (aka Maine Contract Farming LLC)	122375512	7/12/1996	\$3,555,500	\$1,887,500 (Formal settlement)
Arco Chemical Co.	110318540	1/3/1999	\$3,481,300	\$3,481,300
The Budd Company	18252510	12/12/1989	\$3,345,600	\$1,528,000 (Formal settlement)
McCroy Stores	113919278	11/7/1991	\$3,188,000	\$500,000 (ALJ decision)
IBP	100059591	5/11/1998	\$3,133,100	\$532,030 (OSHRC decision)
BP North America Inc. and BP Husky Refining LLC's Refinery	311611081	3/8/2010	\$3,042,000	\$3,042,000
Shell Oil Chemical Co.	103342093	11/22/1994	\$3,017,000	\$3,017,000
Union Carbide	110398310	9/12/1991	\$2,803,500	\$1,496,500 (Formal settlement)

Source: Occupational Safety and Health Administration.

¹Penalty amount paid information comes from March 26, 2012, posting by Celeste Monforton on the Pump Handle blog at <http://scienceblogs.com/thepumphandle/2012/03/26/federal-osha-penalties-101-a-l/> and from www.osha.gov.

*Settlement called for Keystone Construction Maintenance also to pay 5% of its annual revenue above a set amount for each of the seven years following the settlement.

Disposition of Federal OSHA 11(c) Whistleblower Complaints, FY 2005–2015

Fiscal Year	Cases Received	Cases Completed ¹	Complaint Determinations						Total Determinations
			Total Merit	Merit	Settled	Settled Other	Dismissed	Withdrawn	
2005	1,194	1,160	294	23	224	47	760	146	1,200
2006	1,195	1,229	293	14	213	66	787	196	1,276
2007	1,301	1,167	262	14	190	58	766	176	1,204
2008	1,381	1,255	261	14	202	45	830	227	1,318
2009	1,267	1,168	287	22	210	55	726	187	1,200
2010	1,402	1,144	334	24	244	66	672	177	1,183
2011	1,668	1,234	411	23	314	74	694	177	1,282
2012	1,745	1,653	400	18	294	88	977	340	1,717
2013	1,708	1,827	611	41	369	201	921	415	1,947
2014	1,751	1,794	483	13	309	161	957	426	1,866
2015	3,310	3,278	848	46	487	315	1,666	721	3,331

Sources: For fiscal years 2009–2015, Federal OSHA, Directorate of Whistleblower Protection Programs, and for fiscal years 2005–2008, Federal OSHA Whistleblower Protection Program, "Whistleblower Investigation Data," www.whistleblowers.gov/wb_data_FY05-12.pdf.

¹Cases completed include cases received and backlog cases.

Disposition of OSHA State Plan 11(c) Whistleblower Complaints, FY 2009–2015

Fiscal Year	Cases Received	Cases Completed ¹	Complaint Determinations						
			Total Merit	Merit Finding	Settled	Settled Other	Dismissed	Withdrawn	Total Determinations
2009	1,043	882	158	31	94	33	654	121	933
2010	1,167	954	160	24	107	29	612	132	904
2011	1,462	839	168	24	125	19	626	135	929
2012	1,457	766	174	20	133	21	443	112	729
2013	1,192	1,059	248	58	139	51	655	215	1,118
2014	1,157	965	221	46	125	50	606	198	1,025
2015	1,060	1,120	219	27	145	47	606	300	1,125

Source: Occupational Safety and Health Administration, Directorate of Cooperative and State Programs.

¹Cases completed include cases received and backlog cases.

Major OSHA Health Standards Since 1971

Standard	Year Final Standard Issued
1. Asbestos	1972
2. Fourteen Carcinogens	1974
3. Vinyl Chloride	1974
4. Coke Oven Emissions	1976
5. Benzene (vacated)	1978
6. DBCP	1978
7. Arsenic	1978
8. Cotton Dust	1978
9. Acrylonitrile	1978
10. Lead	1978
11. Cancer Policy	1980
12. Access to Medical Records	1980
13. Hearing Conservation	1981
14. Hazard Communication	1983
15. Ethylene Oxide	1984
16. Asbestos (revised)	1986
17. Field Sanitation	1987
18. Benzene (revised)	1987
19. Formaldehyde	1987
20. Access to Medical Records (modified)	1988
21. Permissible Exposure Limits (PELs) Update (vacated)	1989
22. Chemical Exposure in Laboratories	1990
23. Bloodborne Pathogens	1991
24. 4,4'-methylenedianiline	1992
25. Cadmium	1992
26. Asbestos (partial response to court remand)	1992
27. Formaldehyde (response to court remand)	1992
28. Lead (construction)	1993
29. Asbestos (response to court remand)	1994
30. 1,3-Butadiene	1996
31. Methylene Chloride	1998
32. Respiratory Protection	1998
33. Ergonomics (revoked under the Congressional Review Act)	2000
34. Bloodborne Pathogens – Needlestick Injuries	2001
35. Hexavalent Chromium (response to court order)	2006
36. Hazard Communication – Globally Harmonized System	2012
37. Crystalline Silica	2016

Source: Code of Federal Regulations.

Major OSHA Safety Standards Since 1971

Standard	Year Final Standard Issued
1. Cranes/Derricks (load indicators)	1972
2. Roll-over Protective Structures (construction)	1972
3. Power Transmission and Distribution	1972
4. Scaffolding, Pump Jack Scaffolding and Roof Catch Platform	1972
5. Lavatories for Industrial Employment	1973
6. Trucks, Cranes, Derricks and Indoor General Storage	1973
7. Temporary Flooring – Skeleton Steel Construction	1974
8. Mechanical Power Presses	1974
9. Telecommunications	1975
10. Roll-over Protective Structures of Agricultural Tractors	1975
11. Industrial Slings	1975
12. Guarding of Farm Field Equipment, Farmstead Equipment and Cotton Gins	1976
13. Ground-Fault Protection	1976
14. Commercial Diving Operations	1977
15. Servicing Multi-Piece Rim Wheels	1980
16. Fire Protection	1980
17. Guarding of Low-Pitched Roof Perimeters	1980
18. Design Safety Standards for Electrical Standards	1981
19. Latch-Open Devices	1982
20. Marine Terminals	1983
21. Servicing of Single-Piece and Multi-Piece Rim Wheels	1984
22. Electrical Safety in Construction (Part 1926)	1986
23. General Environmental Controls – TAGS (Part 1910)	1986
24. Marine Terminals – Servicing Single-Piece Rim Wheels (Part 1917)	1987
25. Grain Handling Facilities (Part 1910)	1987
26. Safety Testing of Certification of Certain Workplace Equipment and Materials	1988
27. Crane or Derrick Suspended Personnel Platforms (Part 1926)	1988
28. Concrete and Masonry Construction (Part 1926)	1988
29. Mechanical Power Presses (modified)	1988
30. Powered Platforms (Part 1910)	1989
31. Underground Construction (Part 1926)	1989
32. Hazardous Waste Operations (Part 1910) (mandated by Congress)	1989
33. Excavations (Part 1926)	1989
34. Control of Hazardous Energy Sources(lockout/tagout) (Part 1910)	1989
35. Stairways and Ladders (Part 1926)	1990
36. Concrete and Masonry Lift-Slab Operations	1990
37. Electrical Safety Work Practices (Part 1910)	1990
38. Welding, Cutting and Brazing (Part 1910) (revision)	1990
39. Chemical Process Safety	1992
40. Confined Spaces (general industry)	1993

Source: Code of Federal Regulations.

Major OSHA Safety Standards Since 1971

Standard	Year Final Standard Issued
41. Fall Protection	1994
42. Electrical Power Generation	1994
43. Personal Protective Equipment	1994
44. Logging Operations	1995
45. Scaffolds	1996
46. PPE for Shipyards	1996
47. Longshoring and Marine Terminals	1997
48. Powered Industrial Truck Operator Training	1998
49. Steel Erection	2001
50. Electrical Equipment Installation	2007
51. Employer Payment for Personal Protective Equipment	2007
52. Cranes and Derricks in Construction	2010
53. General Working Conditions for Shipyard Employment	2011
54. Electric Power Generation, Transmission and Distribution	2014
55. Confined Spaces (construction)	2015

Source: Code of Federal Regulations.

Impact on Workers' Lives from Delays in Recent OSHA Standards

Hazard/Issue	Year Rulemaking Initiated	Year Rulemaking Completed	Years Elapsed Since Rulemaking Initiated	Lives Lost Per Year of Delay	Lives Lost Over Entire Rulemaking Period
Cranes and Derricks ¹	2002	2010	8	22	176
Hexavalent Chromium ²	1993	2006	13	40 to 145	520 to 1,885
Silica ³	1997	2016	19	642	12,198

¹In 2002, OSHA initiated negotiated rulemaking on the cranes and derricks standard. The negotiated rulemaking committee recommended a draft rule in 2004. The proposed rule was issued in 2008 and the final rule promulgated in 2010. According to OSHA, the cranes and derricks standard also will prevent 175 injuries per year. Fatalities and injuries prevented per year by the new standard were obtained from OSHA's preamble to the final rule for cranes and derricks published in the Federal Register on Aug. 9, 2010.

²In 1993, a petition for an Emergency Temporary Standard (ETS) for the carcinogen hexavalent chromium was submitted to OSHA. In 1994, OSHA denied the ETS petition but put hexavalent chromium on the regulatory agenda for normal rulemaking. OSHA failed to issue a proposed rule. Lawsuits in 1997 and in 2002 seeking to compel rulemaking resulted in a court-ordered timetable to issue a final standard by Jan. 18, 2006. According to OSHA, the standard also will prevent 209 to 1,045 cases of dermatitis and 1,140 cases of nasal perforations/ulcerations from occurring annually. Lung cancer and silicosis deaths and illnesses avoided per year by the new standard were obtained from OSHA's preamble to the final rule published in the Federal Register on Feb. 28, 2006.

³In 1997, silica was put on OSHA's regulatory agenda. In 2003, a draft silica standard underwent a Small Business Regulatory Enforcement Fairness Act (SBREFA) review, but the rule then stalled. Work on the standard was reactivated in 2009, and on Feb. 14, 2011, the draft proposed standard was submitted to the Office of Management and Budget (OMB) for review under Executive Order 12866. OMB review of proposed rules is required to be completed within 120 days under the EO, but due to political pressure from industries opposed to the new rule, the draft proposed rule was held by OMB for two and one-half years. The proposed rule finally was issued on Sep. 12, 2013; the final rule was issued on March 25, 2016. According to the preamble of the final rule, reducing the permissible exposure limit for silica to 50 ug/m³ will prevent 642 deaths and 918 cases of silica-related disease each year (81 FR 16285).

Permissible Exposure Limits of OSHA Compared with Other Standards and Recommendations

Chemical	OSHA PEL	California PEL	ACGIH TLV	NIOSH REL	Units
Acetone	1000	500	250	250	ppm
Acrylamide ⁴	0.3	0.03	0.03	0.03	mg/m ³
Ammonia	50	25	25	25	ppm
Asphalt fume ⁴	-	5	0.5	5 ³	mg/m ³
Benzene ⁴	1	1	0.5	0.1	ppm
1-Bromopropane	-	5	-	-	ppm
Beryllium ⁴	2	0.2	0.05	0.5(c) ¹	ug/m ³
Butane	-	800	1,000 ³	800	ppm
n-Butanol	100	50(c) ¹	20	50(c) ¹	ppm
Carbon disulfide ²	20	1	1	1	ppm
Carbon monoxide ²	50	25 (c) ¹	25	35	ppm
Chlorobenzene	75	10	10	-	ppm
Dimethyl sulfate ^{2,4}	1	0.1	0.1	0.1	ppm
2-Ethoxyethanol (EGEE)	200	5	5	0.5	ppm
Ethyl acrylate ⁴	25	5	5	-	ppm
Gasoline ⁴	-	300	300	-	ppm
Glutaraldehyde ²	-	0.05(c) ¹	0.05(c) ¹	0.2(c) ¹	ppm
Potassium hydroxide	-	2(c) ¹	2(c) ¹	2(c) ¹	mg/m ³
Styrene	100	50	20	50	ppm
Tetrachloroethylene ^{2,4} (Perchloroethylene)	100	25	25	-	ppm
Toluene ²	200	10 (c) ¹	20	1003	ppm
Triethylamine	25	1(c) ¹	0.5	-	ppm
Welding fume ⁴	-	5	-	-	mg/m ³

¹Ceiling level.

²Chemicals identified by OSHA for updates in permissible exposure limits but subsequently dropped from the agency's regulatory agenda.

³Short-term exposure limit (STEL).

⁴NIOSH denotes carcinogenicity of chemical according to Appendix A: www.cdc.gov/niosh/npg/nengapdx.html.

Federal OSHA Budget and Personnel FY 1980–2016

Fiscal Year	Budget (in dollars – \$)	Positions (Staff Full-Time Equivalent Employment)
1980	186,394,000	2,951
1981	210,077,000	2,655
1982	195,465,000	2,359
1983	206,649,000	2,284
1984	212,560,000	2,285
1985	219,652,000	2,239
1986	208,692,000	2,166
1987	225,811,000	2,211
1988	235,474,000 ²	2,378
1989	247,746,000	2,441
1990	267,147,000	2,425
1991	285,190,000	2,466
1992	296,540,000	2,473
1993	288,251,000	2,368
1994	296,428,000	2,295
1995	311,660,000	2,196
1996	303,810,000	2,069
1997	324,955,000	2,118
1998	336,480,000	2,171
1999	354,129,000	2,154
2000	381,620,000	2,259
2001	425,886,000	2,370
2002	443,651,000	2,313
2003	453,256,000	2,313
2004	457,500,000	2,236
2005	464,224,000	2,208
2006	472,427,000	2,165
2007	486,925,000	2,165
2008	486,001,000	2,118
2009	513,042,000	2,147
2010	558,620,000	2,335
2011	558,619,000	2,335
2012	564,788,000	2,305
2013 ¹	535,546,000	2,226
2014	552,247,000	2,238
2015	552,787,000	2,224
2016	552,787,000	2,173

Source: Occupational Safety and Health Administration.

¹The FY 2013 funding levels reflect budget cuts mandated by the sequester.

²Budget and personnel were increased when the California state plan turned back to federal OSHA jurisdiction.

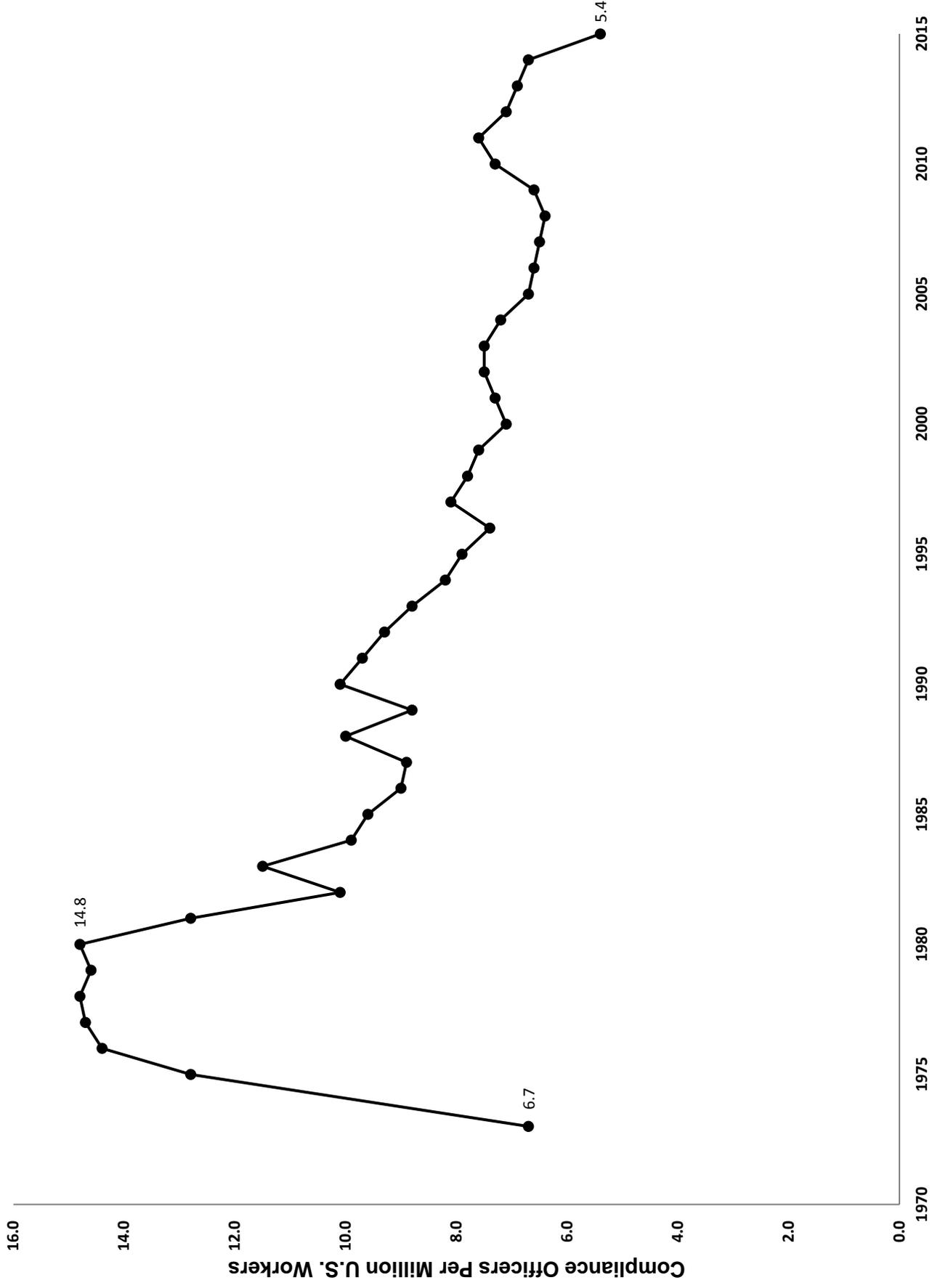
Federal OSHA Safety and Health Compliance Staffing, 1975–2015

Year	Total Number of Federal OSHA Compliance Officers ¹	Employment (000) ²	OSHA Compliance Officers Per Million Workers
1975	1,102	85,846	12.8
1976	1,281	88,752	14.4
1977	1,353	92,017	14.7
1978	1,422	96,048	14.8
1979	1,441	98,824	14.6
1980	1,469	99,302	14.8
1981	1,287	100,397	12.8
1982	1,003	99,526	10.1
1983	1,160	100,834	11.5
1984	1,040	105,005	9.9
1985	1,027	107,150	9.6
1986	975	109,597	9.0
1987	999	112,440	8.9
1988	1,153	114,968	10.0
1989	1,038	117,342	8.8
1990	1,203	118,793	10.1
1991	1,137	117,718	9.7
1992	1,106	118,492	9.3
1993	1,055	120,259	8.8
1994	1,006	123,060	8.2
1995	986	124,900	7.9
1996	932	126,708	7.4
1997	1,049	129,558	8.1
1998	1,029	131,463	7.8
1999	1,013	133,488	7.6
2000	972	136,891	7.1
2001	1,001	136,933	7.3
2002	1,017	136,485	7.5
2003	1,038	137,736	7.5
2004	1,006	139,252	7.2
2005	956	141,730	6.7
2006	948	144,427	6.6
2007	948	146,047	6.5
2008	936	145,362	6.4
2009	929	139,877	6.6
2010	1,016	139,064	7.3
2011	1,059	139,869	7.6
2012	1,006	142,469	7.1
2013	994	143,929	6.9
2014	986	146,305	6.7
2015	805	148,864	5.4

¹Compliance officers for 1973 to 1989 from Twentieth Century OSHA Enforcement Data, A Review and Explanation of the Major Trends, U.S. Department of Labor, 2002; Compliance officers for 1990 to 2015 from OSHA Directorate of Enforcement Programs. Compliance officer totals include safety and industrial hygiene CSHOs and supervisory safety and industrial hygiene CSHOs.

²Employment is an annual average of employed civilians. 16 years of age and older. from the Current Population Survey (CPS).

Federal OSHA Compliance Officers per Million U.S. Workers, 1974–2015¹



Source: Employment data from Current Population Survey.

¹Compliance officers from U.S. Department of Labor and OSHA Directorate of Enforcement Programs includes CSHOs and their supervisors.

**Job Safety and Health Appropriations
FY 2007–2017**

CATEGORY	FY 2007	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013 ⁶	FY 2014	FY 2015	FY 2016 Request	FY 2016	FY 2017 Request
OSHA (in thousands of dollars)												
TOTAL	486,925	486,001	513,042 ³	558,620	558,619	564,788	535,246	552,247	552,787	592,071	552,787	595,023
Safety and Health Standards	16,892	16,597	17,204	19,569	20,288	19,962	18,918	20,000	20,000	23,306	20,000	23,173
Federal Enforcement	176,973	182,136	197,946	223,399	208,146	207,753	207,928	207,785	208,000	225,608	208,000	225,972
Whistleblower Protection					14,806	15,873	15,043	17,000	17,500	22,628	17,500	21,604
State Enforcement	91,093	89,502	92,593	104,393	104,393	104,196	98,746	100,000	100,850	104,337	100,850	104,337
Technical Support	22,392	21,681	22,632	25,920	25,868	25,820	24,344	24,344	24,469	24,614	24,469	25,404
Federal Compliance Assistance	72,659	71,390	72,659	73,380	73,383	76,355	61,444	69,433	68,433	73,044	68,433	72,783
State Compliance Assistance	53,357	52,425	54,531	54,798	54,688	57,890	54,862	57,775	57,775	57,775	57,775	59,775
Training Grants	10,116	9,939	10,000	10,750	10,729	10,709	10,149	10,687	10,537	10,687	10,537	10,537
Safety and Health Statistics	32,274	31,522	34,128	34,875	34,805	34,739	32,922	34,250	34,250	38,763	34,250	40,095
Executive Administration	11,169	10,809	11,349	11,536	11,513	11,491	10,890	10,973	10,973	11,309	10,973	11,343
MSHA (in thousands of dollars)												
TOTAL	301,570	333,925	347,003	357,293	361,844 ¹	372,524	353,768	375,887	375,887	394,932	375,887	397,372
Coal Enforcement	120,396	154,670	154,491	158,662	160,639	164,500	158,713	167,859	167,859	175,769	164,296	171,768
Metal/Nonmetal Enforcement	72,506	71,420	82,427	85,422	87,644	89,063	86,121	91,697	91,697	93,841	94,697	97,563
Standards Development	2,727	3,180	3,031	3,481	4,352	4,765	4,547	5,416	5,416	6,070	5,416	6,197
Assessments	6,556	6,134	6,134	6,233	6,221	7,103	7,036	6,976	6,976	8,122	7,089	8,277
Education Policy and Development	35,326	36,605	38,605	38,605	38,148	38,325	31,898	36,320	36,320	40,448	36,320	40,419
Technical Support	29,237	29,476	30,117	30,642	31,031	33,613	32,050	33,791	33,791	34,583	34,241	35,041
Program Administration	13,637	16,504	15,684	17,391	15,906	16,998	15,974	15,838	15,838	16,316	15,838	16,292
Program Eval. and Info Resources	21,185	15,936	16,514	16,857	18,173	18,157	17,429	17,990	17,990	19,783	17,990	21,815
NIOSH (in thousands of dollars)												
TOTAL	252,100	381,955	360,059	373,171	316,079	292,588	323,059 ⁷	332,860 ⁷	334,863 ⁷	283,418 ⁷	339,121 ⁷	285,621 ⁷
Program Funding		273,863 ¹	290,059 ²	302,448 ²	294,079 ²	292,588 ²	323,059 ²	332,860 ²	334,863 ²	283,418 ²	339,121 ²	285,621 ²
WTC Health Funding		108,092	70,000	70,723	22,000 ⁵	N/A ⁵	N/A ⁵	N/A ⁵	N/A ⁵	N/A ⁵	N/A ⁵	N/A ⁵

Sources: Budget of the U.S. Government, FY 2007–FY 2017, and U.S. Department of Labor Congressional Budget Justification, FY 2007–FY 2017.

¹Includes \$50 million for mine safety research, adjusted to \$49,126 million after the rescission.

²Does not include \$55 million for the Energy Employees Occupational Injury Compensation Program funding through mandatory funding.

³Does not include \$7 million in Recovery Act provided to OSHA in FY 2009 and FY 2010.

⁴Includes \$6.5 million for addressing the backlog of contested cases, of which up to \$3 million may be transferred to the DOL's Office of Solicitor.

⁵With enactment of the 9/11 Health and Compensation Act, as of July 2011, the WTC health program will be funded through mandatory funding so appropriated funding is not needed after that date.

⁶The FY 2013 funding levels reflect the budget cuts mandated by the budget sequester.

⁷FY 2015 and FY2016 NIOSH budget request and FY 2015 appropriation includes administrative funding previously allocated to the CDC budget. The FY 2013 and FY 2014 NIOSH funding levels have been made comparable to reflect this realignment of administrative funding.

**Funding for OSHA Worker Safety Training Programs vs. Employer
Compliance Assistance Programs, FY 2001–2017
(\$ in thousands)**

Fiscal Year	Worker Safety and Health Training	Employer Compliance Assistance (Federal and State)
FY 2001 Enacted	\$11,175	\$105,100
FY 2002 Request	\$8,175	\$106,000
FY 2002 Enacted	\$11,175	\$109,800
FY 2003 Request	\$4,000	\$112,800
FY 2003 Enacted	\$11,175	\$115,300
FY 2004 Request	\$4,000	\$120,000
FY 2004 Enacted	\$11,100	\$120,000
FY 2004 Rescission	\$10,500	\$119,200
FY 2005 Request	\$4,000	\$125,200
FY 2005 Enacted	\$10,500	\$124,200
FY 2006 Request	\$0	\$124,200
FY 2006 Enacted	\$10,100	\$125,900
FY 2007 Request	\$0	\$129,900
FY 2007 Enacted	\$10,100	\$126,000
FY 2008 Request	\$0	\$134,100
FY 2008 Enacted	\$9,900	\$123,800
FY 2009 Request	\$0	\$131,100
FY 2009 Enacted	\$10,000	\$127,200
FY 2010 Request	\$10,000	\$128,175
FY 2010 Enacted	\$10,750	\$128,200
FY 2011 Request	\$11,000	\$126,100
FY 2011 Enacted	\$10,729	\$128,200
FY 2012 Request	\$12,000	\$129,800
FY 2012 Enacted	\$10,700	\$134,200
FY 2013 Request	\$10,700	\$131,000
FY 2013 Enacted ¹	\$10,150	\$116,300
FY 2014 Request	\$10,700	\$133,200
FY 2014 Enacted	\$10,700	\$127,200
FY 2015 Request	\$10,700	\$128,200
FY 2015 Enacted	\$10,500	\$126,200
FY 2016 Request	\$10,700	\$130,800
FY 2016 Enacted	\$10,537	\$126,558
FY 2017 Request	\$10,537	\$132,558

Sources: Department of Labor, Occupational Safety and Health Administration, Congressional Budget Justification, FY 2002–FY 2017.

¹FY 2013 funding levels reflect the budget cuts mandated by the sequester.

**Number of U.S. Establishments and Employees Covered
per OSHA Full-Time Equivalent (FTE) Staff, 1975–2014**

Fiscal Year	Annual Average Employment¹	Annual Average Establishments¹	OSHA Full-Time Equivalent (FTE) Staff²	Employees Covered Per OSHA FTE	Establishments Covered Per OSHA FTE
1975	67,801,400	3,947,740	2,435	27,845	1,621
1980	73,395,500	4,544,800	2,951	24,871	1,540
1985	96,314,200	5,305,400	2,239	43,017	2,370
1990	108,657,200	6,076,400	2,425	44,807	2,506
1995	115,487,841	7,040,677	2,196	52,590	3,206
2000	129,877,063	7,879,116	2,259	57,493	3,488
2005	131,571,623	8,571,144	2,208	59,589	3,882
2006	133,833,834	8,784,027	2,165	61,817	4,057
2007	135,366,106	8,971,897	2,165	62,525	4,144
2008	134,805,659	9,082,049	2,118	63,648	4,288
2009	128,607,842	9,003,197	2,147	59,901	4,193
2010	127,820,442	8,993,109	2,335	54,741	3,851
2011	129,411,095	9,072,796	2,335	55,422	3,886
2012	131,696,378	9,121,868	2,305	57,135	3,957
2013	133,968,434	9,205,888	2,226	60,183	4,136
2014	136,613,609	9,361,354	2,238	61,043	4,183

¹U.S. Department of Labor, Bureau of Labor Statistics, Employment and Wages, Annual Averages (Total Covered).

²U.S. Department of Labor, Occupational Safety and Health Administration (OSHA).

8.0 Million State and Local Employees Lacked OSHA Coverage in 2014



Source: U.S. Department of Labor, Bureau of Labor Statistics, Employment and Wages: Annual Averages, 2014.

¹Maine state plan for public employees went into effect August 5, 2015

Prepared by the AFL-CIO

**Profiles of Mine Safety and Health
2006–2014
Coal Mines**

	2006	2007	2008	2009	2010	2011	2012	2013	2014 ³
No. of coal mines	2,113	2,030	2,129	2,076	1,944	1,973	1,871	1,701	1,632
No. of miners	122,975	122,936	133,828	134,089	135,500	143,437	137,650	123,259	116,010
Fatalities	47	34	30	18	48	21	20	20	16
Fatal injury rate¹	0.0400	0.0293	0.0237	0.0148	0.0384	0.0156	0.0159	0.0176	0.0150
All injury rate¹	4.46	4.21	3.89	3.69	3.43	3.38	3.16	3.11	3.11
States with coal mining	26	26	26	26	26	26	26	26	26
Coal production (millions of tons)	1,163	1,147	1,172	1,075	1,086	1,095	1,018	984	1,000
Citations and orders issued²	77,667	84,184	106,871	102,057	96,814	93,630	79,250	63,493	62,684

Metal and Nonmetal Mines

	2006	2007	2008	2009	2010	2011	2012	2013	2014 ³
No. of metal/nonmetal mines	12,772	12,841	12,778	12,555	12,339	12,230	12,222	12,060	11,976
No. of miners	240,522	255,187	258,918	221,631	225,676	237,772	250,228	251,263	250,574
Fatalities	26	33	23	17	23	16	16	21	29
Fatal injury rate¹	0.0122	0.0149	0.0107	0.0098	0.0129	0.0084	0.0079	0.0103	0.0142
All injury rate¹	3.19	3.02	2.87	2.54	2.37	2.28	2.19	2.11	2.09
States with M/NM mining	50	50	50	50	50	50	50	50	50
Citations and orders issued²	62,415	59,941	66,785	71,361	74,095	63,983	60,520	55,126	58,790

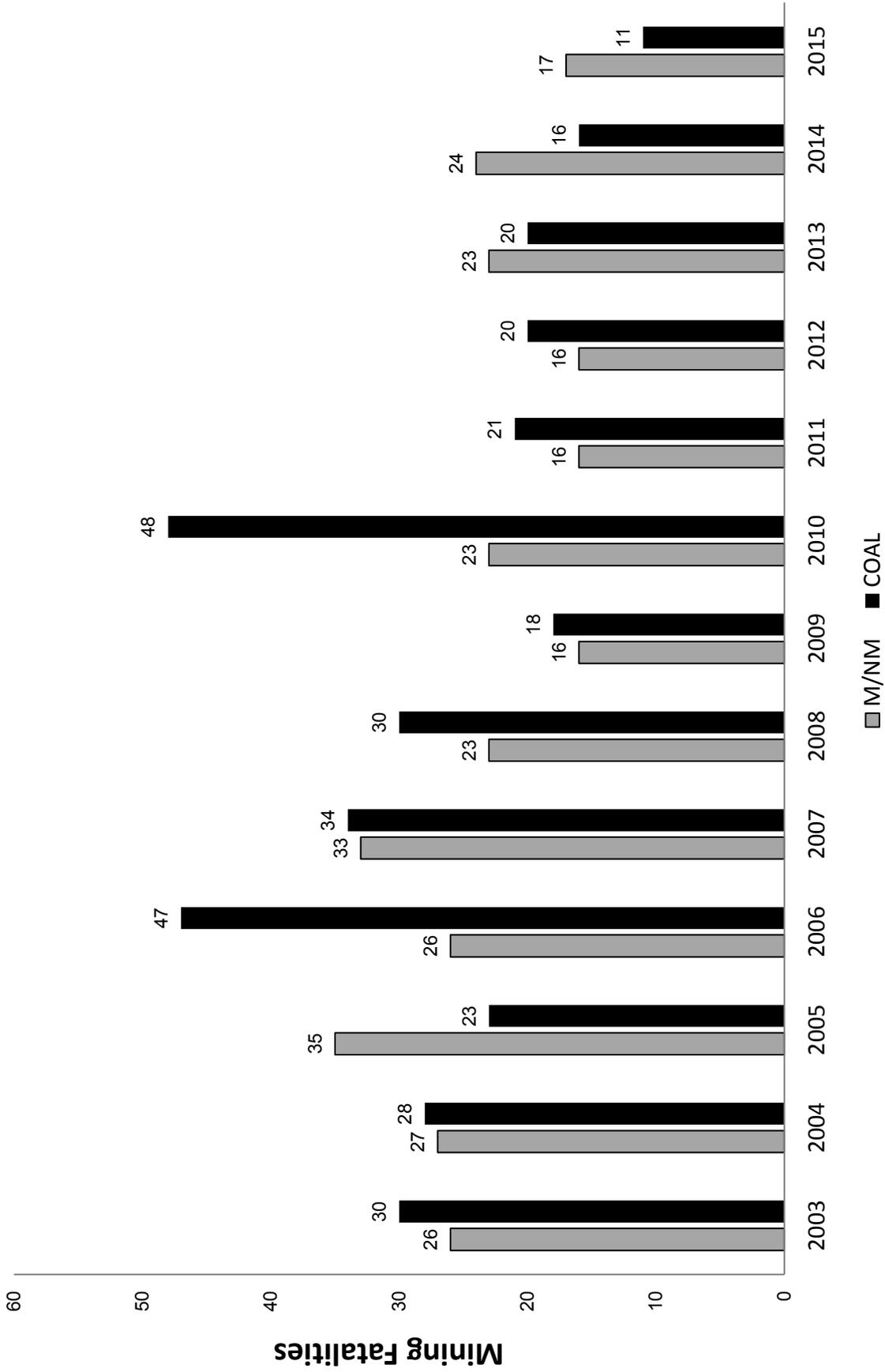
Source: U.S. Department of Labor, Mine Safety and Health Administration (MSHA).

¹All reported injuries per 200,000 employee hours.

²Citations and orders are those not vacated.

³Includes operator and contractor employees.

Coal and Metal/Nonmetal Mining Fatality Comparisons, 2003–2015



Source: U.S. Department of Labor, Mine Safety and Health Administration (MSHA).

Coal Mining Fatalities by State, 2001–2015

State	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Alabama	14	1	1	2	4	2	3	2	3	2		3	1	1	1
Alaska															
Arizona						1					1				
Arkansas	1														
California															
Colorado							1				1	1			
Connecticut															
Delaware															
Florida															
Georgia															
Hawaii															
Idaho															
Illinois	1		3					1	2	2		1	4	1	2
Indiana	2	1	1	1			3	1		1		1	1	1	
Iowa															
Kansas															
Kentucky	5	10	10	6	8	16	2	8	6	7	8	4	2	2	2
Louisiana									1						
Maine															
Maryland						1	2								

Coal Mining Fatalities by State, 2001–2015

State	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Massachusetts															
Michigan															
Minnesota															
Mississippi															
Missouri															
Montana					1	1				1				1	
Nebraska															
Nevada															
New Hampshire															
New Jersey															
New Mexico		1					1				1				
New York															
North Carolina															
North Dakota															
Ohio	2				1						2	1	1		
Oklahoma					1		1								
Oregon															
Pennsylvania	1	3	1	1	4	1	1	5	1				2		3
Puerto Rico															
Rhode Island															

Coal Mining Fatalities by State, 2001–2015

State	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
South Carolina															
South Dakota															
Tennessee				1					1			1			
Texas	1						1	1							
Utah		1		2		1	10						1	1	
Vermont															
Virginia	2	4	3	3		1		2	1		1	1		2	1
Washington															
West Virginia	13	6	9	12	4	23	9	9	3	35	6	7	6	5	2
Wisconsin															
Wyoming		1	2		1			1			1		2	2	
Total	42	28	30	28	23	47	34	30	18	48	21	20	20	16	11

Source: U.S. Department of Labor, Mine Safety and Health Administration (MSHA).

Metal and Nonmetal Mining Fatalities by State, 2001–2015

State	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Alabama	1		2		1					1		1			
Alaska						2	3				2		1		
Arizona	2	4			2	1	2	2	1	2		1			
Arkansas		1	1				2		1						
California	1		2			2	3	2	1	2		1	2		1
Colorado	2	2	1		2								2		
Connecticut															
Delaware															
Florida	1	4			2	1				1	1	2	2	1	1
Georgia	1	1	1	1				1	1	1		1			1
Hawaii	1														
Idaho	2	1								1	2			1	
Illinois		2	1												
Indiana		1		2		1	1							1	
Iowa	1			1				2	1		1			1	1
Kansas			1					1		2			1	1	
Kentucky	1		1		3	1		1	2			1	4	1	
Louisiana						1	1		1				1	1	
Maine															
Maryland		1								1		1			
Massachusetts						1									1

Metal and Nonmetal Mining Fatalities by State, 2001–2015

State	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Michigan		1	1	2	1	3							1		
Minnesota	1				1	3	2			1	2				
Mississippi					2										
Missouri		3		2	1		2	2	2				2	2	2
Montana	3				1		1				1	2		1	
Nebraska		1			1		1					1			1
Nevada	4	2	2	4	3		2	3	1	2	1	1	2	2	4
New Hampshire			1				1								1
New Jersey			1		1								1		
New Mexico		2	1	1	2			1	1				1		
New York		1		1				1		1	1	3		2	
North Carolina	2		1	1			1				1	1			
North Dakota															1
Ohio			2		2		2				1			1	1
Oklahoma	1			2						3		1			
Oregon		2	1	2	1	1	1								
Pennsylvania	1			2	1	2		2	1		1		1	2	1
Puerto Rico		1				1	1		1						
Rhode Island															
South Carolina		1	2	1	1									2	
South Dakota		1													

Metal and Nonmetal Mining Fatalities by State, 2001–2015

State	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Tennessee		3	1	1	1	2	1		1	1			1		
Texas		4	2	3	2	1	2	3	2	2				5	
Utah	1					1		1		1	1			2	
Vermont															
Virginia					1	1	1							2	1
Washington	2	1	1		1	1	1			1	1				
West Virginia							1								
Wisconsin	1				1			1							
Wyoming	1	2		1	1		1								
Total	30	42	26	27	35	26	33	23	17	23	16	16	22	28	17

Source: U.S. Department of Labor, Mine Safety and Health Administration (MSHA).

MSHA Impact Inspections, 2015¹

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEPT	OCT	NOV	DEC	Year Totals
Coal													
Number of Impact Inspections	13	12	13	17	10	10	15	14	10	11	17	10	152
Total # Citations Issued	133	120	68	95	103	71	138	132	86	146	84	68	1,244
# Orders ² Issued	5	12	1	1	0	2	2	12	11	3	0	0	49
# S&S ³ Citations Issued	48	43	19	31	47	18	57	51	46	48	24	21	453
% S&S Citations	35.04%	32.58%	27.54%	32.29%	45.63%	24.66%	40.71%	35.42%	48.42%	32.21%	28.57%	30.88%	35.03%
Metal/Nonmetal													
Number of Impact Inspections	3	5	7	1	7	5	6	7	7	5	6	7	66
Total # Citations Issued	43	75	120	12	73	68	87	61	47	85	105	95	871
# Orders ² Issued	3	3	1	0	0	1	4	1	1	4	6	5	29
# S&S ³ Citations Issued	20	23	46	5	21	16	32	25	25	30	44	37	324
% S&S Citations	44.44%	29.87%	38.02%	41.67%	28.77%	23.19%	36.78%	40.32%	52.08%	34.09%	39.64%	37.37%	36.00%

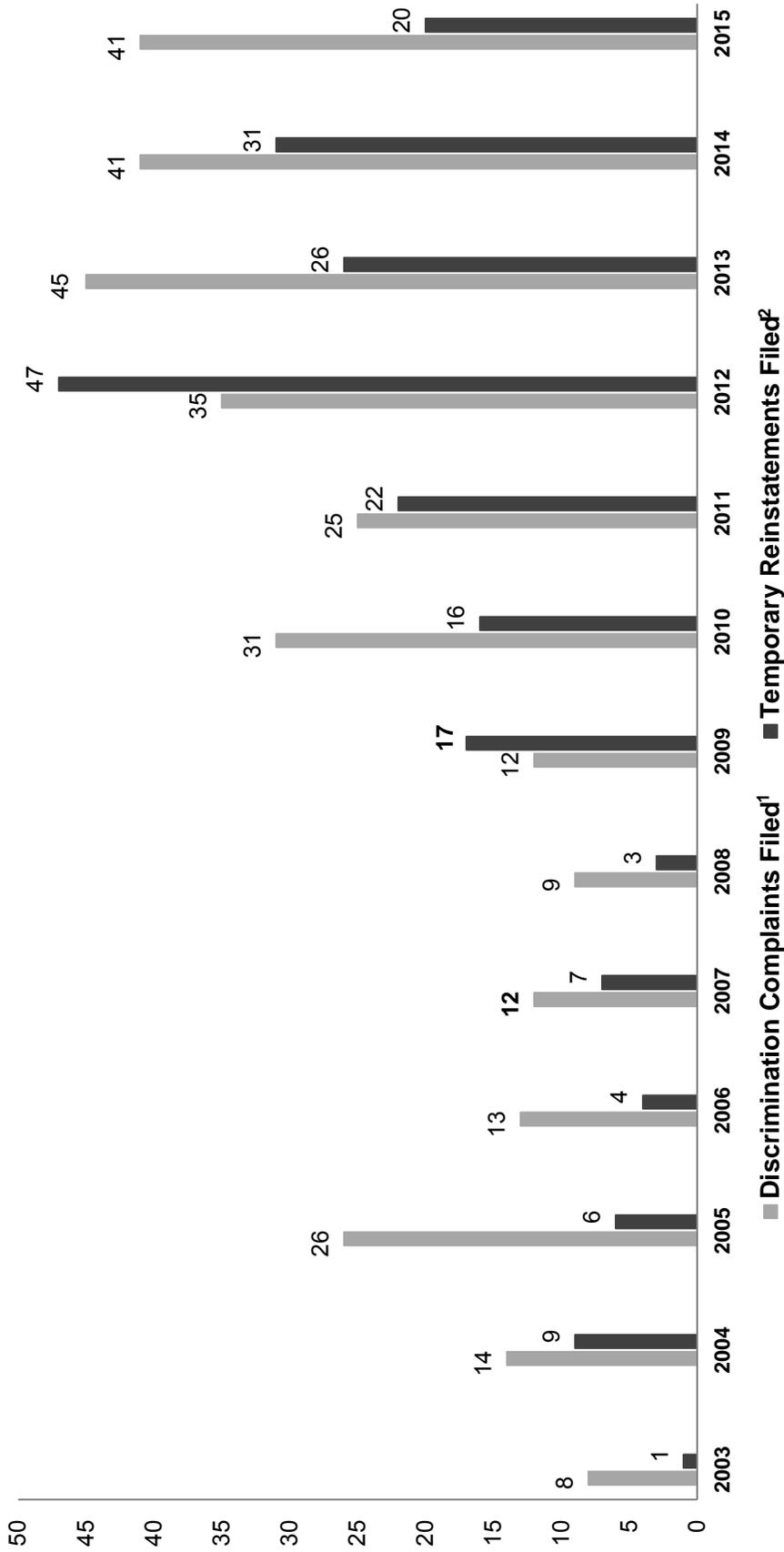
Source: Mine Safety and Health Administration (MSHA).

¹Impact inspections were initiated after the April 2010 explosion at the Upper Big Branch Mine. The inspections are conducted at mines with a poor compliance history with MSHA standards, high numbers of injuries, illnesses or fatalities, and other indicators of unsafe mines.

²MSHA can issue orders to mine operators that require them to withdraw miners from affected areas of the mine for failure to abate violations, for "unwarrantable failure" (reckless disregard, intentional misconduct) to correct significant and substantial violations, and where imminent danger exists. Miners remain withdrawn from the affected area until the violation(s) are abated.

³A Significant and Substantial (S&S) citation is a violation of a mandatory MSHA standard in which the hazard resulting from the violation has a reasonable likelihood of resulting in an injury of a reasonably serious nature.

MSHA Discrimination Complaints and Temporary Reinstatements Filed by the Department of Labor on Behalf of Miners 2003–2015



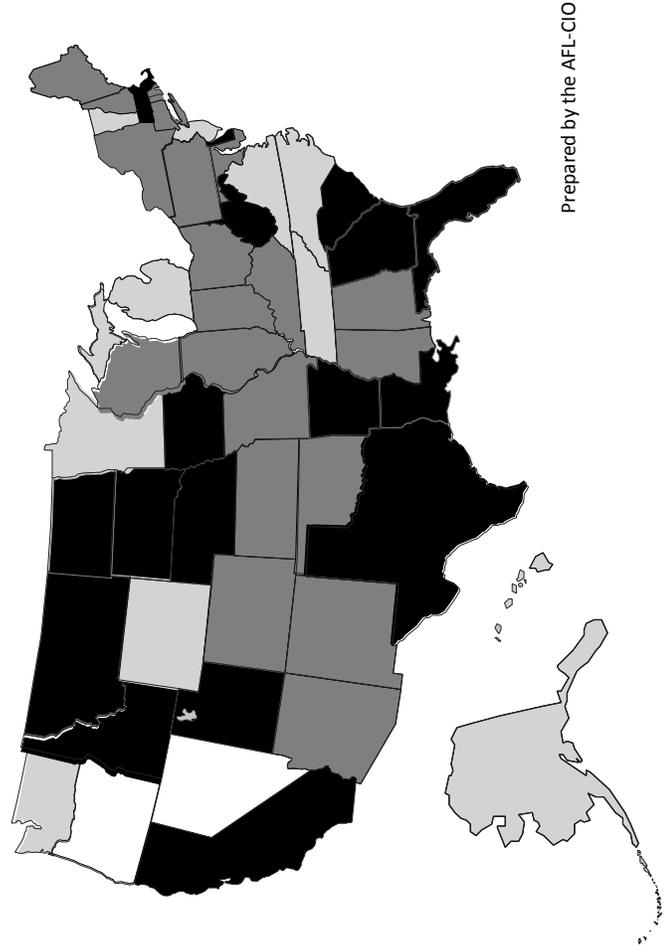
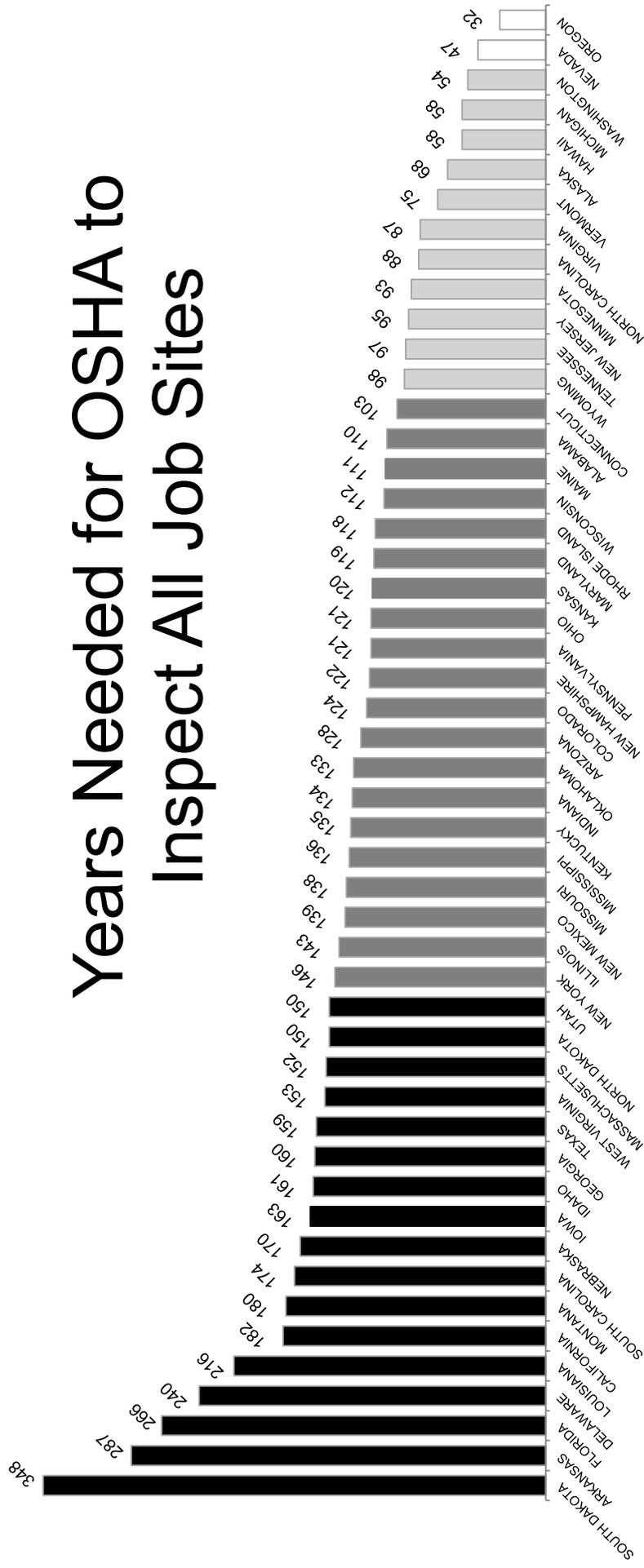
Source: Mine Safety and Health Administration.

¹Under Section 105(c)(2) of the Federal Mine Safety and Health Act, any miner who believes he or she has been discharged, interfered with or discriminated against for exercising his or her rights under the act may file a discrimination complaint.

²If the Mine Safety and Health Administration (MSHA) finds that a miner's discrimination complaint is "not frivolously brought," MSHA will ask the Federal Mine Safety and Health Review Commission to order immediate reinstatement of the miner while the discrimination case is pending.

STATE COMPARISONS

Years Needed for OSHA to Inspect All Job Sites



- 0-49 years (2 states)
- 50-99 years (11 states)
- 100-149 years (20 states)
- 150 years or more (17 states)

Sources: U.S. Department of Labor, Bureau of Labor Statistics, "Employment and Wages Annual Averages 2014," and Occupational Safety and Health Administration IMIS and OIS data on worksite inspections, FY 2015.

Prepared by the AFL-CIO

Number of OSHA Inspectors by State Compared with ILO Benchmark Number of Labor Inspectors¹

State	Number of Employees ²	Actual Number of OSHA Inspectors ³	Number of Labor Inspectors Needed to Meet ILO Benchmark ⁴	Ratio of OSHA Inspectors/Number of Employees
Alabama	1,863,561	25	186	1/74,542
Alaska	330,105	11	33	1/30,010
Arizona	2,539,253	26	254	1/97,664
Arkansas	1,157,630	8	116	1/144,704
California	15,809,082	196	1,581	1/80,659
Colorado	2,417,735	25	242	1/96,709
Connecticut	1,653,573	23	165	1/71,894
Delaware	423,598	4	42	1/105,900
Florida	7,755,371	63	776	1/123,101
Georgia	4,032,488	43	403	1/93,779
Hawaii	626,146	19	63	1/32,955
Idaho	646,305	5	65	1/129,261
Illinois	5,762,156	70	576	1/82,317
Indiana	2,890,758	40	289	1/79,269
Iowa	1,515,822	19	152	1/72,780
Kansas	1,357,090	30	136	1/45,236
Kentucky	1,807,068	39	181	1/46,335
Louisiana	1,923,745	12	192	1/160,312
Maine	590,377	8	59	1/73,797
Maryland	2,552,623	54	255	1/47,271
Massachusetts	3,360,035	29	336	1/115,863

Number of OSHA Inspectors by State Compared with ILO Benchmark Number of Labor Inspectors¹

State	Number of Employees ²	Actual Number of OSHA Inspectors ³	Number of Labor Inspectors Needed to Meet ILO Benchmark ⁴	Ratio of OSHA Inspectors/Number of Employees
Michigan	4,090,009	62	409	1/65,968
Minnesota	2,730,301	44	273	1/62,052
Mississippi	1,102,603	13	110	1/84,816
Missouri	2,667,996	12	267	1/222,333
Montana	440,198	4	44	1/110,050
Nebraska	946,110	8	95	1/118,264
Nevada	1,202,475	44	120	1/27,329
New Hampshire	626,566	7	63	1/89,509
New Jersey	3,841,854	55	384	1/69,852
New Mexico	798,912	8	80	1/99,864
New York	8,846,774	94	885	1/92,154
North Carolina	4,057,439	96	406	1/42,265
North Dakota	444,652	7	44	1/63,522
Ohio	5,183,462	55	518	1/94,245
Oklahoma	1,582,712	17	158	1/93,111
Oregon	1,725,906	72	173	1/23,971
Pennsylvania	5,644,443	57	564	1/99,025
Rhode Island	463,303	7	46	1/66,186
South Carolina	1,895,420	22	190	1/86,155
South Dakota	410,929	N/A	41	N/A
Tennessee	2,750,032	34	275	1/80,883
Texas	11,379,184	91	1,138	1/125,046

Number of OSHA Inspectors by State Compared with ILO Benchmark Number of Labor Inspectors¹

State	Number of Employees ²	Actual Number of OSHA Inspectors ³	Number of Labor Inspectors Needed to Meet ILO Benchmark ⁴	Ratio of OSHA Inspectors/Number of Employees
Utah	1,291,859	19	129	1/67,993
Vermont	304,472	8	30	1/38,059
Virginia	3,654,831	51	365	1/71,663
Washington	3,043,562	109	304	1/27,923
West Virginia	700,846	7	70	1/100,121
Wisconsin	2,758,496	32	276	1/86,203
Wyoming	284,394	9	28	1/31,599
Totals⁵	137,558,577	1,840	13,756	1/74,760

¹The ILO benchmark for labor inspectors is one inspector per 10,000 workers in industrial market economies.

²U.S. Department of Labor, Bureau of Labor Statistics, Employment and Wages, Annual Averages 2014.

³From OSHA records for FY 2016. Includes only safety and industrial hygiene Compliance Safety and Health Officers (CSHOs) who conduct workplace inspections and does not include supervisory CSHOs. Federal CSHOs provided by OSHA's Directorate of Enforcement Programs, CSHO Count By Area Office as of Feb. 19, 2016. State plan CSHOs provided by OSHA's Directorate of Cooperative and State Programs as of Feb. 24, 2016, and includes "on board" safety and health CSHOs from the FY 2016 State Plan Grant Applications. The number of "on board" CSHOs may not accurately reflect the true number of CSHOs actually hired and conducting enforcement inspections due to possible budgetary reasons in any particular state. Total number of inspectors includes 47 inspectors in Puerto Rico and the Virgin Islands.

⁴International Labor Organization, International Labor Office. Strategies and Practice for Labor Inspection. G.B.297/ESP/3. Geneva, November 2006.

⁵Totals include employees and inspectors from the District of Columbia, Puerto Rico and the Virgin Islands.

Profile of Workplace Safety and Health in the United States

State	Fatalities 2014 ¹			Injuries/Illnesses 2014 ²		Penalties FY 2015 ³		Inspectors ⁴	Years to Inspect Each Workplace Once	State or Federal Program ⁵
	Number	Rate	Rank ⁶	Number	Rate	Average (\$)	Rank ⁷			
Alabama	75	4.0	29	37,200	2.9	2,311	12	25	110	Federal
Alaska	30	7.8	48	8,500	3.9	808	43	11	68	State
Arizona	88	3.1	16	53,800	3.0	960	41	26	128	State
Arkansas	67	5.7	40	21,500	2.6	2,221	16	8	287	Federal
California	344	2.0	2	353,900	3.4	6,543	1	196	182	State
Colorado	84	3.3	21	N/A	N/A	1,821	30	25	124	Federal
Connecticut	35	2.1	3	39,700	3.5	1,896	29	23	103	Federal
Delaware	12	2.8	11	7,800	2.6	2,745	4	4	240	Federal
Florida	228	2.7	9	N/A	N/A	2,365	10	63	266	Federal
Georgia	152	3.6	25	80,500	2.9	2,248	15	43	160	Federal
Hawaii	31	5.0	37	14,300	3.7	1,214	35	19	58	State
Idaho	34	4.7	34	N/A	N/A	1,973	27	5	161	Federal
Illinois	164	2.9	14	112,400	2.8	2,258	14	70	143	Federal
Indiana	130	4.4	31	77,500	3.8	782	46	40	134	State
Iowa	91	6.0	42	41,800	3.9	997	40	19	163	State
Kansas	73	5.5	39	32,600	3.4	2,055	24	30	120	Federal

Profile of Workplace Safety and Health in the United States

State	Fatalities 2014 ¹		Injuries/Illnesses 2014 ²		Penalties FY 2015 ³		Inspectors ⁴	Years to Inspect Each Workplace Once	State or Federal Program ⁵	
	Number	Rate	Rank ⁶	Number	Rate	Average (\$)				Rank ⁷
Kentucky	82	4.5	32	46,200	3.7	2,607	7	39	135	State
Louisiana	120	6.3	44	28,500	2.0	2,334	11	12	216	Federal
Maine	19	2.9	14	20,300	5.3	2,025	26	8	111	Federal
Maryland	74	2.6	7	52,400	3.1	715	47	54	119	State
Massachusetts	55	1.7	1	62,100	2.7	2,092	21	29	152	Federal
Michigan	143	3.3	21	99,100	3.6	612	48	62	58	State
Minnesota	62	2.3	6	67,300	3.6	806	44	44	93	State
Mississippi	75	7.1	46	N/A	N/A	2,054	25	13	136	Federal
Missouri	106	3.9	27	59,100	3.2	2,103	19	12	138	Federal
Montana	28	4.9	36	12,600	4.5	1,751	32	4	180	Federal
Nebraska	55	5.8	41	23,100	3.5	2,727	5	8	206	Federal
Nevada	40	3.1	16	34,300	4.0	1,059	38	44	47	State
New Hampshire	17	2.6	7	N/A	N/A	2,169	17	7	122	Federal
New Jersey	87	2.1	3	77,900	2.9	2,441	9	55	95	Federal
New Mexico	53	6.7	45	16,400	3.2	803	45	8	139	State
New York	241	2.8	11	149,100	2.5	2,109	18	94	146	Federal

Profile of Workplace Safety and Health in the United States

State	Fatalities 2014 ¹		Injuries/Illnesses 2014 ²		Penalties FY 2015 ³		Inspectors ⁴	Years to Inspect Each Workplace Once	State or Federal Program ⁵
	Number	Rate	Rank ⁶	Number	Rate	Average (\$)			
North Carolina	137	3.1	16	72,300	2.7	1,091	36	96	State
North Dakota	38	9.8	49	N/A	N/A	3,028	2	7	Federal
Ohio	185	3.6	25	105,600	2.9	2,462	8	55	Federal
Oklahoma	98	6.2	43	N/A	N/A	2,062	23	17	Federal
Oregon	69	3.9	27	46,500	3.9	422	50	72	State
Pennsylvania	179	3.1	16	149,300	3.7	2,075	22	57	Federal
Rhode Island	10	2.1	3	N/A	N/A	1,910	28	7	Federal
South Carolina	64	3.3	21	34,500	2.8	570	49	22	State
South Dakota	29	7.2	47	N/A	N/A	2,712	6	N/A	Federal
Tennessee	127	4.8	35	62,000	3.2	1,441	33	34	State
Texas	531	4.5	32	194,600	2.4	2,098	20	91	Federal
Utah	54	4.2	30	28,200	3.2	1,234	34	19	State
Vermont	10	3.2	20	9,900	5.0	1,038	39	8	State
Virginia	116	2.8	11	66,200	2.7	893	42	51	State
Washington	88	2.7	9	90,000	4.6	1,089	37	109	State
West Virginia	38	5.2	38	19,000	4.0	1,801	31	7	Federal

Profile of Workplace Safety and Health in the United States

State	Fatalities 2014 ¹		Injuries/Illnesses 2014 ²		Penalties FY 2015 ³		Inspectors ⁴	Years to Inspect Each Workplace Once	State or Federal Program ⁵
	Number	Rate	Rank ⁶	Number	Rate	Average (\$)			
Wisconsin	99	3.5	24	74,400	3.9	2,277	13	32	Federal
Wyoming	37	13.1	50	6,600	3.5	2,824	3	98	State
Total or National Average:	4,821	3.4		3.0 Million	3.2	1,598⁸	1,840⁹	120¹⁰	

¹The state fatality rates are calculated by BLS as deaths per 100,000 equivalent workers.

²Bureau of Labor Statistics, rate of total cases per 100 workers. Number and rate are for private sector only and include Guam, Puerto Rico and the Virgin Islands.

³U.S. Department of Labor, OSHA, OIS Inspection Reports, FY 2015. IMIS Inspection Reports, Region by State for Federal (only) and Region by State for 18(B) state (only), FY 2015. Penalties shown are averages per serious citation for conditions creating a substantial probability of death or serious physical harm to workers. For Connecticut, Illinois, New Jersey and New York, averages are based only on federal data.

⁴From OSHA records for FY 2016. Includes only safety and industrial hygiene Compliance Safety and Health Officers (CSHOs) who conduct workplace inspections and does not include supervisory CSHOs. Federal CSHOs provided by OSHA's Directorate of Enforcement Programs, CSHO Count By State as of Feb. 19, 2016. State plan CSHOs provided by OSHA's Directorate of Cooperative and State Programs and includes "on board" safety and health CSHOs from the FY 2016 State Plan Grant Applications as of February 12, 2016. The number of "on board" CSHOs may not accurately reflect the true number of CSHOs actually hired and conducting enforcement inspections due to possible budgetary reasons in any particular state.

⁵Under the OSHA Act, states may operate their own OSHA programs. Twenty-one states and one territory have state OSHA programs covering both public-and private-sector workers. Connecticut, Illinois, Maine, New Jersey and New York have state programs covering state and local employees. Maine's state program went into effect August 5, 2015.

⁶Rankings are based on best-to-worst fatality rate (1–best, 50–worst).

⁷Rankings are based on highest-to-lowest average penalty (\$) per serious violation (1–highest, 50–lowest).

⁸National average is per citation average for federal OSHA serious penalties and state OSHA plan states' serious penalties combined. Federal serious penalties average \$2,148 per citation; state plan OSHA states average \$1,317 per citation.

⁹Total number of inspectors includes 805 federal OSHA inspectors and 1,035 state OSHA inspectors, including 47 inspectors in the Virgin Islands and Puerto Rico.

¹⁰Frequency of all covered establishments for all states combined. Average inspection frequency of covered establishments for federal OSHA states is once every 145 years; inspection frequency of covered establishments for state OSHA plan states is once every 97 years.

State-by-State OSHA Fatality Investigations, FY 2015

State	Number of OSHA Fatality Investigations Conducted, FY 2015 ¹	Total Penalties ¹ (\$)	Average Total Penalty Per Investigation (\$)	Median Initial Penalty ¹ (\$)	Median Current Penalty ¹ (\$)	State or Federal Program ²
Alabama	27	237,092	8,781	7,300	6,500	Federal
Alaska	17	586,120	34,478	4,550	2,575	State
Arizona	20	55,175	2,759	6,850	6,850	State
Arkansas	17	72,420	4,260	7,000	6,050	Federal
California	206	2,230,211	10,826	10,800	9,900	State
Colorado	34	225,330	6,627	7,300	7,078	Federal
Connecticut	12	43,220	3,602	4,600	3,180	Federal
Delaware	4	26,600	6,650	13,300	13,300	Federal
Florida	71	557,636	7,854	7,000	6,300	Federal
Georgia	55	456,378	8,298	9,800	8,475	Federal
Hawaii	4	180,750	45,188	41,000	33,425	State
Idaho	16	64,990	4,062	7,000	5,800	Federal
Illinois	56	478,950	8,553	10,050	7,500	Federal
Indiana ³	17	89,890	5,288	2,100	6,720	State
Iowa	22	167,275	7,603	3,188	3,000	State
Kansas	15	119,460	7,964	7,000	6,000	Federal
Kentucky ³	16	49,600	3,100	3,750	3,500	State
Louisiana	25	208,820	8,352	7,000	7,000	Federal
Maine	3	40,040	13,347	30,500	20,020	Federal
Maryland	37	67,144	1,815	4,450	2,873	State
Massachusetts	24	310,370	12,932	14,000	10,700	Federal
Michigan	41	483,400	11,790	7,000	5,600	State
Minnesota	8	3,650	456	1,825	1,825	State
Mississippi	16	155,163	9,698	9,650	9,650	Federal

State-by-State OSHA Fatality Investigations, FY 2015

State	Number of OSHA Fatality Investigations Conducted, FY 2015 ¹	Total Penalties ¹ (\$)	Average Total Penalty Per Investigation (\$)	Median Initial Penalty ¹ (\$)	Median Current Penalty ¹ (\$)	State or Federal Program ²
Missouri	27	367,890	13,626	14,700	7,700	Federal
Montana	5	42,400	8,480	24,800	21,200	Federal
Nebraska	12	1,023,455	85,288	9,800	7,363	Federal
Nevada	14	11,870	848	1,950	2,400	State
New Hampshire	1	-	-	-	-	Federal
New Jersey	36	415,030	11,529	14,000	10,950	Federal
New Mexico	8	25,125	3,141	6,563	6,563	State
New York	65	1,306,040	20,093	14,000	14,000	Federal
North Carolina ³	56	45,462	812	4,550	3,586	State
North Dakota	19	153,710	8,090	6,650	5,300	Federal
Ohio	51	996,418	19,538	10,300	7,470	Federal
Oklahoma	27	641,300	23,752	12,300	7,250	Federal
Oregon	195	403,850	2,071	1,400	1,330	State
Pennsylvania	57	522,925	9,174	12,800	8,270	Federal
Rhode Island	2	5,760	2,880	9,600	5,760	Federal
South Carolina ³	29	53,412	1,842	2,875	1,813	State
South Dakota	4	20,700	5,175	8,000	6,000	Federal
Tennessee	34	215,537	6,339	6,900	6,900	State
Texas	218	2,169,764	9,953	8,000	7,000	Federal
Utah	15	34,750	2,317	2,500	1,875	State
Vermont	3	8,300	2,767	3,600	4,150	State
Virginia	32	265,644	8,301	8,155	7,000	State
Washington	7	111,120	15,874	11,000	8,800	State
West Virginia	11	104,130	9,466	11,000	9,600	Federal

State-by-State OSHA Fatality Investigations, FY 2015

State	Number of OSHA Fatality Investigations Conducted, FY 2015 ¹	Total Penalties ¹ (\$)	Average Total Penalty Per Investigation (\$)	Median Initial Penalty ¹ (\$)	Median Current Penalty ¹ (\$)	State or Federal Program ²
Wisconsin	32	495,935	15,498	7,000	6,000	Federal
Wyoming	12	100,245	8,354	26,280	28,660	State
National Median State Plan States				4,600	3,500	
National Median Federal States				9,000	7,000	
Total or National Average⁴	1,809	16,770,415	9,271			

¹OSHA IMIS Fatality Inspection and OSHA OIS Fatality Inspection Reports, FY 2015. Federal plan reports were issued on March 15, 2016. State plan reports were issued on March 23, 2015. National median penalties include investigations conducted in Puerto Rico, the District of Columbia and American Samoa.

²Under the OSHA Act, states may operate their own OSHA programs. Connecticut, Illinois, Maine, New Jersey and New York have state programs covering state and local employees only. Maine's state plan went into effect on Aug. 5, 2015. Twenty-one states and one territory have state OSHA programs covering both public- and private-sector workers.

³Fatality inspections and average penalty data for these states were pulled from both IMIS and OIS in FY 2015. However, their median initial and median current penalties were calculated only from IMIS inspections. A total of 18 inspections in OIS for FY 2015 are not included in median penalty calculations.

⁴National fatality investigations for all federal OSHA and state OSHA plan states combined. Federal OSHA average is \$11,802 per fatality investigation; for state plan OSHA states, the average is \$6,364 per fatality investigation. Total investigations, total penalties and national average penalty per investigation includes investigations conducted in Puerto Rico and the District of Columbia.

Workplace Safety and Health Statistics by State, 2009–2014

	Fatality Rates ¹						Injury/Illness Rates ²						Average Penalties (\$) ³					
	2009	2010	2011	2012	2013	2014	2009	2010	2011	2012	2013	2014	FY10	FY11	FY12	FY13	FY14	FY15
	Alabama	4.3	5.1	4.0	4.3	4.0	4.0	3.6	3.5	3.7	3.3	3.3	2.9	1,167	2,352	2,184	1,803	2,016
Alaska	5.6	11.5	11.1	8.9	7.9	7.8	4.5	4.5	4.5	4.6	4.3	3.9	886	707	960	889	823	808
Arizona	2.9	2.8	2.7	2.3	3.5	3.1	3.5	3.3	3.2	3.2	3.3	3.0	1,008	1,030	1,036	891	935	960
Arkansas	6.4	7.6	8.0	5.4	5.6	5.7	3.5	3.3	3.4	3.2	3.0	2.6	1,259	2,311	2,506	2,569	2,329	2,221
California	2.6	2.1	2.4	2.3	2.4	2.0	3.7	3.7	3.5	3.5	3.5	3.4	4,631	4,851	5,043	6,422	5,733	6,543
Colorado	3.4	3.7	3.9	3.5	2.7	3.3	N/A	N/A	N/A	N/A	N/A	N/A	801	1,721	1,603	1,649	1,564	1,821
Connecticut	2.0	3.0	2.2	2.1	1.8	2.1	4.2	4.0	4.5	3.9	3.8	3.5	1,249	1,831	1,985	1,735	1,794	1,896
Delaware	1.9	2.2	2.6	3.1	2.6	2.8	3.1	3.2	2.9	2.8	2.7	2.6	1,895	2,569	3,053	2,406	1,985	2,745
Florida	3.2	3.0	2.9	2.7	2.8	2.7	3.5	3.4	N/A	N/A	N/A	N/A	1,025	1,997	1,926	1,821	2,181	2,365
Georgia	2.8	2.8	2.8	2.5	2.8	3.6	3.1	3.1	2.9	2.8	2.8	2.9	1,036	2,002	2,114	2,061	2,127	2,248
Hawaii	2.1	3.2	4.2	3.4	1.6	5.0	4.0	3.9	3.5	3.8	3.7	3.7	779	907	1,002	964	1,279	1,214
Idaho	4.3	4.9	5.1	2.7	4.3	4.7	N/A	N/A	N/A	N/A	N/A	N/A	1,018	1,919	1,347	1,449	1,639	1,973
Illinois	2.9	3.7	3.1	2.5	3.1	2.9	3.5	3.3	3.2	3.2	3.2	2.8	991	2,151	2,255	1,876	1,980	2,258
Indiana	4.7	4.2	4.5	4.2	4.4	4.4	4.2	4.1	4.2	3.9	3.6	3.8	900	886	996	1,054	957	782
Iowa	5.6	5.2	6.3	6.6	4.7	6.0	4.6	4.4	4.3	4.5	4.5	3.9	1,230	1,289	880	790	901	997
Kansas	5.8	6.5	5.9	5.7	4.2	5.5	4.1	3.7	3.9	3.6	3.5	3.4	1,283	2,243	2,293	1,971	2,017	2,055
Kentucky	6.0	4.1	5.4	4.9	4.7	4.5	4.2	4.2	4.2	4.1	4.0	3.7	1,410	2,248	3,368	3,254	2,828	2,607
Louisiana	8.0	6.2	6.3	6.4	6.3	6.3	2.8	2.7	2.5	2.3	2.2	2.0	1,287	2,350	2,348	1,765	2,201	2,334
Maine	2.8	3.3	4.2	3.2	3.1	2.9	5.6	5.6	5.7	5.6	5.3	5.3	1,115	2,231	2,146	2,083	2,013	2,025
Maryland	2.5	2.7	2.6	2.6	2.7	2.6	3.3	3.6	3.0	3.1	3.0	3.1	854	726	814	685	746	715
Massachusetts	2.2	1.8	2.2	1.4	1.8	1.7	N/A	3.2	3.2	3.1	2.9	2.7	1,119	2,183	2,351	1,929	2,104	2,092
Michigan	6.0	3.6	3.5	3.4	3.3	3.3	4.2	4.2	3.8	4.0	3.7	3.6	392	463	537	542	585	612
Minnesota	2.4	2.8	2.3	2.6	2.6	2.3	3.8	3.8	3.7	3.8	3.7	3.6	631	730	847	768	752	806

Workplace Safety and Health Statistics by State, 2009–2014

	Fatality Rates ¹						Injury/Illness Rates ²						Average Penalties (\$) ³					
	2009	2010	2011	2012	2013	2014	2009	2010	2011	2012	2013	2014	FY10	FY11	FY12	FY13	FY14	FY15
	Mississippi	6.3	6.4	5.5	5.5	6.2	7.1	N/A	N/A	N/A	N/A	N/A	N/A	991	1,851	1,521	1,515	1,726
Missouri	5.6	4.2	4.9	3.3	4.3	3.9	3.5	3.4	3.4	3.3	3.2	3.2	849	2,014	2,076	1,931	1,877	2,103
Montana	12.1	8.2	11.2	7.3	5.8	4.9	5.3	5.0	5.0	5.0	4.7	4.5	1,021	2,597	2,336	1,983	1,938	1,751
Nebraska	6.2	6.3	3.9	5.2	4.0	5.8	4.1	4.2	3.9	3.9	3.8	3.5	1,279	2,984	2,835	2,565	2,569	2,727
Nevada	2.2	3.7	3.1	3.6	3.0	3.1	4.3	3.8	3.9	4.1	4.0	4.0	1,161	2,263	2,054	2,133	2,244	1,059
New Hampshire	0.9	0.9	1.2	2.2	2.1	2.6	N/A	N/A	N/A	N/A	N/A	N/A	1,640	2,656	2,531	2,243	2,113	2,169
New Jersey	2.6	2.2	2.6	2.4	2.6	2.1	3.3	3.2	3.0	3.1	2.9	2.9	1,106	2,233	2,398	2,151	2,176	2,441
New Mexico	5.2	4.9	6.6	4.8	6.7	6.7	4.2	3.7	4.2	3.9	3.2	3.2	1,257	1,025	1,041	998	879	803
New York	2.2	2.2	2.5	2.4	2.1	2.8	2.9	2.7	2.9	2.5	2.4	2.5	991	2,043	2,164	2,016	1,907	2,109
North Carolina	3.3	3.5	3.7	3.5	2.5	3.1	3.1	3.1	3.1	2.9	2.7	2.7	884	1,081	970	996	1,250	1,091
North Dakota	7.9	8.5	12.4	17.7	14.9	9.8	N/A	N/A	N/A	N/A	N/A	N/A	1,180	2,091	2,655	3,045	2,659	3,028
Ohio	2.8	3.2	3.1	3.1	3.0	3.6	N/A	N/A	N/A	3.2	2.9	2.9	1,014	2,010	2,320	2,156	2,299	2,462
Oklahoma	5.3	6.3	5.5	6.1	5.8	6.2	4.0	4.0	3.9	3.6	N/A	N/A	1,169	2,098	2,196	1,872	1,880	2,062
Oregon	3.9	2.9	3.4	2.6	2.9	3.9	4.4	3.9	3.8	3.9	4.1	3.9	305	346	388	363	364	422
Pennsylvania	3.1	4.0	3.4	3.4	3.2	3.1	N/A	N/A	4.1	3.9	3.9	3.7	1,105	2,197	2,090	1,916	1,796	2,075
Rhode Island	1.5	1.9	1.5	1.7	2.1	2.1	N/A	N/A	N/A	N/A	N/A	N/A	1,032	1,758	2,332	2,023	1,895	1,910
South Carolina	4.0	3.6	4.5	3.5	3.9	3.3	3.2	3.1	3.3	3.0	2.9	2.8	298	519	597	492	521	570
South Dakota	5.9	8.8	6.7	6.7	4.7	7.2	N/A	N/A	N/A	N/A	N/A	N/A	898	2,107	3,574	2,346	2,309	2,712
Tennessee	4.5	5.4	4.5	3.8	3.6	4.8	3.8	3.7	3.5	3.5	3.3	3.2	824	894	710	727	687	1,441
Texas	4.6	4.4	4.0	4.8	4.4	4.5	2.9	2.7	2.7	2.7	2.6	2.4	1,132	2,540	2,328	2,187	2,154	2,098
Utah	3.9	3.1	3.3	3.0	2.9	4.2	4.0	3.4	3.6	3.4	3.4	3.2	1,019	974	963	1,053	1,173	1,234
Vermont	2.9	3.9	2.6	3.5	2.2	3.2	5.2	5.2	5.0	5.0	5.2	5.0	732	886	1,064	1,008	889	1,038
Virginia	3.3	2.8	3.4	3.8	3.2	2.8	2.9	3.1	2.9	2.7	2.6	2.7	663	798	770	726	660	893

Workplace Safety and Health Statistics by State, 2009–2014

	Fatality Rates ¹				Injury/Illness Rates ²				Average Penalties (\$) ³									
	2009	2010	2011	2012	2013	2014	2009	2010	2011	2012	2013	2014	FY10	FY11	FY12	FY13	FY14	FY15
Washington	2.5	3.4	1.9	2.2	1.7	2.7	5.1	4.8	4.9	4.8	4.8	4.6	595	737	745	791	896	1,089
West Virginia	5.7	13.7	5.9	6.9	8.6	5.2	4.4	4.4	3.9	4.1	3.7	4.0	1,007	1,636	2,177	1,798	1,685	1,801
Wisconsin	3.4	3.4	3.3	4.0	3.5	3.5	4.2	4.3	4.2	4.0	4.0	3.9	1,025	2,094	2,343	2,207	2,121	2,277
Wyoming	7.5	12.9	11.6	12.2	9.5	13.1	4.0	4.0	3.6	3.5	3.4	3.5	482	1,147	1,612	1,777	1,911	2,824
National Average	3.5	3.6	3.5	3.4	3.3	3.4	3.6	3.5	3.5	3.4	3.3	3.2	\$972	\$1,576	\$1,603	\$1,489	\$1,972	\$2,148

¹Bureau of Labor Statistics, rate per 100,000 workers.

²Bureau of Labor Statistics; rate of total cases per 100 workers. Number and rate are for private sector only and national average includes Guam, Puerto Rico and the Virgin Islands. Due to revisions of the OSHA recordkeeping requirements, the estimates from the BLS 2002 survey and beyond are not comparable with those from previous years.

³ U.S. Department of Labor, OSHA IMIS Inspection Reports, National by Region for 18(B) State (only) and/or National by Region for Federal (only), FY2010 through FY2015, and OIS inspection reports for FY2011 through FY2015. Penalties shown are averages per serious citation for conditions creating a substantial probability of death or serious physical harm to workers. For Connecticut, Illinois, New Jersey and New York, averages are based only on federal data. Penalty data for FY 2011 does not include penalty information from approximately 4,500 inspections conducted in federal states in several OSHA regional offices that converted from IMIS to the new OIS data system at some point during FY 2011.

Workplace Fatalities by State, 1996–2014

Total Fatalities																			
State	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Alabama	155	139	135	123	103	138	102	124	133	128	100	108	107	75	92	75	84	78	75
Alaska	63	51	43	42	53	64	42	28	42	29	45	30	33	17	39	39	31	32	30
Arizona	77	61	74	70	118	87	101	80	84	99	112	97	100	76	77	69	60	95	88
Arkansas	88	102	86	76	106	68	80	87	70	80	78	89	85	75	88	93	63	63	67
California	641	651	626	602	553	515	478	459	467	465	537	461	465	409	326	390	375	396	344
Colorado	90	120	77	106	117	139	123	102	117	125	137	126	105	83	85	92	82	65	84
Connecticut	35	32	57	38	55	41	39	36	54	46	38	38	28	34	49	37	36	29	35
Delaware	18	17	11	14	13	10	11	9	10	11	15	10	11	7	8	10	14	11	12
Florida	333	366	384	345	329	368	354	347	422	406	360	363	291	245	225	226	218	239	228
Georgia	213	242	202	229	195	237	197	199	232	200	201	193	182	110	108	111	101	117	152
Hawaii	27	19	12	32	20	41	24	21	25	15	30	23	19	13	19	26	20	11	31
Idaho	62	56	51	43	35	45	39	43	38	35	38	31	36	27	33	37	19	30	34
Illinois	262	240	216	208	206	231	190	200	208	194	207	185	193	158	206	177	146	176	164
Indiana	143	190	155	171	159	152	136	132	153	157	148	127	143	125	118	125	115	127	130
Iowa	70	80	68	80	71	62	57	76	82	90	71	89	93	80	77	93	97	72	91
Kansas	85	93	98	87	85	94	89	78	80	81	85	101	73	76	85	78	76	55	73
Kentucky	141	143	117	120	132	105	146	145	143	122	147	112	106	101	69	93	91	86	82
Louisiana	134	137	159	141	143	117	103	95	121	111	118	139	135	140	111	111	116	114	120
Maine	23	19	26	32	26	23	30	23	16	15	20	21	24	16	20	26	19	19	19
Maryland	82	82	78	82	84	64	102	92	81	95	106	82	60	65	71	71	72	79	74

Workplace Fatalities by State, 1996–2014

State	Total Fatalities																		
	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Massachusetts	62	69	44	83	70	54	46	78	72	75	66	75	68	64	54	68	44	57	55
Michigan	155	174	179	182	156	175	152	152	127	110	157	120	123	94	146	141	137	135	143
Minnesota	92	72	88	72	68	76	81	72	80	87	78	72	65	61	70	60	70	69	62
Mississippi	103	104	113	128	125	111	94	102	88	112	96	93	80	67	68	63	63	68	75
Missouri	140	123	145	165	148	145	175	154	165	185	167	156	148	142	106	132	88	118	106
Montana	50	56	58	49	42	58	51	39	39	50	45	54	40	52	36	49	34	28	28
Nebraska	56	46	56	66	59	57	83	51	46	36	57	63	53	57	54	39	48	39	55
Nevada	52	55	60	58	51	40	47	52	61	57	49	71	41	24	38	38	42	42	40
New Hampshire	11	23	23	14	13	9	19	19	15	18	13	14	7	6	6	9	14	14	17
New Jersey	100	101	103	104	115	129	129	104	129	112	88	106	92	99	81	99	92	102	87
New Mexico	60	50	48	39	35	59	63	46	57	44	59	52	31	42	38	52	39	54	53
New York	317	264	243	241	233	220	240	227	254	239	234	220	213	185	182	206	202	178	241
North Carolina	191	210	228	222	234	203	169	182	183	165	168	167	161	129	139	148	146	109	137
North Dakota	23	35	24	22	34	25	25	26	24	22	31	25	28	25	30	44	65	56	38
Ohio	201	201	186	222	207	209	202	206	202	168	193	165	168	137	161	155	161	149	185
Oklahoma	87	104	75	99	82	115	92	100	91	95	91	104	102	82	94	86	97	92	98
Oregon	85	84	72	69	52	44	63	75	60	65	87	69	55	66	47	58	43	49	69
Pennsylvania	282	259	235	221	199	225	188	208	230	224	240	220	241	168	221	186	194	183	179
Rhode Island	6	11	12	11	7	17	8	18	7	6	10	5	6	7	9	7	8	10	10

Workplace Fatalities by State, 1996–2014

Total Fatalities																			
State	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
South Carolina	109	131	111	139	115	91	107	115	113	132	95	122	87	73	69	81	63	75	64
South Dakota	32	23	28	46	35	35	36	28	24	31	37	22	30	24	36	31	31	20	29
Tennessee	152	168	150	154	160	136	140	137	145	139	153	154	135	111	138	120	101	95	127
Texas	514	459	523	468	572	536	417	491	440	495	489	528	463	482	461	433	536	508	531
Utah	64	66	67	54	61	65	52	54	50	54	60	78	64	48	41	39	39	37	54
Vermont	7	9	16	14	15	6	11	14	7	7	14	10	10	12	12	8	11	7	10
Virginia	153	166	177	154	148	146	142	155	171	186	165	146	156	119	107	127	149	128	116
Washington	128	112	113	88	75	102	86	83	98	85	87	90	84	76	104	60	67	56	88
West Virginia	66	53	57	57	46	63	40	51	58	46	79	61	53	41	95	43	49	61	38
Wisconsin	108	114	97	105	107	110	91	103	94	125	91	104	77	94	91	89	114	97	99
Wyoming	28	29	33	32	36	40	33	37	43	46	36	48	33	19	33	32	35	26	37
Total^{1,2}	6,202	6,238	6,055	6,054	5,920	5,915	5,534	5,575	5,764	5,734	5,840	5,657	5,214	4,551	4,690	4,693	4,628	4,585	4,821

Source: U.S. Department of Labor, Bureau of Labor Statistics, in cooperation with state and federal agencies, Census of Fatal Occupational Injuries.

¹In 2014, four fatal injuries occurred in Guam and 29 fatal injuries occurred in Puerto Rico, but are not reflected in the U.S. total.

²States cannot always be assigned to fatality cases. Also, some fatalities occur at sea outside of specific state jurisdictions. In 2014, there were five fatalities at sea.

Fatalities by State and Event or Exposure, 2014

State	Total Fatalities 2014	Assaults and Violent Acts	Transportation Incidents	Fires and Explosions	Falls	Exposure to Harmful Substances or Environments	Contact with Objects and Equipment
Alabama	75	17	34	--	8	5	8
Alaska	30	7	16	--	--	--	3
Arizona	88	16	33	--	14	14	9
Arkansas	67	7	33	3	12	4	8
California	344	75	119	3	72	34	38
Colorado	84	12	42	--	9	7	13
Connecticut	35	8	12	1	9	3	2
Delaware	12	3	9	--	--	--	--
District of Columbia	11	5	--	--	--	--	3
Florida	228	39	84	--	50	38	15
Georgia	152	33	62	--	29	4	22
Hawaii	31	4	14	--	7	--	3
Idaho	34	3	18	--	3	--	6
Illinois	164	31	59	--	30	11	31
Indiana	130	26	54	12	16	7	15
Iowa	91	6	33	3	25	5	19
Kansas	73	8	34	--	12	6	11
Kentucky	82	12	35	--	14	7	14
Louisiana	120	16	60	8	15	9	12
Maine	19	--	11	--	--	--	6
Maryland	74	24	22	--	12	4	11

Fatalities by State and Event or Exposure, 2014

State	Total Fatalities 2014	Assaults and Violent Acts	Transportation Incidents	Fires and Explosions	Falls	Exposure to Harmful Substances or Environments	Contact with Objects and Equipment
Massachusetts	55	15	17	2	11	2	8
Michigan	143	32	51	3	24	11	22
Minnesota	62	8	25	--	9	5	14
Mississippi	75	8	34	4	11	9	9
Missouri	106	12	42	--	23	5	22
Montana	28	3	10	--	9	1	5
Nebraska	55	7	26	2	9	1	10
Nevada	40	10	10	--	6	6	7
New Hampshire	17	4	6	--	3	3	--
New Jersey	87	11	36	3	24	--	11
New Mexico	53	6	34	--	--	--	7
New York	241	41	83	8	48	16	43
North Carolina	137	16	55	6	25	17	18
North Dakota	38	--	17	--	6	3	10
Ohio	185	31	63	5	34	17	35
Oklahoma	98	4	67	5	7	3	12
Oregon	69	12	29	1	10	4	13
Pennsylvania	179	23	78	8	25	16	29
Rhode Island	10	--	--	--	6	--	--
South Carolina	64	14	27	4	11	4	4
South Dakota	29	--	13	--	9	--	5

Fatalities by State and Event or Exposure, 2014

State	Total Fatalities 2014	Assaults and Violent Acts	Transportation Incidents	Fires and Explosions	Falls	Exposure to Harmful Substances or Environments	Contact with Objects and Equipment
Tennessee	127	15	59	5	23	9	16
Texas	531	66	243	24	67	53	77
Utah	54	7	22	--	3	9	12
Vermont	10	--	5	--	--	--	--
Virginia	116	20	52	--	18	7	19
Washington	88	15	24	--	17	9	21
West Virginia	38	3	12	--	10	4	8
Wisconsin	99	15	39	--	17	5	22
Wyoming	37	6	16	--	9	--	3
Total^{1,2}	4,821	765	1,984	137	818	390	715

Source: U. S. Department of Labor, Bureau of Labor Statistics, in cooperation with state and federal agencies, Census of Fatal Occupational Injuries, 2014.

¹Four fatal injuries occurred in Guam and 29 fatal injuries occurred in Puerto Rico, but are not reflected in the U.S. total.

²States cannot always be assigned to fatality cases. Also, some fatalities occur outside of specific state jurisdictions, such as at sea.

Note: State totals include other events and exposures, such as bodily reaction, in addition to those shown separately. Dashes indicate no data reported or data that do not meet BLS publication criteria.

Number and Rate of Injuries and Illnesses by State for All Industries, Private Industry, State Government and Local Government, 2014

State	Number of Injuries/Illnesses				Rate of Injuries/Illnesses ¹			
	All Industries	Private Industry	State Government	Local Government	All Industries	Private Industry	State Government	Local Government
Alabama	46,000	37,200	N/A	7,300	3.0	2.9	N/A	4.0
Alaska	10,400	8,500	700	1,200	4.0	3.9	3.4	4.8
Arizona	65,400	53,800	1,700	10,000	3.2	3.0	2.5	5.5
Arkansas	27,200	21,500	1,600	4,200	2.7	2.6	2.6	4.4
California	460,700	353,900	21,500	85,400	3.8	3.4	5.6	7.4
Colorado	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Connecticut	48,200	39,700	2,300	6,200	3.7	3.5	4.4	6.4
Delaware	9,600	7,800	800	1,000	2.8	2.6	3.0	4.9
Florida	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Georgia	105,100	80,500	N/A	N/A	3.2	2.9	N/A	N/A
Hawaii	17,300	14,300	1,900	1,200	3.8	3.7	3.8	6.9
Idaho	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Illinois	141,700	112,400	3,700	25,500	3.2	2.8	3.2	6.1
Indiana	93,300	77,500	2,700	13,000	4.0	3.8	3.0	6.7
Iowa	53,400	41,800	1,800	9,700	4.4	3.9	4.4	8.1
Kansas	39,600	32,600	N/A	6,200	3.7	3.4	N/A	5.5
Kentucky	55,100	46,200	2,400	6,500	3.8	3.7	3.3	5.1
Louisiana	37,600	28,500	2,000	7,100	2.3	2.0	2.8	4.0
Maine	23,300	20,300	900	2,100	5.3	5.3	5.3	5.3

Number and Rate of Injuries and Illnesses by State for All Industries, Private Industry, State Government and Local Government, 2014

State	Number of Injuries/Illnesses				Rate of Injuries/Illnesses ¹			
	All Industries	Private Industry	State Government	Local Government	All Industries	Private Industry	State Government	Local Government
Maryland	68,600	52,400	4,400	11,800	3.5	3.1	4.8	6.7
Massachusetts	85,400	62,100	N/A	N/A	3.3	2.7	N/A	N/A
Michigan	117,400	99,100	7,300	11,000	3.7	3.6	5.8	4.6
Minnesota	78,700	67,300	2,700	8,800	3.7	3.6	3.8	5.0
Mississippi	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Missouri	71,500	59,100	N/A	7,900	3.3	3.2	N/A	3.8
Montana	15,400	12,600	700	2,100	4.6	4.5	3.6	6.2
Nebraska	27,400	23,100	N/A	3,200	3.6	3.5	N/A	4.0
Nevada	39,500	34,300	1,200	4,000	4.1	4.0	4.5	5.4
New Hampshire	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
New Jersey	101,200	77,900	4,900	18,400	3.3	2.9	4.9	6.3
New Mexico	23,100	16,400	1,900	4,800	3.6	3.2	4.3	6.5
New York	213,300	149,100	14,200	50,000	3.1	2.5	7.4	6.6
North Carolina	91,600	72,300	4,100	15,200	2.9	2.7	2.7	4.4
North Dakota	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Ohio	121,300	105,600	N/A	13,700	2.9	2.9	N/A	3.6
Oklahoma	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Oregon	54,500	46,500	1,800	6,100	4.0	3.9	3.2	5.1
Pennsylvania	163,300	149,300	N/A	N/A	3.6	3.7	N/A	N/A

Number and Rate of Injuries and Illnesses by State for All Industries, Private Industry, State Government and Local Government, 2014

State	Number of Injuries/Illnesses				Rate of Injuries/Illnesses ¹			
	All Industries	Private Industry	State Government	Local Government	All Industries	Private Industry	State Government	Local Government
Rhode Island	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
South Carolina	45,600	34,500	2,000	9,000	3.0	2.8	2.8	5.1
South Dakota	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Tennessee	73,300	62,000	1,100	10,300	3.3	3.2	1.8	4.7
Texas	248,600	194,600	N/A	N/A	2.6	2.4	N/A	N/A
Utah	32,700	28,200	1,300	3,100	3.3	3.2	2.8	4.0
Vermont	11,600	9,900	500	1,300	5.1	5.0	3.9	6.1
Virginia	85,000	66,200	3,300	15,500	3.0	2.7	2.7	5.2
Washington	108,000	90,000	4,100	13,800	4.7	4.6	3.8	6.6
West Virginia	23,500	19,000	1,500	3,000	4.1	4.0	3.9	5.0
Wisconsin	86,300	74,400	2,800	9,100	4.0	3.9	3.7	5.1
Wyoming	8,600	6,600	500	1,600	3.7	3.5	3.7	4.7
Total or National Average²	3.7 Million	3.0 Million	162,300	560,000	3.4	3.2	4.1	5.4

Source: U.S. Department of Labor, Bureau of Labor Statistics, Survey of Occupational Injuries and Illnesses, 2014.

¹Rate of total cases of injuries and illnesses per 100 workers.

²Total number of injuries and illnesses and national average rate of injuries and illnesses includes the District of Columbia, Guam, Puerto Rico and the Virgin Islands.

Hispanic and Latino Worker Fatalities by State, 1997–2014¹

State	Fatalities																	
	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Alabama	--	--	--	--	5	8	6	9	6	5	5	5	--	5	3	5	6	--
Alaska	--	--	--	--	--	--	--	3	5	--	--	--	--	--	5	5	3	--
Arizona	13	27	26	26	34	28	17	25	36	36	26	30	22	18	21	16	25	31
Arkansas	--	--	8	9	--	5	9	5	8	3	5	9	--	6	7	3	6	9
California	189	174	216	172	188	176	164	188	190	231	179	180	161	142	154	137	194	130
Colorado	22	15	19	27	25	16	25	25	19	18	30	21	17	19	22	21	14	18
Connecticut	--	10	--	12	9	7	--	10	5	7	4	7	4	5	7	6	5	3
Delaware	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	3	3
Florida	84	58	68	75	84	98	90	119	113	95	111	73	49	38	53	54	68	60
Georgia	11	19	17	26	36	16	26	29	25	35	28	26	10	16	14	10	14	21
Hawaii	--	--	--	--	--	--	--	--	--	--	4	--	--	--	--	1	--	4
Idaho	--	--	6	5	--	9	3	6	3	7	--	5	4	5	--	--	6	5
Illinois	17	17	21	17	30	27	22	29	23	30	27	25	16	25	25	19	26	16
Indiana	--	--	--	--	8	9	7	7	5	7	7	14	3	3	8	8	8	13
Iowa	--	--	--	--	--	--	--	7	--	--	4	6	8	5	3	4	--	3
Kansas	5	15	5	5	6	5	4	11	10	4	5	9	8	4	10	8	6	10
Kentucky	--	--	--	--	--	--	3	--	6	7	6	7	3	--	3	6	--	8
Louisiana	--	--	--	5	5	--	--	9	8	10	11	5	11	7	8	13	15	8
Maine	--	--	--	--	--	14	--	--	--	--	--	--	--	--	--	--	--	--

Hispanic and Latino Worker Fatalities by State, 1997–2014¹

Fatalities																		
State	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Maryland	--	--	--	6	--	10	11	17	8	22	7	10	3	12	8	15	15	8
Massachusetts	6	--	6	--	6	5	6	9	6	7	11	10	5	7	11	3	3	2
Michigan	--	6	12	6	7	7	4	6	8	12	7	8	4	10	4	4	3	6
Minnesota	--	--	--	5	--	--	5	3	6	4	--	--	--	3	--	--	--	4
Mississippi	--	--	--	5	11	5	--	4	3	3	7	7	4	5	--	--	--	--
Missouri	--	--	--	--	8	--	6	4	--	4	7	4	6	3	4	--	5	5
Montana	--	--	--	--	5	--	--	--	4	3	3	--	3	3	--	--	--	--
Nebraska	--	--	--	--	--	9	3	4	--	--	4	5	--	3	3	5	3	9
Nevada	9	9	6	10	10	8	10	17	9	12	12	13	6	9	8	8	9	8
New Hampshire	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--
New Jersey	12	12	17	23	25	33	24	34	30	28	23	25	25	20	26	15	20	31
New Mexico	23	17	13	9	27	21	9	12	19	30	21	10	16	17	23	22	20	22
New York	31	34	42	55	45	43	36	45	34	57	41	33	35	29	30	39	32	50
North Carolina	18	14	12	22	20	25	21	26	27	23	14	20	12	13	21	13	16	19
North Dakota	--	--	--	--	--	--	--	--	--	--	--	--	4	5	3	12	--	--
Ohio	--	5	--	5	6	--	15	5	5	8	6	4	4	8	1	8	2	3
Oklahoma	8	5	--	--	16	8	3	13	8	8	13	9	7	17	10	7	18	16
Oregon	--	10	--	6	5	--	7	4	6	11	6	--	8	6	6	--	9	8
Pennsylvania	5	7	8	16	10	12	10	6	11	14	16	11	10	13	14	13	4	13

Hispanic and Latino Worker Fatalities by State, 1997–2014¹

Fatalities																		
State	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Rhode Island	--	--	--	--	--	--	--	--	--	--	--	--	--	--	3	--	--	--
South Carolina	--	--	7	12	9	7	18	13	10	10	7	8	10	10	10	4	7	6
South Dakota	--	--	--	--	--	--	--	--	--	--	--	3	--	--	--	--	--	--
Tennessee	--	--	5	12	5	7	8	9	5	14	8	9	8	8	9	9	9	6
Texas	133	175	151	190	170	147	163	150	200	174	211	148	185	165	171	201	192	206
Utah	--	9	5	6	8	6	11	5	4	6	10	6	8	4	3	6	5	7
Vermont	--	--	--	--	--	--	--	--	--	--	--	--	--	--	1	--	--	--
Virginia	9	6	12	5	12	15	13	13	24	13	18	16	7	9	14	15	22	9
Washington	11	17	--	13	13	15	5	14	7	7	10	8	7	14	5	12	4	8
West Virginia	--	--	--	--	--	--	--	--	4	--	--	--	--	--	--	--	--	--
Wisconsin	--	--	--	--	8	--	3	--	9	3	5	--	5	4	4	7	7	5
Wyoming	--	--	--	5	5	8	--	3	--	--	8	--	--	--	--	3	--	3
Totals²	658	707	730	815	891	840	794	902	923	990	937	804	713	707	749	748	817	804

Source: U.S. Department of Labor, Bureau of Labor Statistics, in cooperation with state and federal agencies, Census of Fatal Occupational Injuries.

¹Latino includes both foreign-born and native-born.

²Total includes fatalities that may have occurred in the District of Columbia.

Note: Dashes indicate no data reported or data that do not meet BLS publication criteria.

Foreign-Born Worker Fatalities by State, 1997–2014¹

State	Fatalities																	
	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Alabama	--	--	--	--	--	5	3	6	10	--	5	3	7	10	5	8	7	5
Alaska	5	--	--	--	9	--	7	7	5	4	4	3	--	6	7	4	--	2
Arizona	10	23	21	19	29	22	15	21	31	27	18	21	14	15	15	16	19	22
Arkansas	--	--	5	9	--	--	--	4	--	--	9	7	3	12	5	4	8	11
California	134	111	223	195	208	170	146	174	203	229	182	145	146	145	164	153	176	137
Colorado	15	12	15	11	23	11	22	21	11	21	24	14	16	13	16	14	9	13
Connecticut	6	13	5	14	20	7	7	15	7	10	4	--	3	10	9	8	8	8
Delaware	--	--	--	--	--	--	--	--	--	5	--	--	--	--	5	4	4	3
Florida	106	65	69	91	96	106	109	123	119	119	121	86	62	55	67	64	74	72
Georgia	14	22	14	28	57	20	34	24	31	35	28	27	4	4	18	16	13	31
Hawaii	--	--	--	6	11	8	4	9	4	11	6	4	3	4	7	7	2	8
Idaho	--	--	5	5	--	8	3	4	3	7	3	5	3	6	3	1	5	6
Illinois	37	29	31	28	52	37	42	44	36	37	34	34	23	42	38	28	31	27
Indiana	7	8	5	7	11	11	9	10	13	12	6	13	5	8	8	11	16	15
Iowa	--	--	--	--	--	--	--	5	--	--	7	7	8	3	2	7	4	3
Kansas	--	8	--	5	5	7	6	10	12	4	5	10	5	4	9	8	6	7
Kentucky	--	--	--	--	--	8	--	3	7	10	5	7	6	--	4	6	6	9
Louisiana	6	7	--	7	9	--	--	3	10	11	7	5	9	6	7	16	15	10
Maine	--	5	--	--	--	15	--	--	--	--	--	--	--	3	--	1	2	--

Foreign-Born Worker Fatalities by State, 1997–2014¹

Fatalities																		
State	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Maryland	--	9	15	12	8	16	21	24	26	34	18	15	10	16	12	20	21	17
Massachusetts	7	6	16	5	7	14	14	22	22	11	18	16	13	15	16	7	16	10
Michigan	13	7	24	18	15	15	16	11	12	19	14	10	8	17	10	12	12	15
Minnesota	--	--	--	--	--	5	5	4	10	6	--	--	--	5	1	5	2	4
Mississippi	5	--	--	--	6	5	--	3	8	--	9	5	3	6	4	2	3	3
Missouri	--	--	10	7	6	7	5	9	6	9	12	8	9	4	--	--	19	10
Montana	--	--	--	--	--	--	--	--	--	4	3	--	5	--	1	4	3	--
Nebraska	--	--	--	--	--	12	--	3	--	--	5	6	4	3	3	7	4	8
Nevada	6	7	9	9	12	13	9	15	8	9	11	11	--	9	13	11	5	9
New Hampshire	--	--	--	--	--	--	3	--	--	--	--	--	--	--	--	1	--	1
New Jersey	30	26	25	31	37	41	41	39	47	34	36	40	41	20	40	27	31	30
New Mexico	11	8	--	--	15	6	4	6	7	10	8	5	5	8	10	10	8	13
New York	67	66	67	91	75	80	73	74	79	90	66	71	57	63	57	65	60	66
North Carolina	19	13	17	7	22	26	26	25	29	27	21	25	22	18	29	21	21	22
North Dakota	--	--	--	--	--	--	4	--	--	--	--	--	--	3	3	12	1	--
Ohio	12	8	9	12	7	13	18	10	11	13	8	10	10	13	8	19	13	12
Oklahoma	8	--	--	--	13	15	7	11	--	--	14	5	7	13	10	7	17	10
Oregon	--	5	11	--	--	6	5	6	8	9	7	--	10	10	6	2	11	8
Pennsylvania	10	9	11	16	16	13	15	19	24	23	28	25	22	34	28	19	11	18

Foreign-Born Worker Fatalities by State, 1997–2014¹

Fatalities																		
State	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Rhode Island	--	--	--	--	--	--	4	--	--	--	--	--	--	--	--	4	--	2
South Carolina	5	6	7	16	12	8	18	18	13	11	10	8	8	13	11	4	7	8
South Dakota	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	1	3	--
Tennessee	--	--	--	5	--	7	15	12	14	23	12	19	13	17	12	11	15	9
Texas	102	111	100	115	122	110	121	101	135	112	153	104	125	117	115	107	134	124
Utah	6	5	8	6	8	9	12	4	8	5	8	12	4	8	5	4	6	10
Vermont	--	--	--	--	--	--	--	--	--	--	--	--	--	--	1	--	--	--
Virginia	20	10	18	17	22	20	22	41	33	17	31	18	21	12	19	25	22	19
Washington	12	19	7	13	17	19	6	21	9	12	23	15	9	11	12	15	8	13
West Virginia	--	--	--	--	--	--	--	--	--	--	3	--	--	--	1	2	2	1
Wisconsin	--	--	7	--	9	--	5	5	9	--	5	--	4	--	9	13	8	7
Wyoming	--	--	--	--	--	--	--	--	--	4	7	--	--	--	5	4	3	1
Totals²	714	654	811	849	994	929	890	979	1,035	1,046	1,009	835	740	798	843	824	879	846

Source: U.S. Department of Labor, Bureau of Labor Statistics, Census of Fatal Occupational Injuries, in cooperation with state, New York City, the District of Columbia and federal agencies.

¹The definition of "foreign-born" employed by the Census of Fatal Occupational Injuries refers simply to workers not born in the United States or U.S. territories and does not convey information on citizenship at birth.

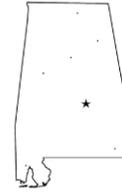
²Totals include fatalities that may have occurred in the District of Columbia.

Note: Dashes indicate no data reported or data that do not meet BLS publication criteria.

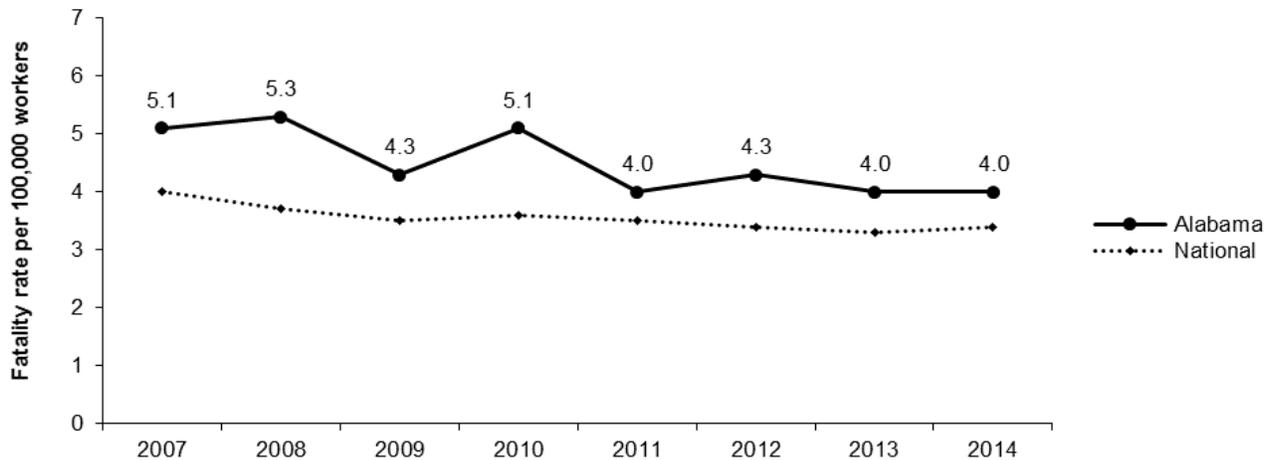
STATE PROFILES

ALABAMA

Worker Safety and Health



Number of employees: ¹	1,863,561
Number of establishments: ¹	117,452
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	315,750
Number of workplace fatalities, 2014: ³	75
Rate per 100,000 workers: ⁴	4.0
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	29
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	37,200
Rate per 100 workers:	2.9
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	19,800
Rate per 100 workers:	1.5
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	25
Length of time it would take for OSHA to inspect each workplace once:	110 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	1,024
Construction:	298
Non-construction:	726
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$2,311
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$8,781
National average:	\$9,271

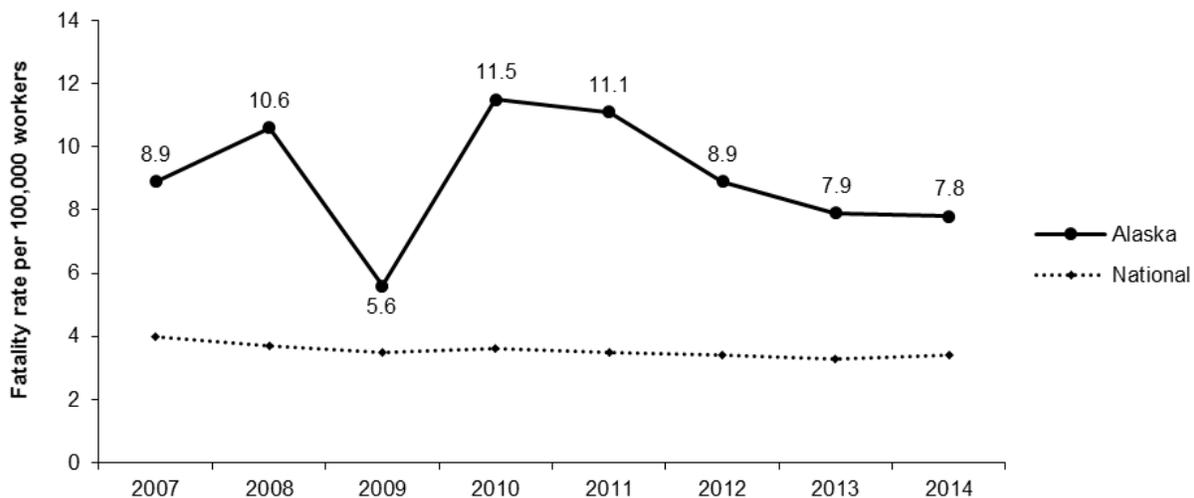


ALASKA

Worker Safety and Health



Number of employees: ¹	330,105
Number of establishments: ¹	22,088
State or federal OSHA program: ²	State
Number of workplace fatalities, 2014: ³	30
Rate per 100,000 workers: ⁴	7.8
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	48
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	8,500
Rate per 100 workers:	3.9
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	4,500
Rate per 100 workers:	2.1
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	11
Length of time it would take for OSHA to inspect each workplace once:	68 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	315
Construction:	145
Non-construction:	170
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$808
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$34,478
National average:	\$9,271

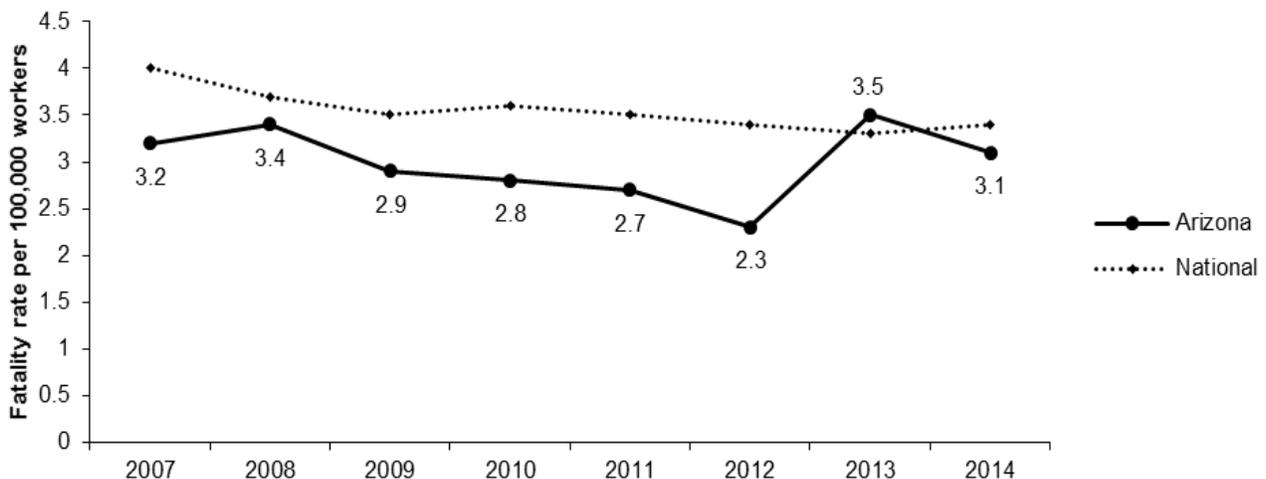


ARIZONA

Worker Safety and Health



Number of employees: ¹	2,539,253
Number of establishments: ¹	146,954
State or federal OSHA program: ²	State
Number of workplace fatalities, 2014: ³	88
Rate per 100,000 workers: ⁴	3.1
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	16
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	53,800
Rate per 100 workers:	3.0
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	27,100
Rate per 100 workers:	1.5
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	26
Length of time it would take for OSHA to inspect each workplace once:	128 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	1,141
Construction:	145
Non-construction:	996
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$960
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$2,759
National average:	\$9,271

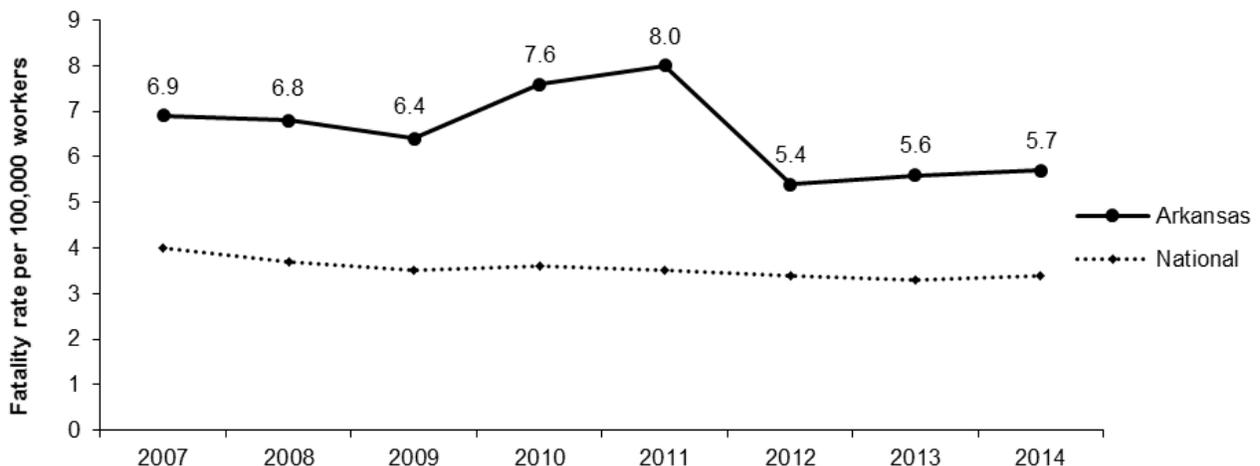


ARKANSAS

Worker Safety and Health



Number of employees: ¹	1,157,630
Number of establishments: ¹	86,833
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	180,151
Number of workplace fatalities, 2014: ³	67
Rate per 100,000 workers: ⁴	5.7
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	40
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	21,500
Rate per 100 workers:	2.6
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	10,300
Rate per 100 workers:	1.2
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	8
Length of time it would take for OSHA to inspect each workplace once:	287 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	291
Construction:	135
Non-construction:	156
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$2,221
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$4,260
National average:	\$9,271

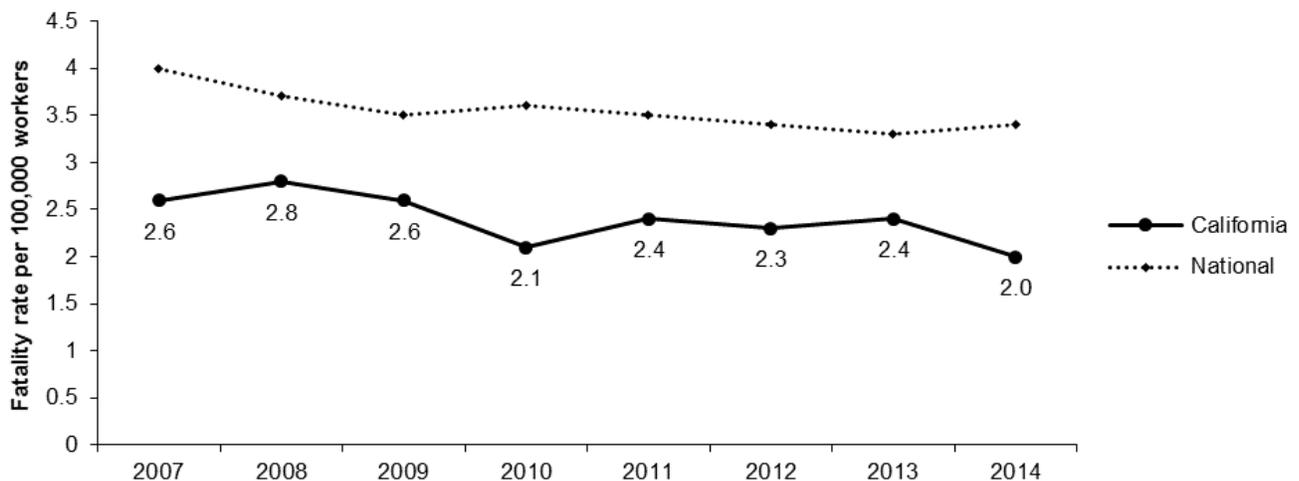


CALIFORNIA

Worker Safety and Health

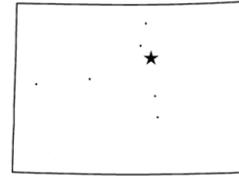


Number of employees: ¹	15,809,082
Number of establishments: ¹	1,372,950
State or federal OSHA program: ²	State
Number of workplace fatalities, 2014: ³	344
Rate per 100,000 workers: ⁴	2.0
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	2
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	353,900
Rate per 100 workers:	3.4
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	214,600
Rate per 100 workers:	2.1
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	196
Length of time it would take for OSHA to inspect each workplace once:	182 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	7,543
Construction:	2,541
Non-construction:	5,002
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$6,543
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$10,826
National average:	\$9,271

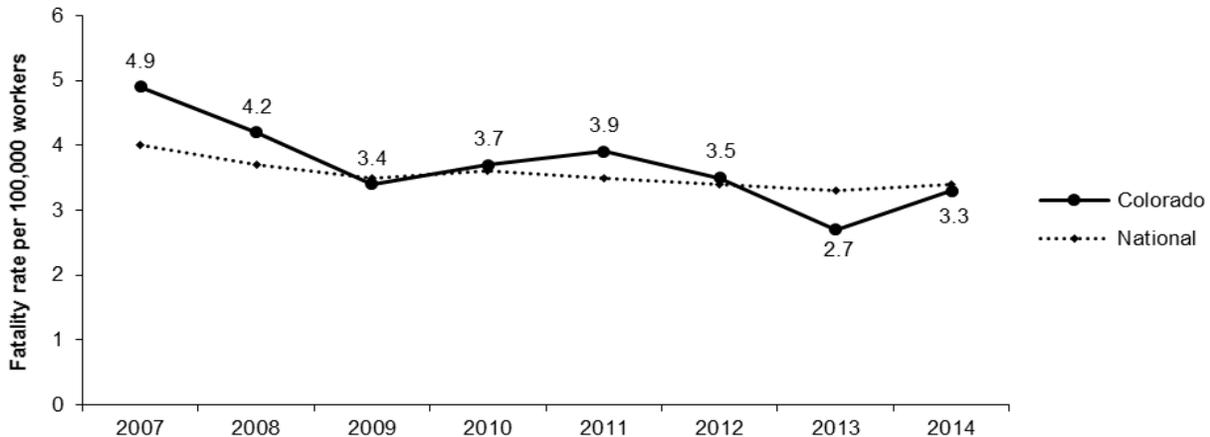


COLORADO

Worker Safety and Health

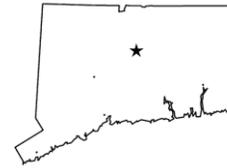


Number of employees: ¹	2,417,735
Number of establishments: ¹	179,397
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	335,898
Number of workplace fatalities, 2014: ³	84
Rate per 100,000 workers: ⁴	3.3
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	21
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	N/A
Rate per 100 workers:	N/A
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	N/A
Rate per 100 workers:	N/A
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	25
Length of time it would take for OSHA to inspect each workplace once:	124 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	1,424
Construction:	864
Non-construction:	560
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$1,821
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$6,627
National average:	\$9,271

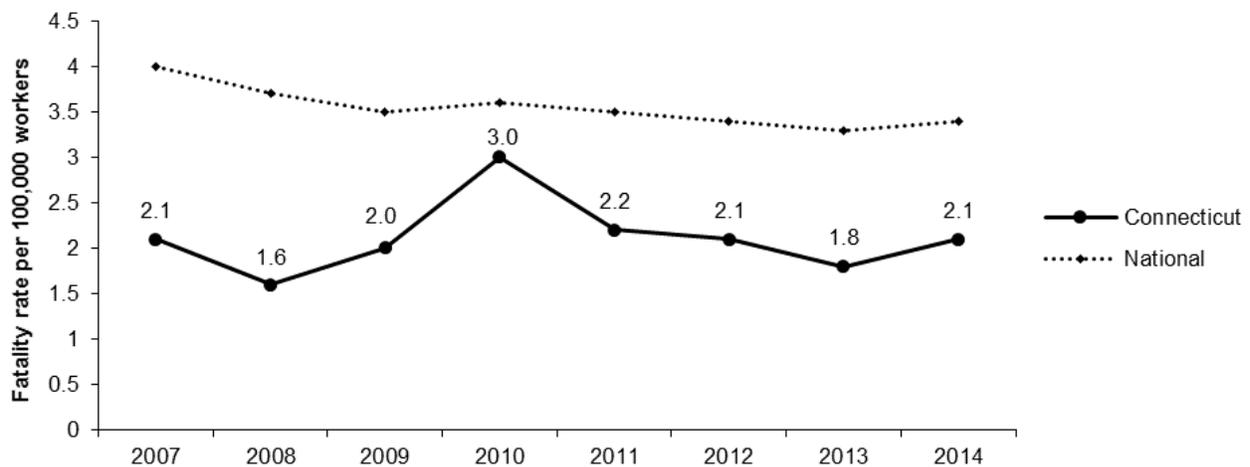


CONNECTICUT

Worker Safety and Health



Number of employees: ¹	1,653,573
Number of establishments: ¹	113,925
State or federal OSHA program: ²	Federal
Number of workplace fatalities, 2014: ³	35
Rate per 100,000 workers: ⁴	2.1
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	3
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	39,700
Rate per 100 workers:	3.5
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	22,700
Rate per 100 workers:	2.0
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	23
Length of time it would take for OSHA to inspect each workplace once:	103 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	1,105
Construction:	514
Non-construction:	591
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$1,896
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$3,602
National average:	\$9,271

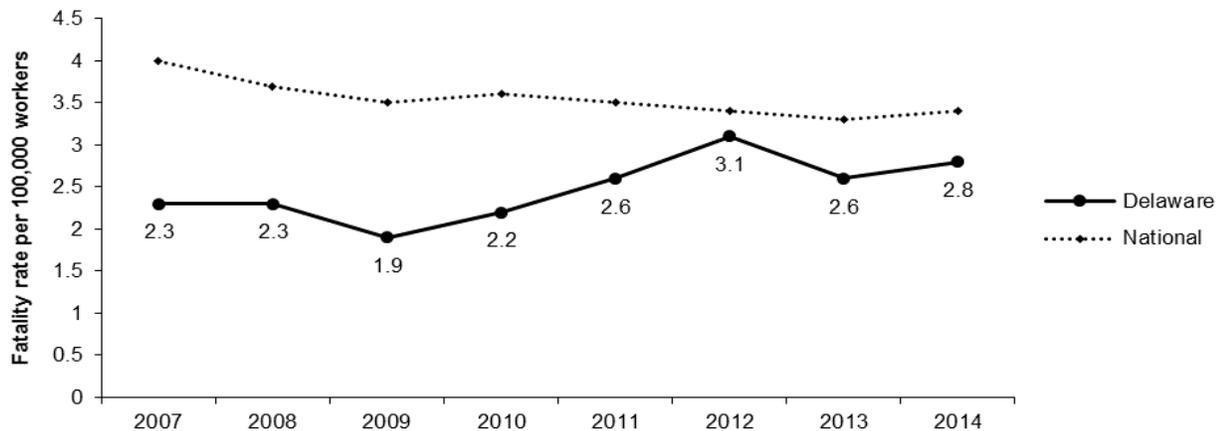


DELAWARE

Worker Safety and Health



Number of employees: ¹	423,598
Number of establishments: ¹	29,975
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	55,797
Number of workplace fatalities, 2014: ³	12
Rate per 100,000 workers: ⁴	2.8
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	11
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	7,800
Rate per 100 workers:	2.6
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	3,900
Rate per 100 workers:	1.3
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	4
Length of time it would take for OSHA to inspect each workplace once:	240 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	151
Construction:	70
Non-construction:	81
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$2,745
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$6,650
National average:	\$9,271

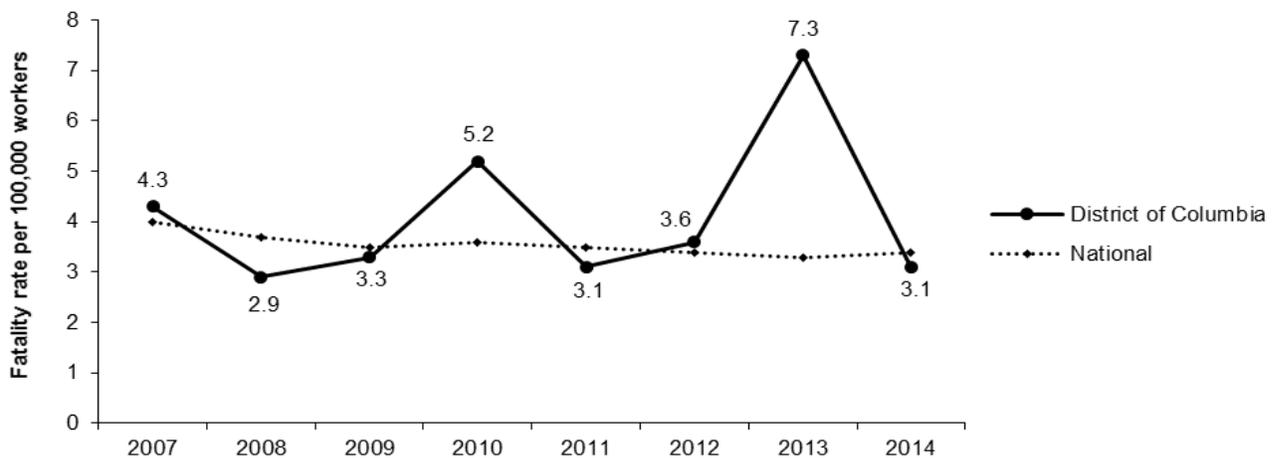


DISTRICT OF COLUMBIA

Worker Safety and Health



Number of employees: ¹	729,349
Number of establishments: ¹	36,246
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	37,270
Number of workplace fatalities, 2014: ³	11
Rate per 100,000 workers: ⁴	3.1
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	N/A
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	6,600
Rate per 100 workers:	1.6
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	3,200
Rate per 100 workers:	0.8
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	N/A
Length of time it would take for OSHA to inspect each workplace once:	87 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	338
Construction:	263
Non-construction:	75
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$1,968
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$3,633
National average:	\$9,271

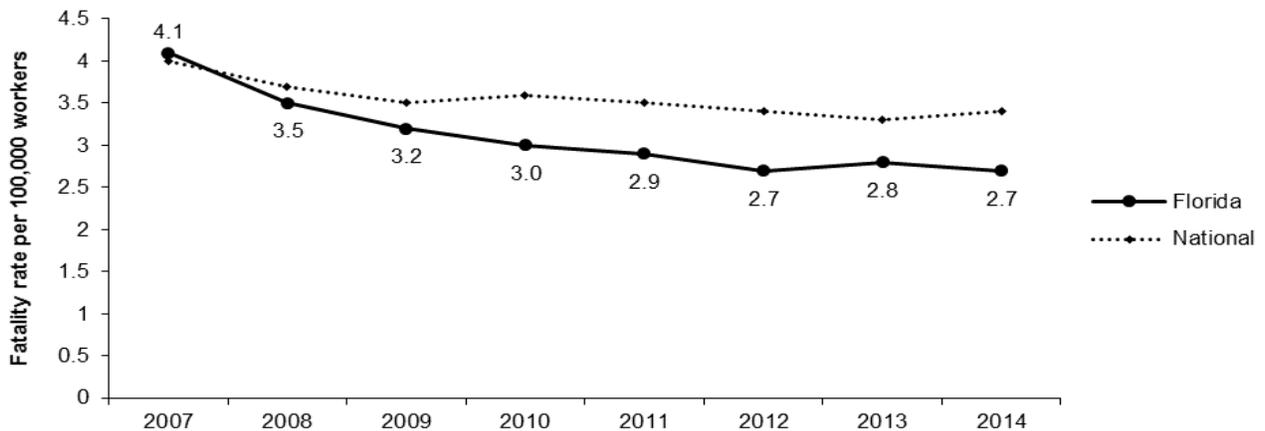


FLORIDA



Worker Safety and Health

Number of employees: ¹	7,755,371
Number of establishments: ¹	637,262
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	892,713
Number of workplace fatalities, 2014: ³	228
Rate per 100,000 workers: ⁴	2.7
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	9
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	N/A
Rate per 100 workers:	N/A
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	N/A
Rate per 100 workers:	N/A
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	63
Length of time it would take for OSHA to inspect each workplace once:	266 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	2,382
Construction:	1,295
Non-construction:	1,087
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$2,365
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$7,854
National average:	\$9,271

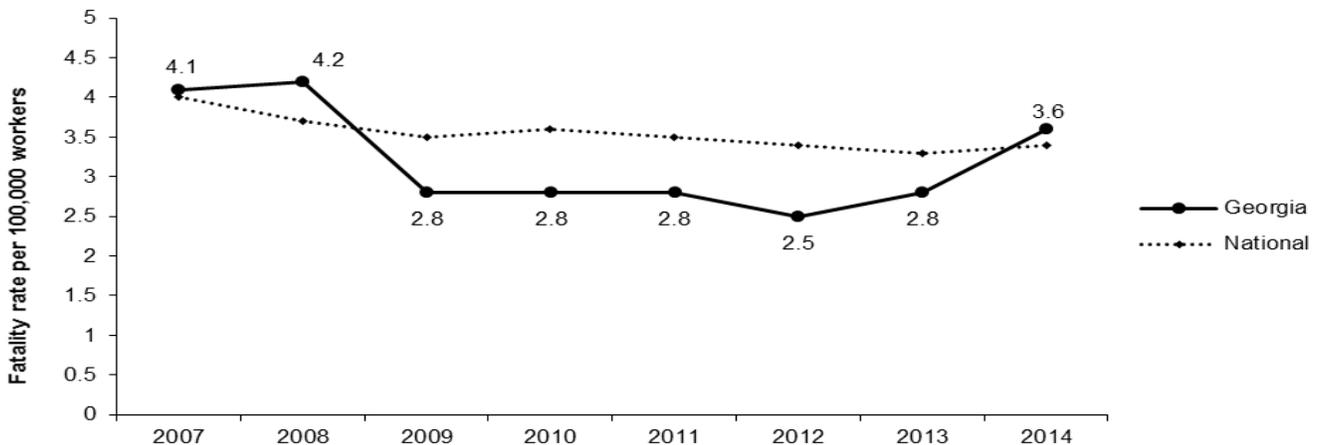


GEORGIA

Worker Safety and Health



Number of employees: ¹	4,032,488
Number of establishments: ¹	280,833
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	537,220
Number of workplace fatalities, 2014: ³	152
Rate per 100,000 workers: ⁴	3.6
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	25
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	80,500
Rate per 100 workers:	2.9
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	40,800
Rate per 100 workers:	1.5
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	43
Length of time it would take for OSHA to inspect each workplace once:	160 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	1,710
Construction:	778
Non-construction:	932
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$2,248
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$8,298
National average:	\$9,271

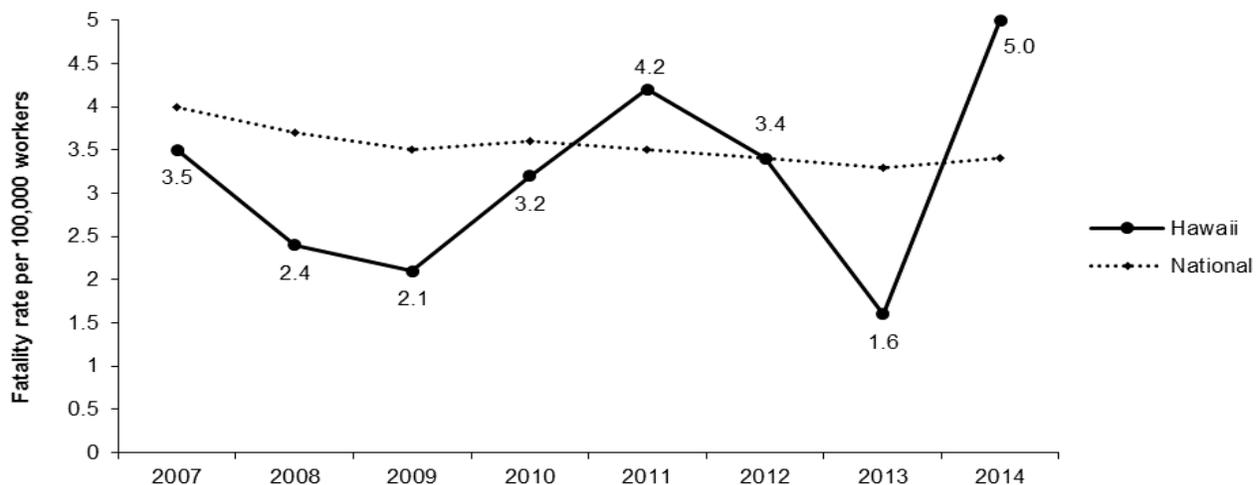


HAWAII

Worker Safety and Health



Number of employees: ¹	626,146
Number of establishments: ¹	38,412
State or federal OSHA program: ²	State
Number of workplace fatalities, 2014: ³	31
Rate per 100,000 workers: ⁴	5.0
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	37
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	14,300
Rate per 100 workers:	3.7
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	8,600
Rate per 100 workers:	2.2
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	19
Length of time it would take for OSHA to inspect each workplace once:	58 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	661
Construction:	386
Non-construction:	275
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$1,214
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$45,188
National average:	\$9,271

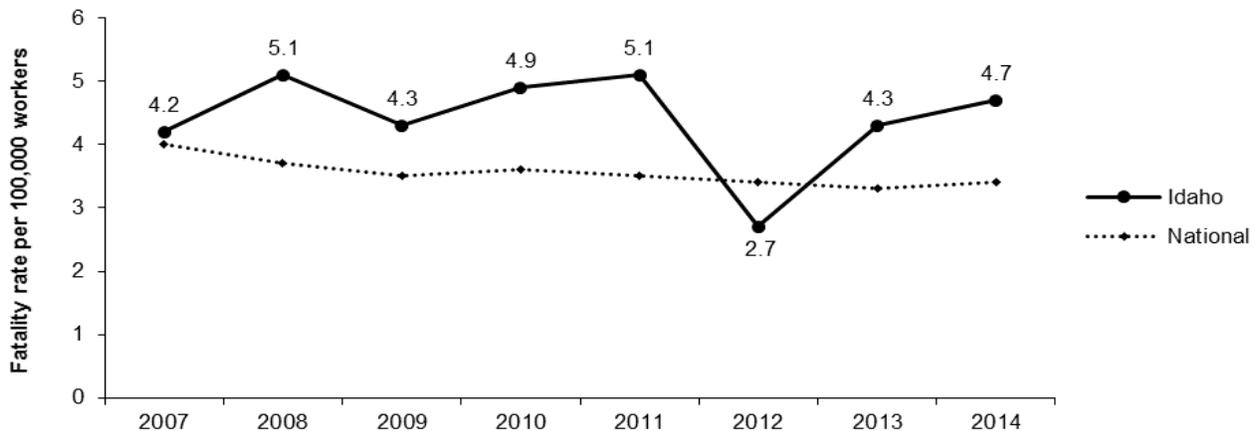


IDAHO

Worker Safety and Health



Number of employees: ¹	646,305
Number of establishments: ¹	54,669
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	100,103
Number of workplace fatalities, 2014: ³	34
Rate per 100,000 workers: ⁴	4.7
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	34
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	N/A
Rate per 100 workers:	N/A
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	N/A
Rate per 100 workers:	N/A
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	5
Length of time it would take for OSHA to inspect each workplace once:	161 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	325
Construction:	172
Non-construction:	153
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$1,973
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$4,062
National average:	\$9,271

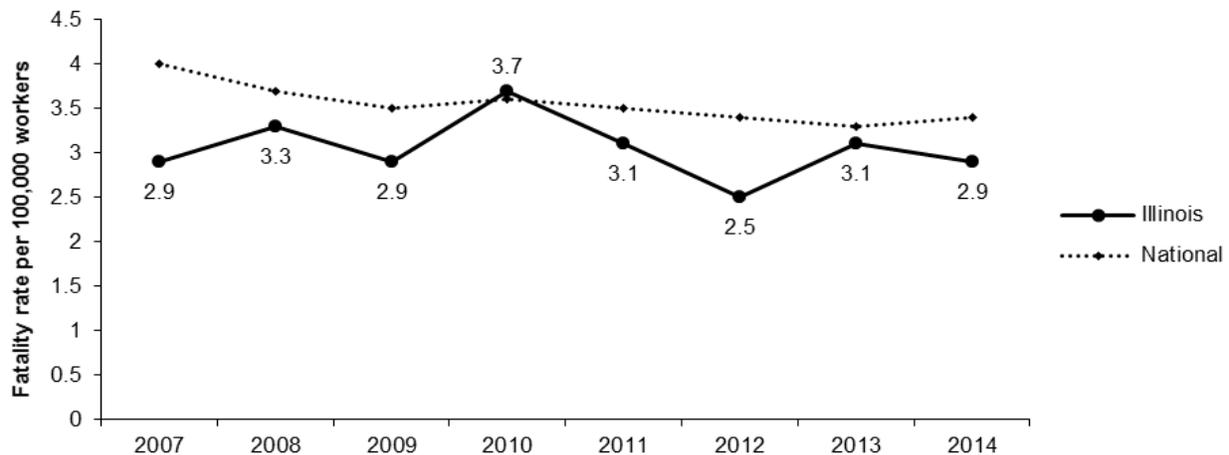


ILLINOIS

Worker Safety and Health



Number of employees: ¹	5,762,156
Number of establishments: ¹	413,479
State or federal OSHA program: ²	Federal
Number of workplace fatalities, 2014: ³	164
Rate per 100,000 workers: ⁴	2.9
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	14
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	112,400
Rate per 100 workers:	2.8
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	63,800
Rate per 100 workers:	1.6
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	70
Length of time it would take for OSHA to inspect each workplace once:	143 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	2,881
Construction:	1,161
Non-construction:	1,720
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$2,258
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$8,553
National average:	\$9,271

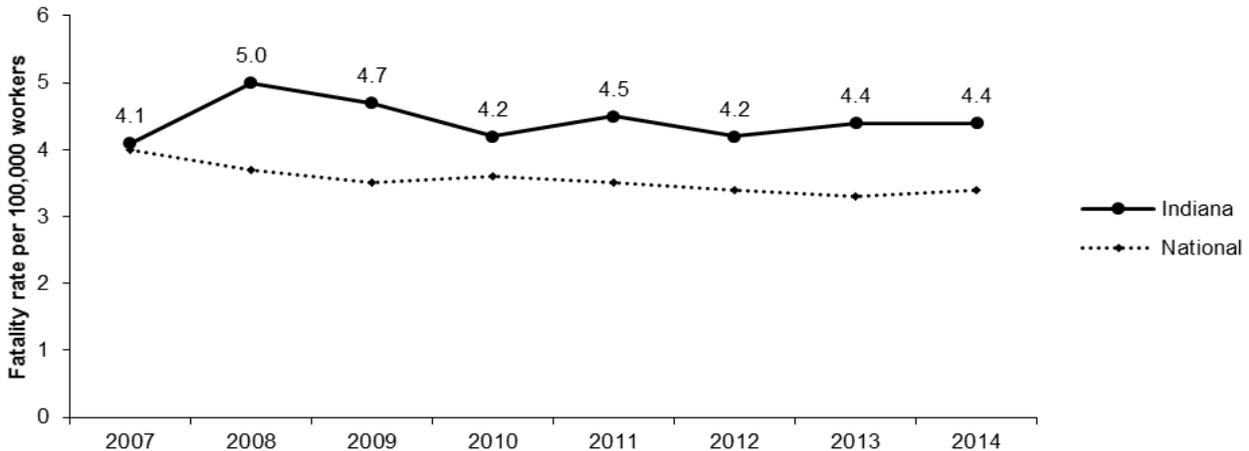


INDIANA

Worker Safety and Health

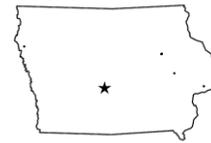


Number of employees: ¹	2,890,758
Number of establishments: ¹	158,333
State or federal OSHA program: ²	State
Number of workplace fatalities, 2014: ³	130
Rate per 100,000 workers: ⁴	4.4
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	31
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	77,500
Rate per 100 workers:	3.8
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	38,200
Rate per 100 workers:	1.9
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	40
Length of time it would take for OSHA to inspect each workplace once:	134 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	1,172
Construction:	772
Non-construction:	400
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$782
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$5,288
National average:	\$9,271

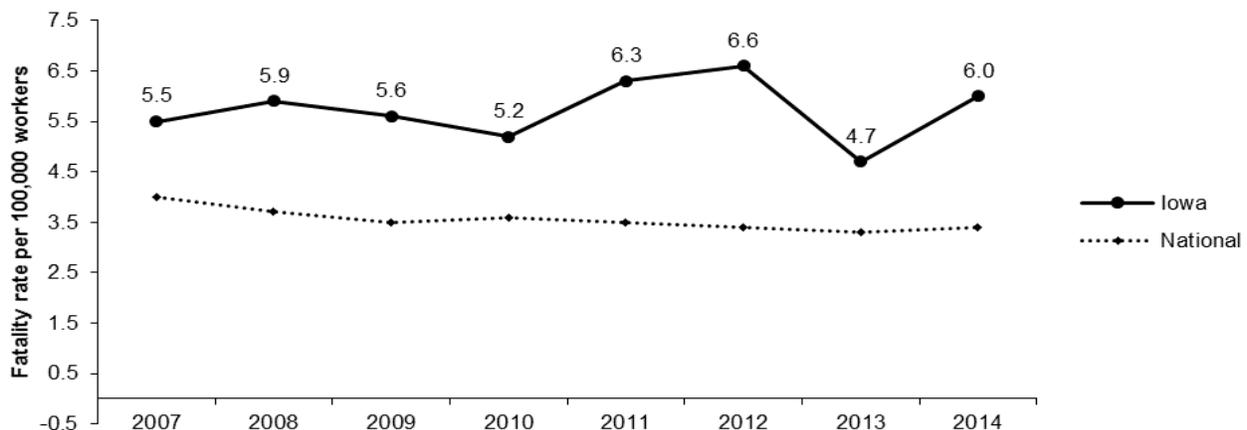


IOWA

Worker Safety and Health



Number of employees: ¹	1,515,822
Number of establishments: ¹	99,418
State or federal OSHA program: ²	State
Number of workplace fatalities, 2014: ³	91
Rate per 100,000 workers: ⁴	6.0
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	42
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	41,800
Rate per 100 workers:	3.9
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	21,200
Rate per 100 workers:	2.0
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	19
Length of time it would take for OSHA to inspect each workplace once:	163 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	602
Construction:	229
Non-construction:	373
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$997
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$7,603
National average:	\$9,271

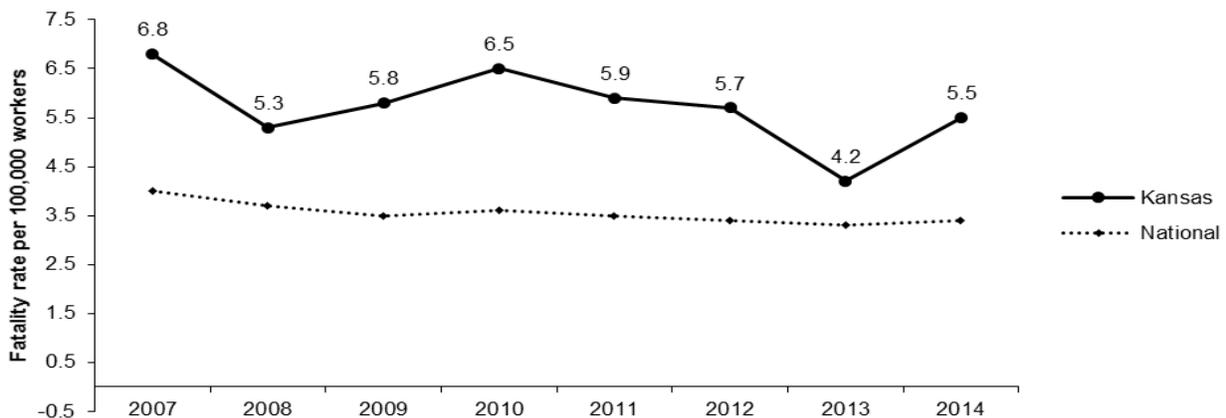


KANSAS

Worker Safety and Health

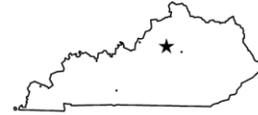


Number of employees: ¹	1,357,090
Number of establishments: ¹	85,306
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	218,456
Number of workplace fatalities, 2014: ³	73
Rate per 100,000 workers: ⁴	5.5
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	39
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	32,600
Rate per 100 workers:	3.4
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	16,400
Rate per 100 workers:	1.7
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	30
Length of time it would take for OSHA to inspect each workplace once:	120 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	682
Construction:	175
Non-construction:	507
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$2,055
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$7,964
National average:	\$9,271

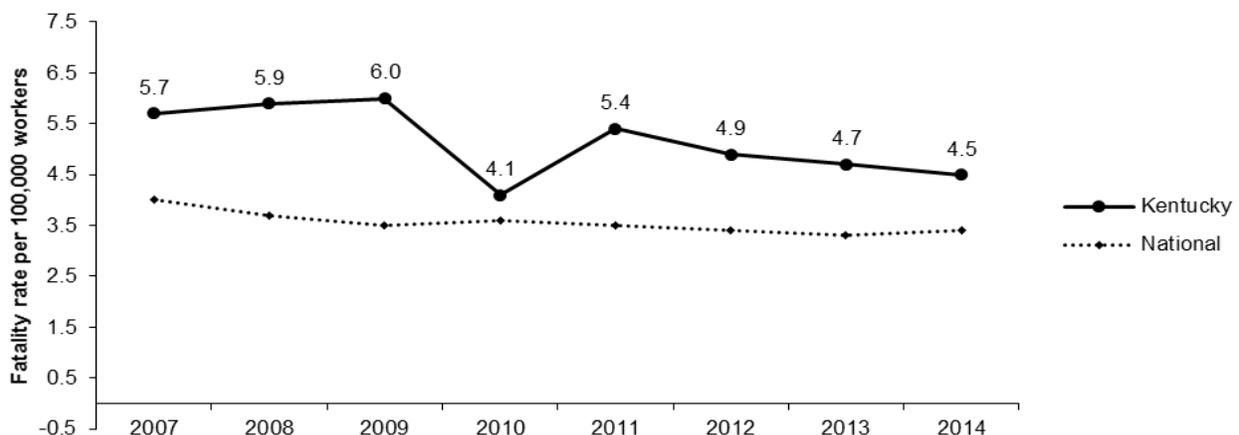


KENTUCKY

Worker Safety and Health



Number of employees: ¹	1,807,068
Number of establishments: ¹	121,114
State or federal OSHA program: ²	State
Number of workplace fatalities, 2014: ³	82
Rate per 100,000 workers: ⁴	4.5
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	32
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	46,200
Rate per 100 workers:	3.7
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	23,700
Rate per 100 workers:	1.9
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	39
Length of time it would take for OSHA to inspect each workplace once:	135 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	884
Construction:	334
Non-construction:	550
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$2,607
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$3,100
National average:	\$9,271

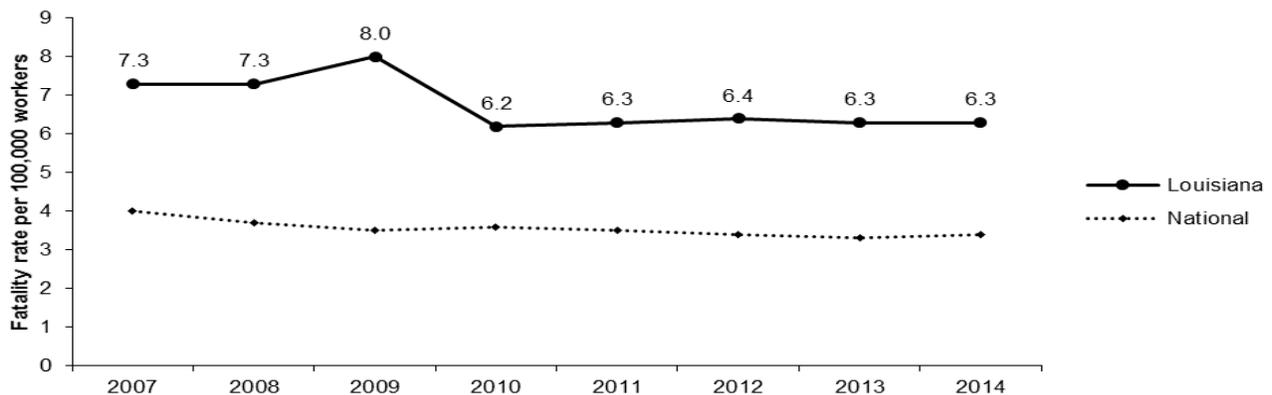


LOUISIANA

Worker Safety and Health



Number of employees: ¹	1,923,745
Number of establishments: ¹	12,430
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	282,547
Number of workplace fatalities, 2014: ³	120
Rate per 100,000 workers: ⁴	6.3
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	44
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	28,500
Rate per 100 workers:	2.0
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	14,100
Rate per 100 workers:	1.0
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	12
Length of time it would take for OSHA to inspect each workplace once:	216 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	553
Construction:	227
Non-construction:	326
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$2,334
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$8,353
National average:	\$9,271

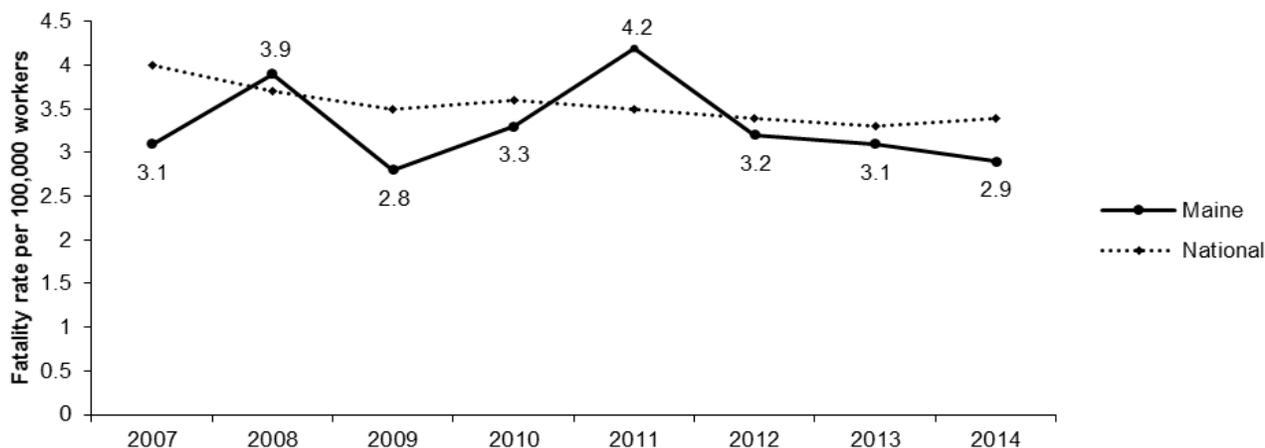


MAINE

Worker Safety and Health



Number of employees: ¹	590,377
Number of establishments: ¹	49,253
State or federal OSHA program: ²	Federal
Number of workplace fatalities, 2014: ³	19
Rate per 100,000 workers: ⁴	2.9
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	14
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	20,300
Rate per 100 workers:	5.3
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	10,800
Rate per 100 workers:	2.8
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	8
Length of time it would take for OSHA to inspect each workplace once:	111 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	421
Construction:	218
Non-construction:	203
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$2,025
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$13,347
National average:	\$9,271

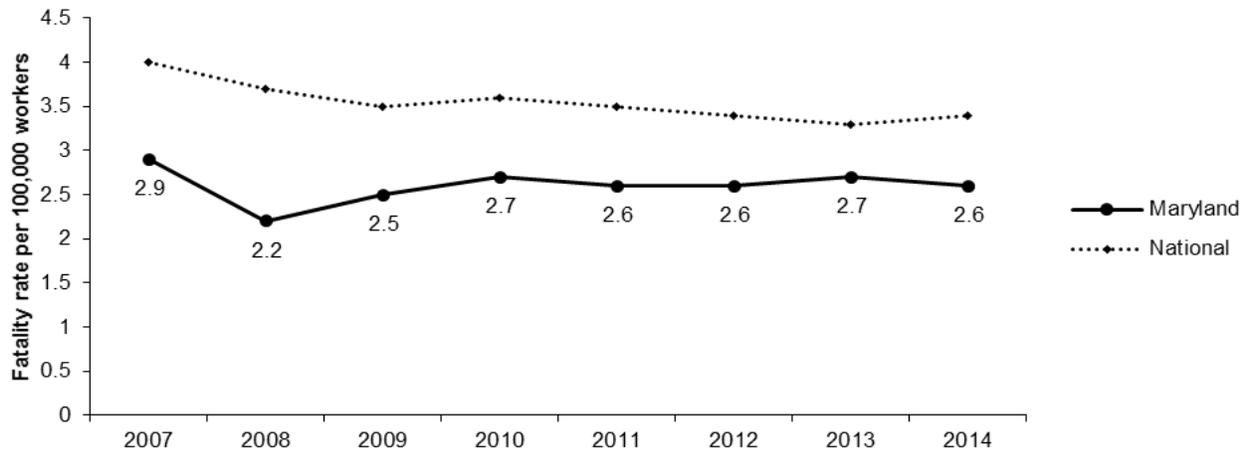


MARYLAND

Worker Safety and Health



Number of employees: ¹	2,552,623
Number of establishments: ¹	167,210
State or federal OSHA program: ²	State
Number of workplace fatalities, 2014: ³	74
Rate per 100,000 workers: ⁴	2.6
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	7
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	52,400
Rate per 100 workers:	3.1
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	28,400
Rate per 100 workers:	1.7
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	54
Length of time it would take for OSHA to inspect each workplace once:	119 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	1,391
Construction:	994
Non-construction:	397
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$715
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$1,815
National average:	\$9,271

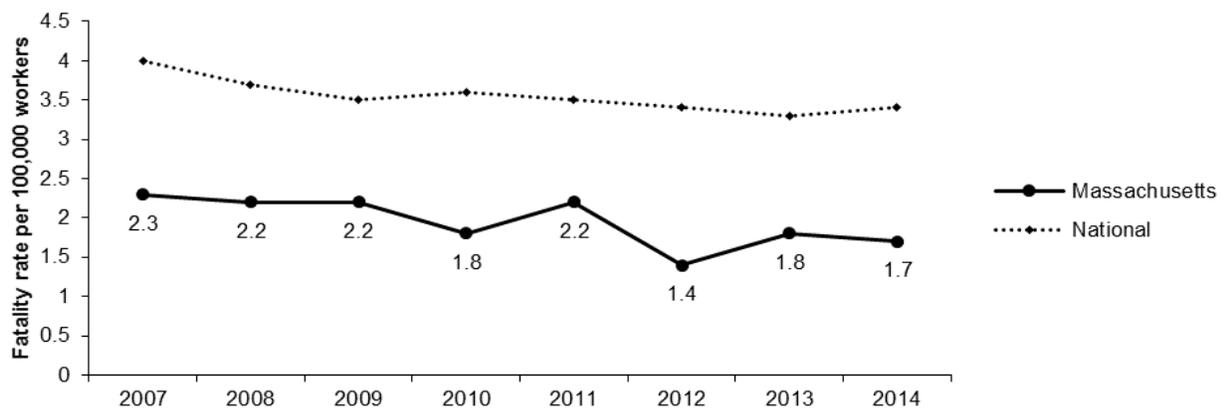


MASSACHUSETTS

Worker Safety and Health



Number of employees: ¹	3,360,035
Number of establishments: ¹	231,749
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	381,640
Number of workplace fatalities, 2014: ³	55
Rate per 100,000 workers: ⁴	1.7
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	1
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	62,100
Rate per 100 workers:	2.7
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	34,100
Rate per 100 workers:	1.5
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	29
Length of time it would take for OSHA to inspect each workplace once:	152 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	1,480
Construction:	830
Non-construction:	650
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$2,092
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$12,932
National average:	\$9,271

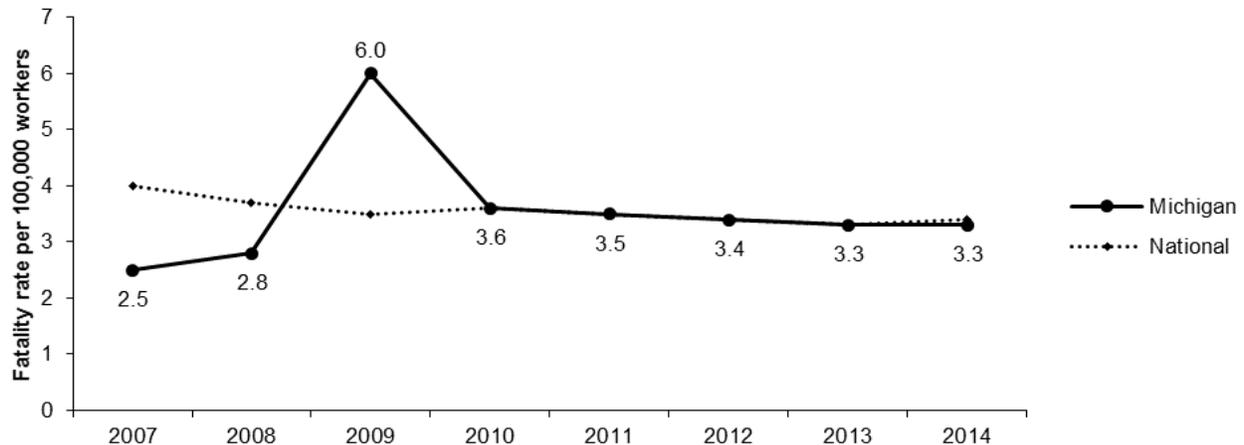


MICHIGAN

Worker Safety and Health



Number of employees: ¹	4,090,009
Number of establishments: ¹	236,461
State or federal OSHA program: ²	State
Number of workplace fatalities, 2014: ³	143
Rate per 100,000 workers: ⁴	3.3
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	21
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	99,100
Rate per 100 workers:	3.6
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	49,600
Rate per 100 workers:	1.8
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	62
Length of time it would take for OSHA to inspect each workplace once:	58 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	4,079
Construction:	2,491
Non-construction:	1,588
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$612
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$11,790
National average:	\$9,271

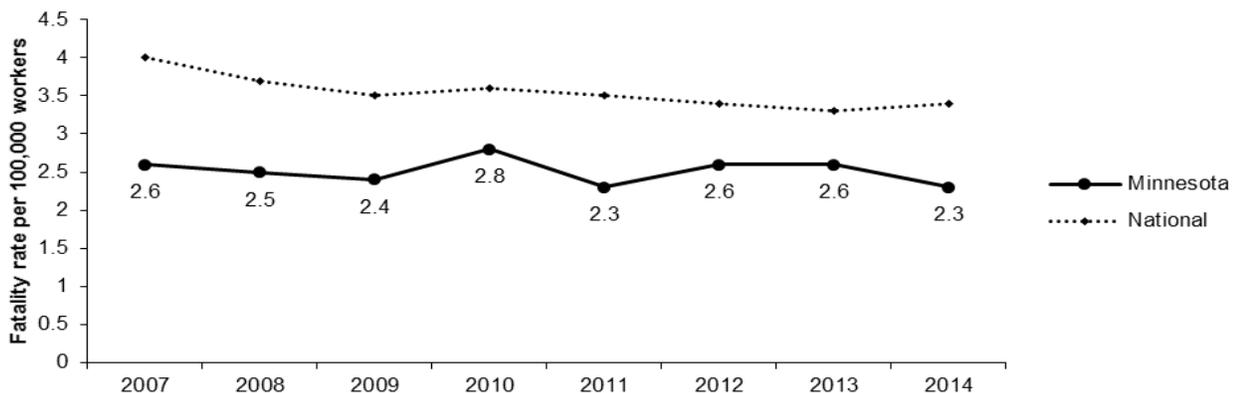


MINNESOTA

Worker Safety and Health



Number of employees: ¹	2,730,301
Number of establishments: ¹	164,799
State or federal OSHA program: ²	State
Number of workplace fatalities, 2014: ³	62
Rate per 100,000 workers: ⁴	2.3
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	6
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	67,300
Rate per 100 workers:	3.6
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	33,300
Rate per 100 workers:	1.8
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	44
Length of time it would take for OSHA to inspect each workplace once:	93 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	1,748
Construction:	721
Non-construction:	1,027
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$806
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$456
National average:	\$9,271

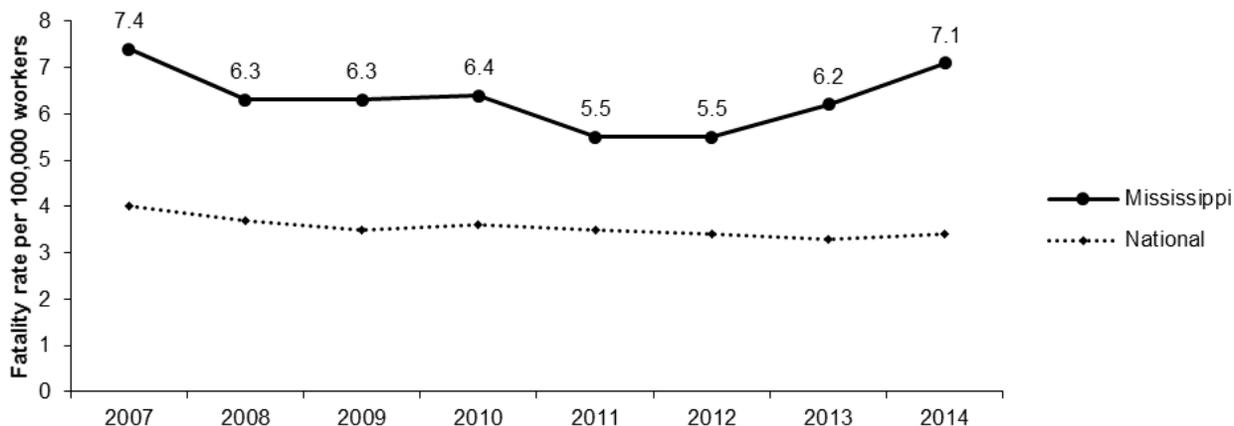


MISSISSIPPI

Worker Safety and Health



Number of employees: ¹	1,102,603
Number of establishments: ¹	71,280
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	211,308
Number of workplace fatalities, 2014: ³	75
Rate per 100,000 workers: ⁴	7.1
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	46
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	N/A
Rate per 100 workers:	N/A
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	N/A
Rate per 100 workers:	N/A
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	13
Length of time it would take for OSHA to inspect each workplace once:	136 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	504
Construction:	217
Non-construction:	287
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$2,054
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$9,698
National average:	\$9,271

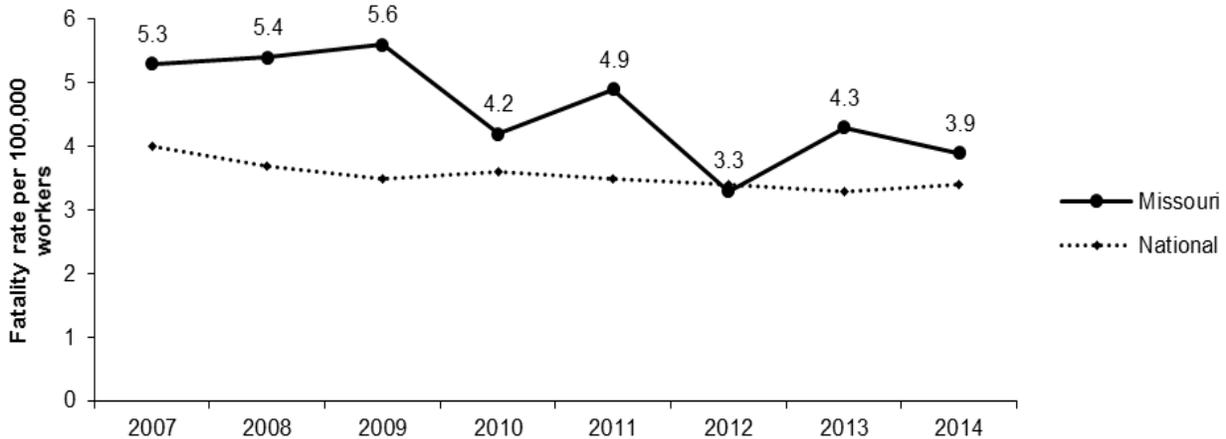


MISSOURI

Worker Safety and Health



Number of employees: ¹	2,667,996
Number of establishments: ¹	184,766
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	363,761
Number of workplace fatalities, 2014: ³	106
Rate per 100,000 workers: ⁴	3.9
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	27
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	59,100
Rate per 100 workers:	3.2
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	30,700
Rate per 100 workers:	1.6
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	12
Length of time it would take for OSHA to inspect each workplace once:	138 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	1,277
Construction:	556
Non-construction:	721
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$2,103
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$13,626
National average:	\$9,271



MONTANA

Worker Safety and Health

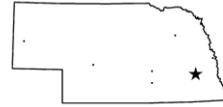


Number of employees: ¹	440,198
Number of establishments: ¹	43,902
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	69,343
Number of workplace fatalities, 2014: ³	28
Rate per 100,000 workers: ⁴	4.9
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	36
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	12,600
Rate per 100 workers:	4.5
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	5,800
Rate per 100 workers:	2.1
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	4
Length of time it would take for OSHA to inspect each workplace once:	180 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	236
Construction:	118
Non-construction:	118
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$1,751
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$8,480
National average:	\$9,271

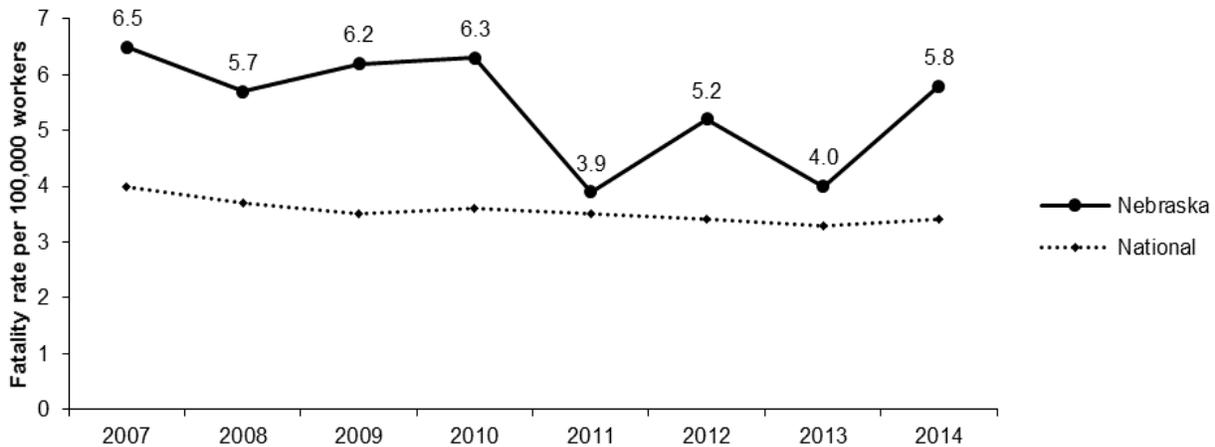


NEBRASKA

Worker Safety and Health



Number of employees: ¹	946,110
Number of establishments: ¹	70,336
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	142,659
Number of workplace fatalities, 2014: ³	55
Rate per 100,000 workers: ⁴	5.8
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	41
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	23,100
Rate per 100 workers:	3.5
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	11,800
Rate per 100 workers:	1.8
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	8
Length of time it would take for OSHA to inspect each workplace once:	206 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	397
Construction:	156
Non-construction:	241
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$2,727
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$85,288
National average:	\$9,271

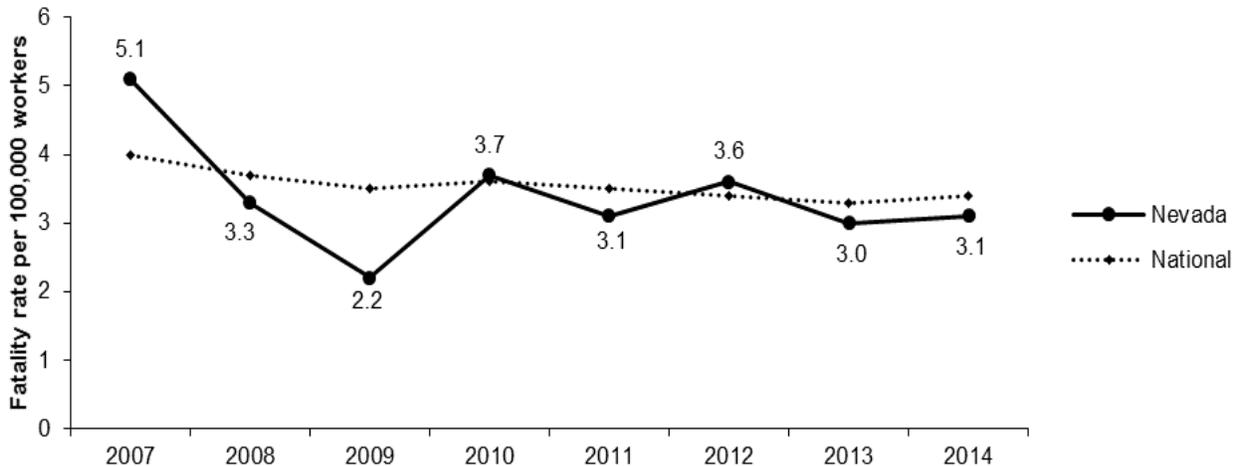


NEVADA

Worker Safety and Health



Number of employees: ¹	1,202,475
Number of establishments: ¹	76,209
State or federal OSHA program: ²	State
Number of workplace fatalities, 2014: ³	40
Rate per 100,000 workers: ⁴	3.1
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	16
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	34,300
Rate per 100 workers:	4.0
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	19,300
Rate per 100 workers:	2.3
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	44
Length of time it would take for OSHA to inspect each workplace once:	47 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	1,623
Construction:	722
Non-construction:	901
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$1,059
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$848
National average:	\$9,271

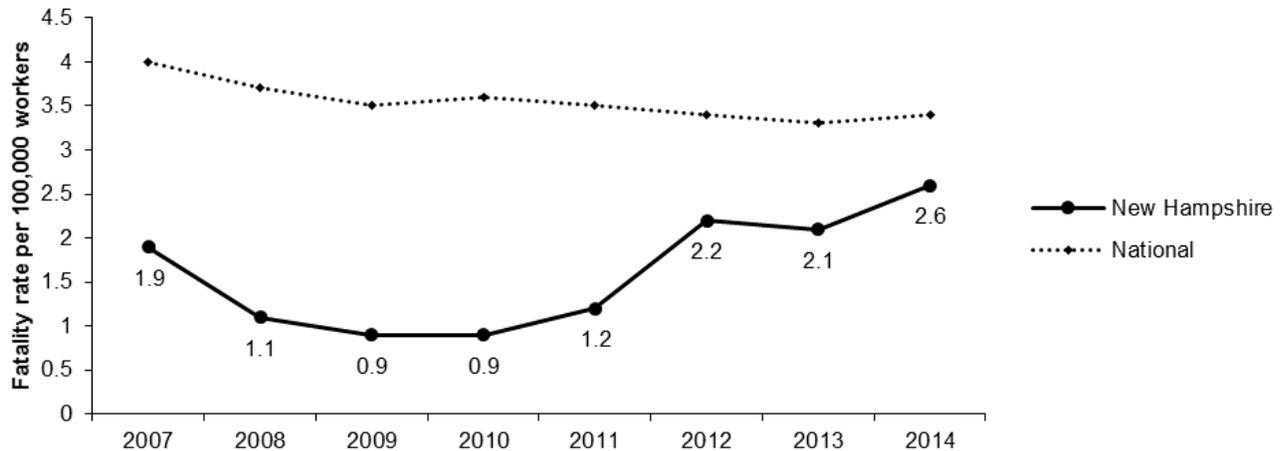


NEW HAMPSHIRE

Worker Safety and Health



Number of employees: ¹	626,566
Number of establishments: ¹	49,877
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	77,747
Number of workplace fatalities, 2014: ³	17
Rate per 100,000 workers: ⁴	2.6
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	7
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	N/A
Rate per 100 workers:	N/A
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	N/A
Rate per 100 workers:	N/A
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	7
Length of time it would take for OSHA to inspect each workplace once:	122 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	392
Construction:	207
Non-construction:	185
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$2,169
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	-
National average:	\$9,271

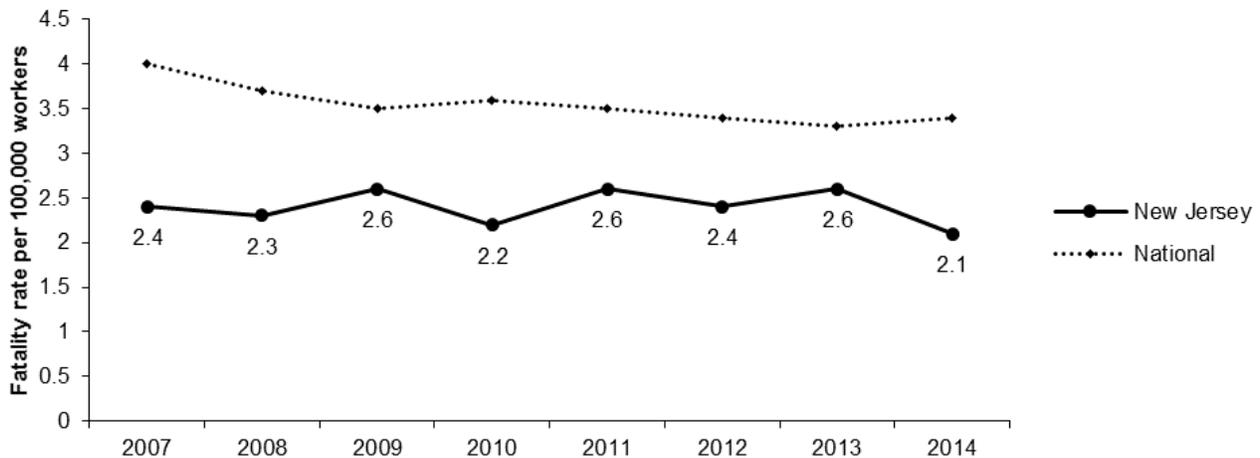


NEW JERSEY

Worker Safety and Health



Number of employees: ¹	3,841,854
Number of establishments: ¹	260,037
State or federal OSHA program: ²	Federal
Number of workplace fatalities, 2014: ³	87
Rate per 100,000 workers: ⁴	2.1
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	3
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	77,900
Rate per 100 workers:	2.9
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	45,000
Rate per 100 workers:	1.7
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	55
Length of time it would take for OSHA to inspect each workplace once:	95 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	2,730
Construction:	1,109
Non-construction:	1,621
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$2,441
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$11,529
National average:	\$9,271

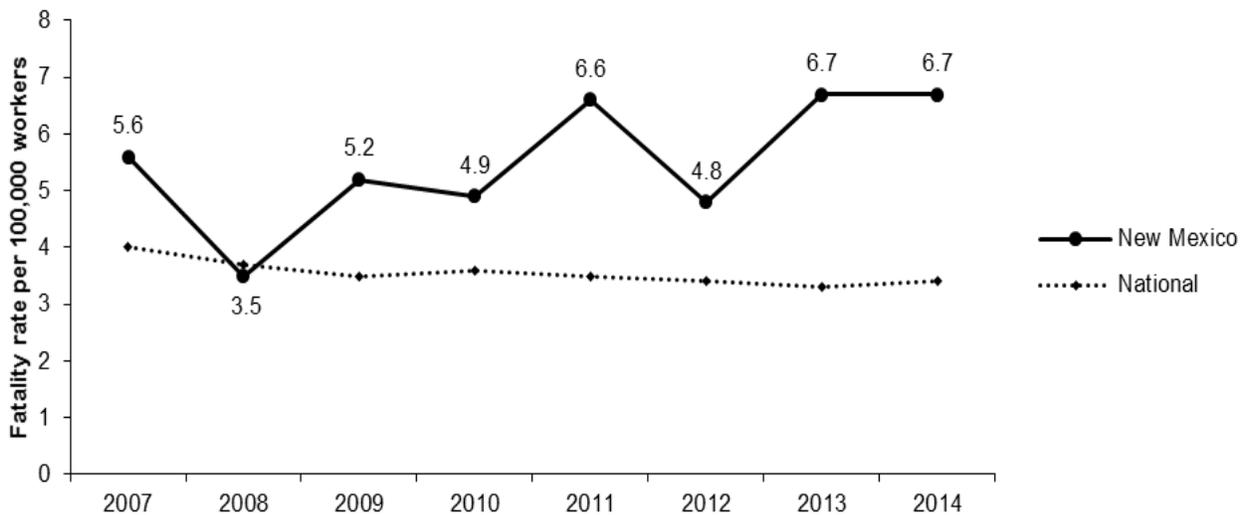


NEW MEXICO

Worker Safety and Health



Number of employees: ¹	798,912
Number of establishments: ¹	56,201
State or federal OSHA program: ²	State
Number of workplace fatalities, 2014: ³	53
Rate per 100,000 workers: ⁴	6.7
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	45
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	16,400
Rate per 100 workers:	3.2
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	8,000
Rate per 100 workers:	1.5
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	8
Length of time it would take for OSHA to inspect each workplace once:	139 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	398
Construction:	189
Non-construction:	209
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$803
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$3,141
National average:	\$9,271

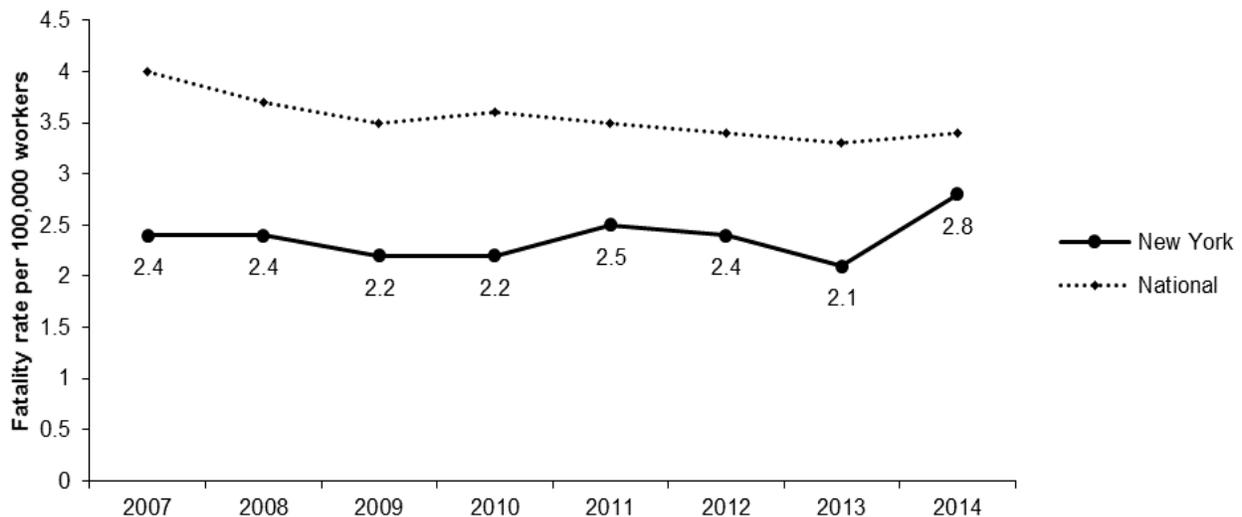


NEW YORK

Worker Safety and Health



Number of employees: ¹	8,846,774
Number of establishments: ¹	619,870
State or federal OSHA program: ²	Federal
Number of workplace fatalities, 2014: ³	241
Rate per 100,000 workers: ⁴	2.8
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	11
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	149,100
Rate per 100 workers:	2.5
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	80,700
Rate per 100 workers:	1.3
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	94
Length of time it would take for OSHA to inspect each workplace once:	146 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	4,230
Construction:	1,616
Non-construction:	2,614
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$2,109
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$20,093
National average:	\$9,271

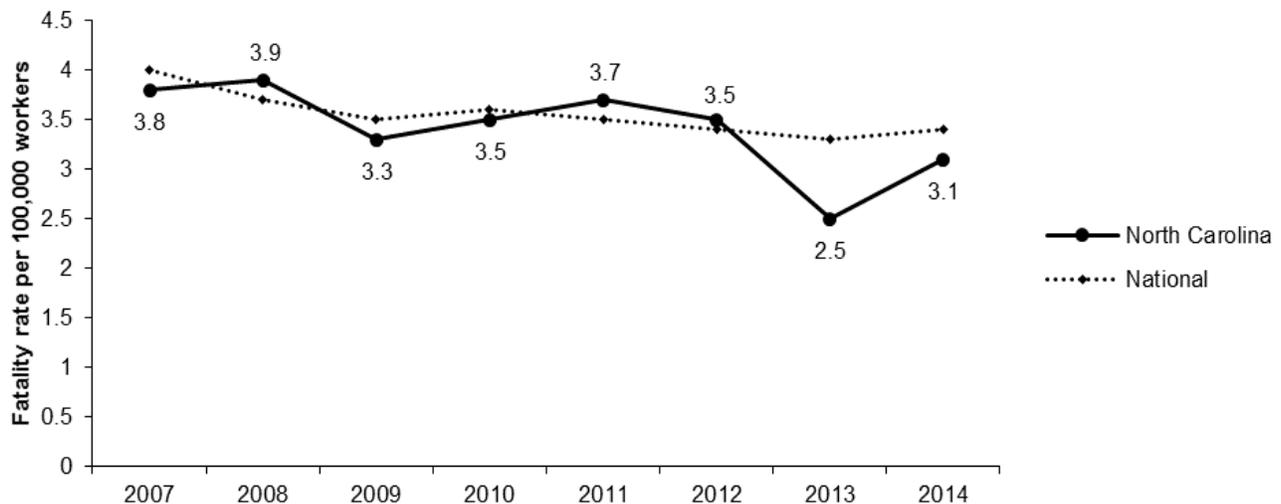


NORTH CAROLINA

Worker Safety and Health

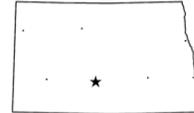


Number of employees: ¹	4,057,439
Number of establishments: ¹	259,966
State or federal OSHA program: ²	State
Number of workplace fatalities, 2014: ³	137
Rate per 100,000 workers: ⁴	3.1
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	16
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	72,300
Rate per 100 workers:	2.7
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	37,900
Rate per 100 workers:	1.4
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	96
Length of time it would take for OSHA to inspect each workplace once:	88 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	2,920
Construction:	1,212
Non-construction:	1,708
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$1,091
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$812
National average:	\$9,271

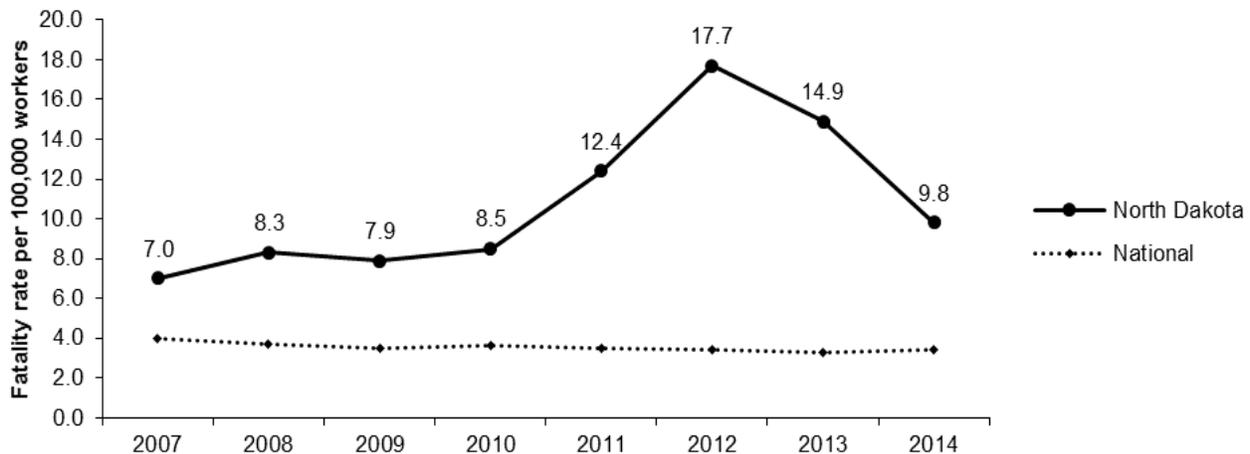


NORTH DAKOTA

Worker Safety and Health



Number of employees: ¹	444,652
Number of establishments: ¹	31,587
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	59,527
Number of workplace fatalities, 2014: ³	38
Rate per 100,000 workers: ⁴	9.8
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	49
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	N/A
Rate per 100 workers:	N/A
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	N/A
Rate per 100 workers:	N/A
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	7
Length of time it would take for OSHA to inspect each workplace once:	150 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	201
Construction:	97
Non-construction:	104
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$3,028
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$8,090
National average:	\$9,271

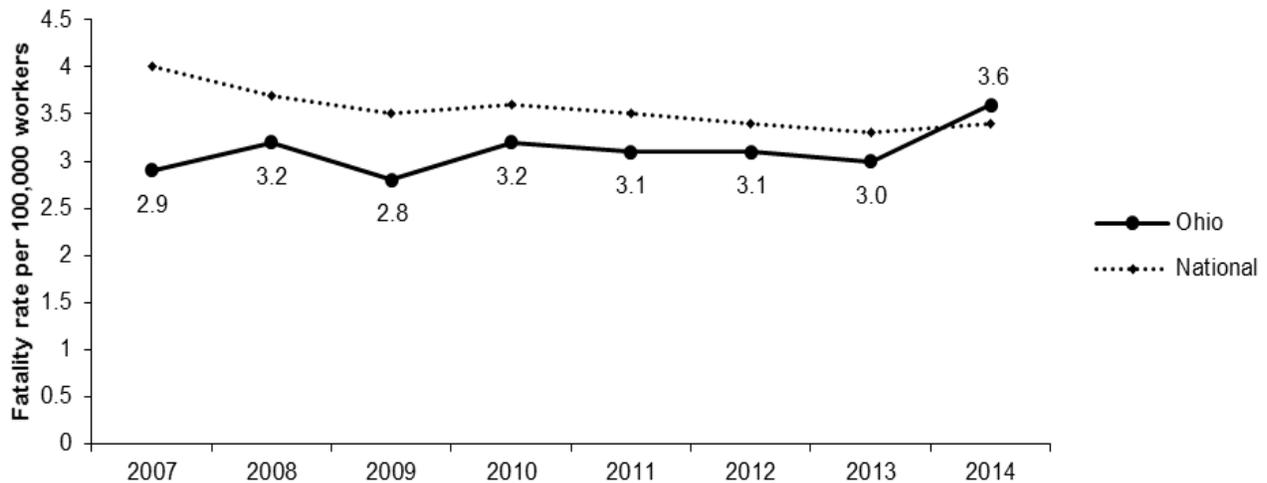


OHIO

Worker Safety and Health



Number of employees: ¹	5,183,462
Number of establishments: ¹	288,995
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	629,572
Number of workplace fatalities, 2014: ³	185
Rate per 100,000 workers: ⁴	3.6
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	25
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	105,600
Rate per 100 workers:	2.9
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	54,900
Rate per 100 workers:	1.5
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	55
Length of time it would take for OSHA to inspect each workplace once:	121 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	2,282
Construction:	942
Non-construction:	1,340
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$2,462
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$19,538
National average:	\$9,271

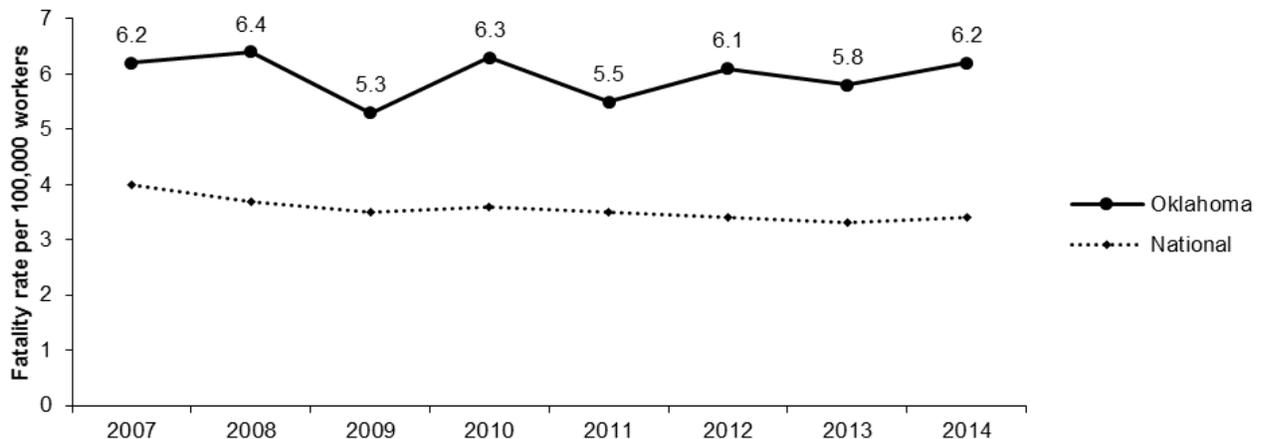


OKLAHOMA

Worker Safety and Health

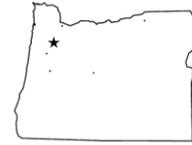


Number of employees: ¹	1,582,712
Number of establishments: ¹	107,012
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	274,070
Number of workplace fatalities, 2014: ³	98
Rate per 100,000 workers: ⁴	6.2
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	43
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	N/A
Rate per 100 workers:	N/A
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	N/A
Rate per 100 workers:	N/A
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	17
Length of time it would take for OSHA to inspect each workplace once:	133 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	769
Construction:	410
Non-construction:	359
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$2,062
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$23,752
National average:	\$9,271

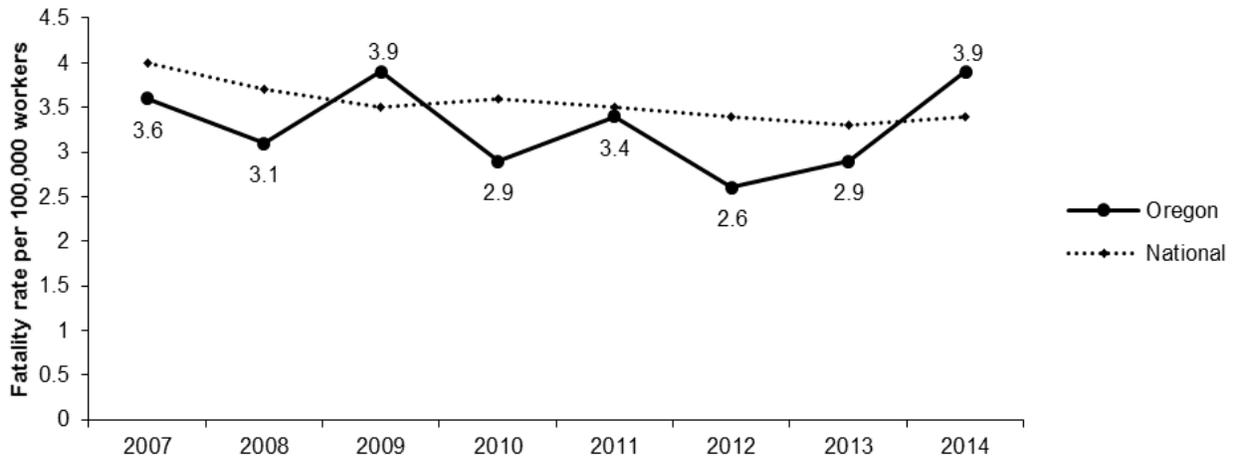


OREGON

Worker Safety and Health

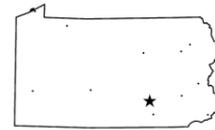


Number of employees: ¹	1,725,906
Number of establishments: ¹	134,891
State or federal OSHA program: ²	State
Number of workplace fatalities, 2014: ³	69
Rate per 100,000 workers: ⁴	3.9
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	27
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	46,500
Rate per 100 workers:	3.9
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	26,600
Rate per 100 workers:	2.2
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	72
Length of time it would take for OSHA to inspect each workplace once:	32 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	4,162
Construction:	1,411
Non-construction:	2,751
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$422
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$2,071
National average:	\$9,271

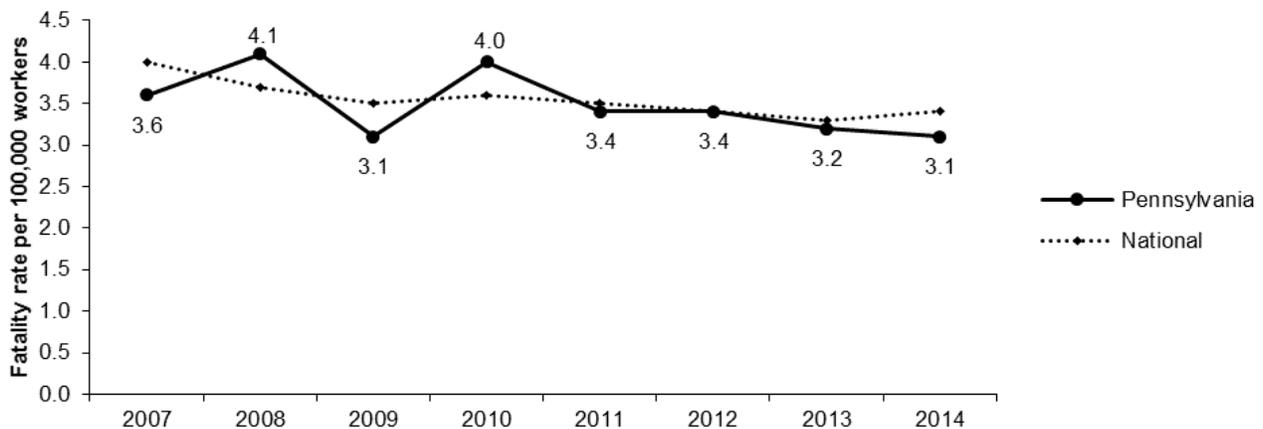


PENNSYLVANIA

Worker Safety and Health



Number of employees: ¹	5,644,443
Number of establishments: ¹	346,303
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	587,500
Number of workplace fatalities, 2014: ³	179
Rate per 100,000 workers: ⁴	3.1
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	16
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	149,300
Rate per 100 workers:	3.7
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	76,300
Rate per 100 workers:	1.9
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	57
Length of time it would take for OSHA to inspect each workplace once:	121 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	2,760
Construction:	1,310
Non-construction:	1,450
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$2,075
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$9,174
National average:	\$9,271

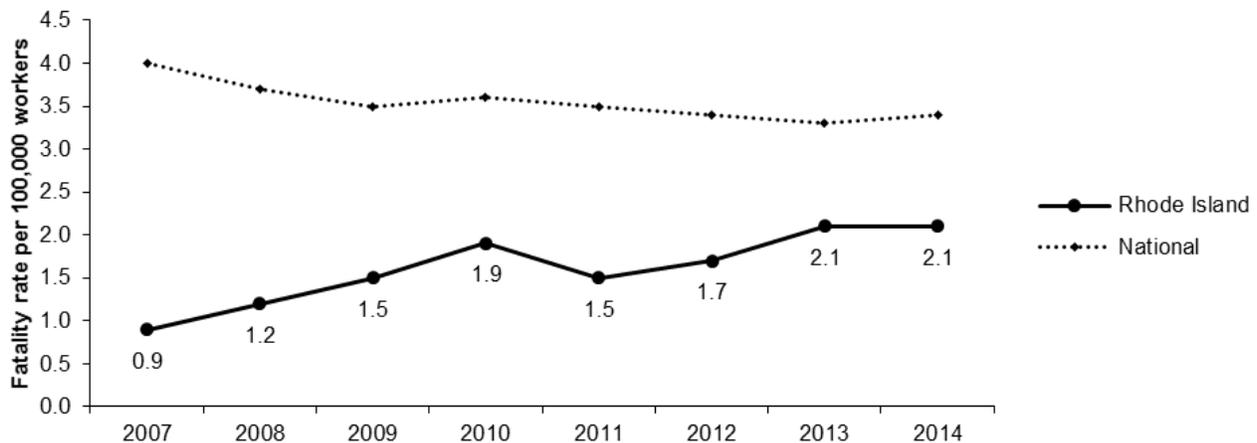


RHODE ISLAND

Worker Safety and Health



Number of employees: ¹	463,303
Number of establishments: ¹	35,770
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	48,765
Number of workplace fatalities, 2014: ³	10
Rate per 100,000 workers: ⁴	2.1
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	3
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	N/A
Rate per 100 workers:	N/A
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	N/A
Rate per 100 workers:	N/A
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	7
Length of time it would take for OSHA to inspect each workplace once:	118 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	298
Construction:	198
Non-construction:	100
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$1,910
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$2,880
National average:	\$9,271

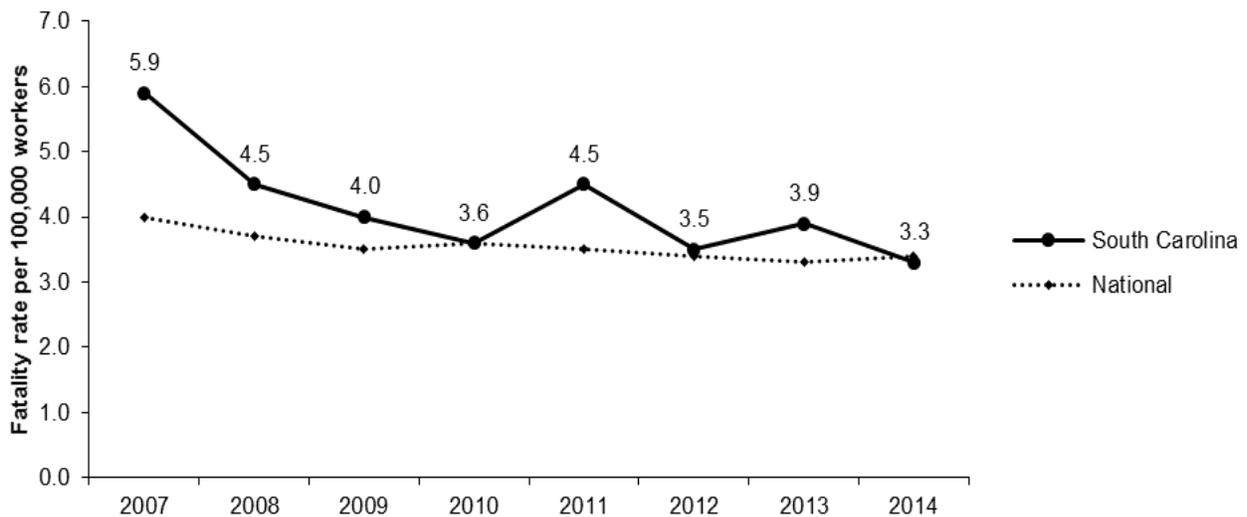


SOUTH CAROLINA

Worker Safety and Health



Number of employees: ¹	1,895,420
Number of establishments: ¹	117,766
State or federal OSHA program: ²	State
Number of workplace fatalities, 2014: ³	64
Rate per 100,000 workers: ⁴	3.3
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	21
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	34,500
Rate per 100 workers:	2.8
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	19,200
Rate per 100 workers:	1.5
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	22
Length of time it would take for OSHA to inspect each workplace once:	174 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	669
Construction:	406
Non-construction:	263
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$570
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$1,842
National average:	\$9,271

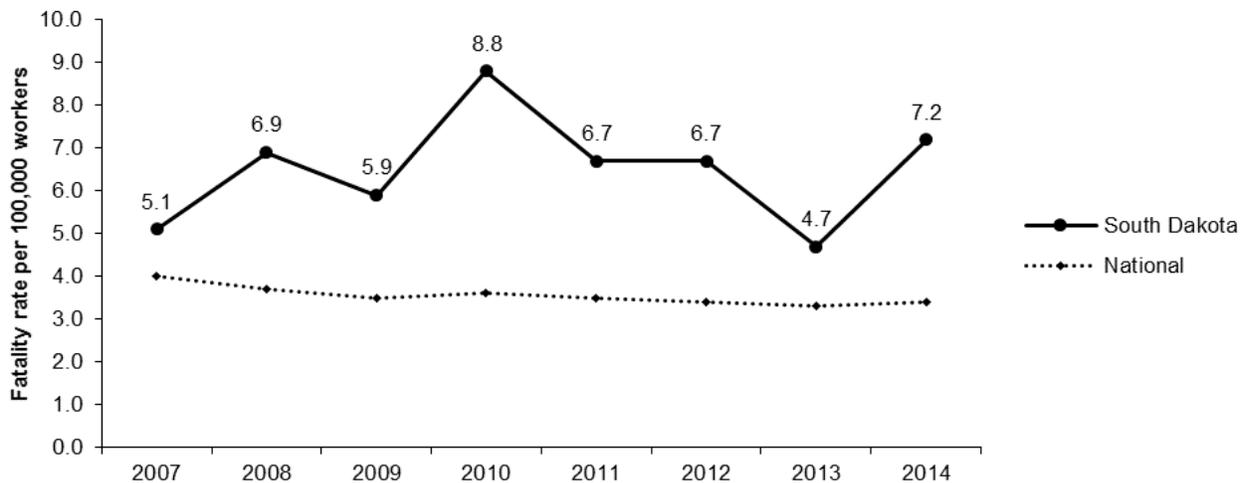


SOUTH DAKOTA

Worker Safety and Health



Number of employees: ¹	410,929
Number of establishments: ¹	31,976
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	60,734
Number of workplace fatalities, 2014: ³	29
Rate per 100,000 workers: ⁴	7.2
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	47
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	N/A
Rate per 100 workers:	N/A
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	N/A
Rate per 100 workers:	N/A
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	N/A
Length of time it would take for OSHA to inspect each workplace once:	348 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	87
Construction:	54
Non-construction:	33
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$2,712
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$5,175
National average:	\$9,271

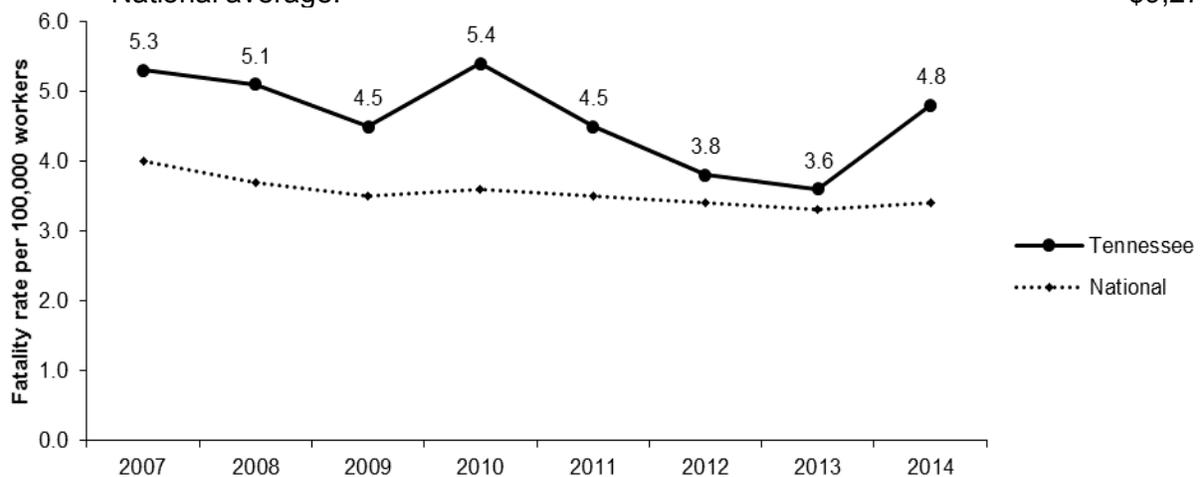


TENNESSEE

Worker Safety and Health

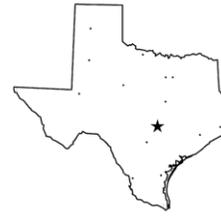


Number of employees: ¹	2,750,032
Number of establishments: ¹	145,729
State or federal OSHA program: ²	State
Number of workplace fatalities, 2014: ³	127
Rate per 100,000 workers: ⁴	4.8
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	35
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	62,000
Rate per 100 workers:	3.2
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	30,500
Rate per 100 workers:	1.6
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	34
Length of time it would take for OSHA to inspect each workplace once:	97 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	1,482
Construction:	269
Non-construction:	1,213
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$1,441
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$6,339
National average:	\$9,271

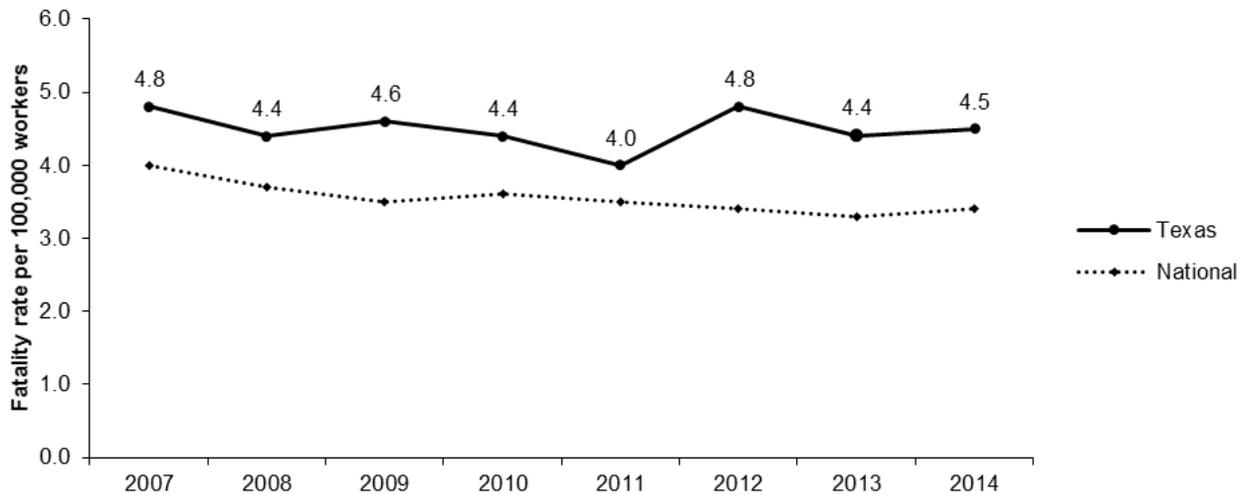


TEXAS

Worker Safety and Health

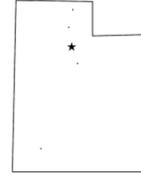


Number of employees: ¹	11,379,184
Number of establishments: ¹	623,544
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	1,588,683
Number of workplace fatalities, 2014: ³	531
Rate per 100,000 workers: ⁴	4.5
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	32
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	194,600
Rate per 100 workers:	2.4
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	110,800
Rate per 100 workers:	1.4
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	91
Length of time it would take for OSHA to inspect each workplace once:	159 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	3,846
Construction:	2,425
Non-construction:	1,421
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$2,098
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$9,953
National average:	\$9,271

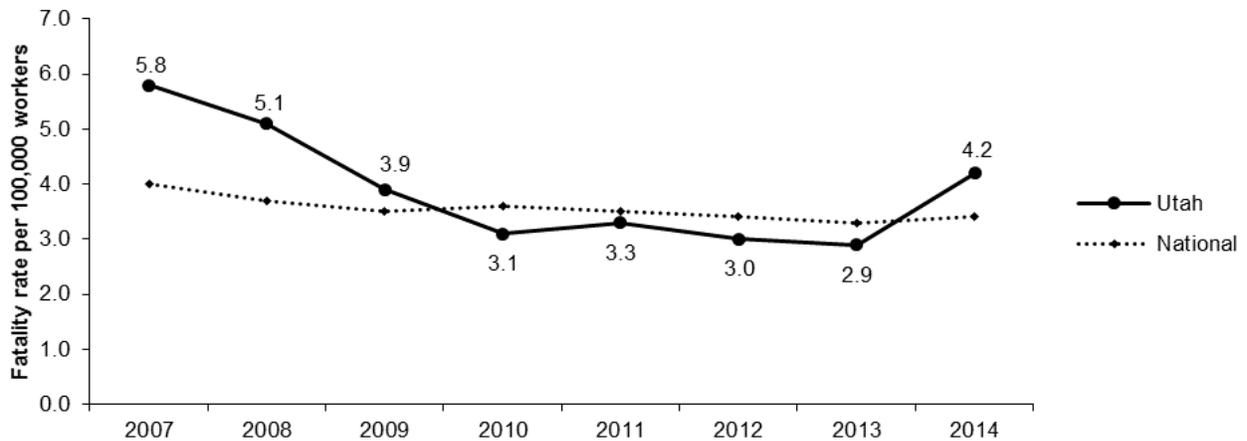


UTAH

Worker Safety and Health



Number of employees: ¹	1,291,859
Number of establishments: ¹	90,150
State or federal OSHA program: ²	State
Number of workplace fatalities, 2014: ³	54
Rate per 100,000 workers: ⁴	4.2
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	30
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	28,200
Rate per 100 workers:	3.2
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	12,100
Rate per 100 workers:	1.4
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	19
Length of time it would take for OSHA to inspect each workplace once:	150 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	596
Construction:	273
Non-construction:	323
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$1,234
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$2,317
National average:	\$9,271

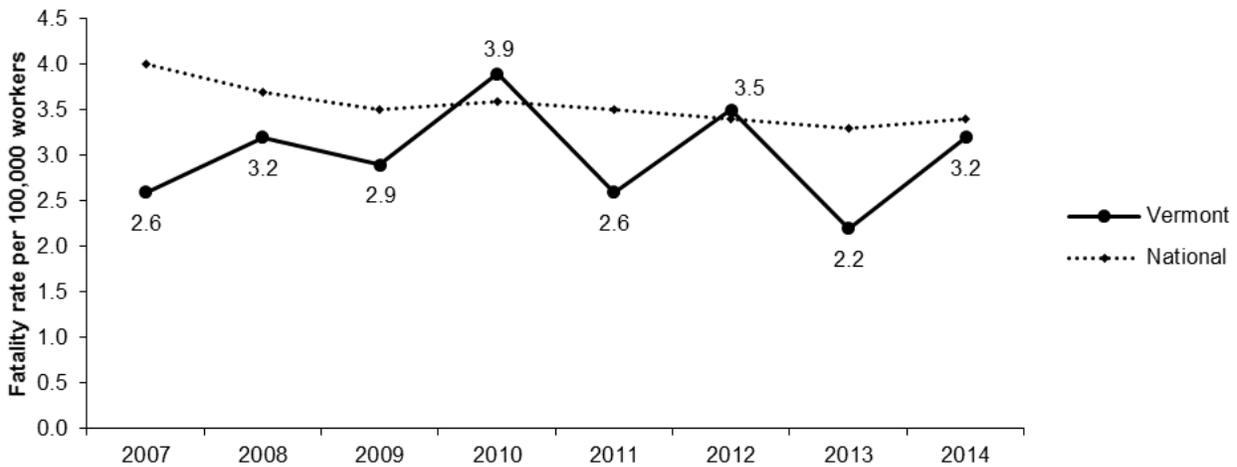


VERMONT

Worker Safety and Health



Number of employees: ¹	304,472
Number of establishments: ¹	24,400
State or federal OSHA program: ²	State
Number of workplace fatalities, 2014: ³	10
Rate per 100,000 workers: ⁴	3.2
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	20
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	9,900
Rate per 100 workers:	5.0
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	4,800
Rate per 100 workers:	2.4
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	8
Length of time it would take for OSHA to inspect each workplace once:	75 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	318
Construction:	147
Non-construction:	171
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$1,038
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$2,767
National average:	\$9,271

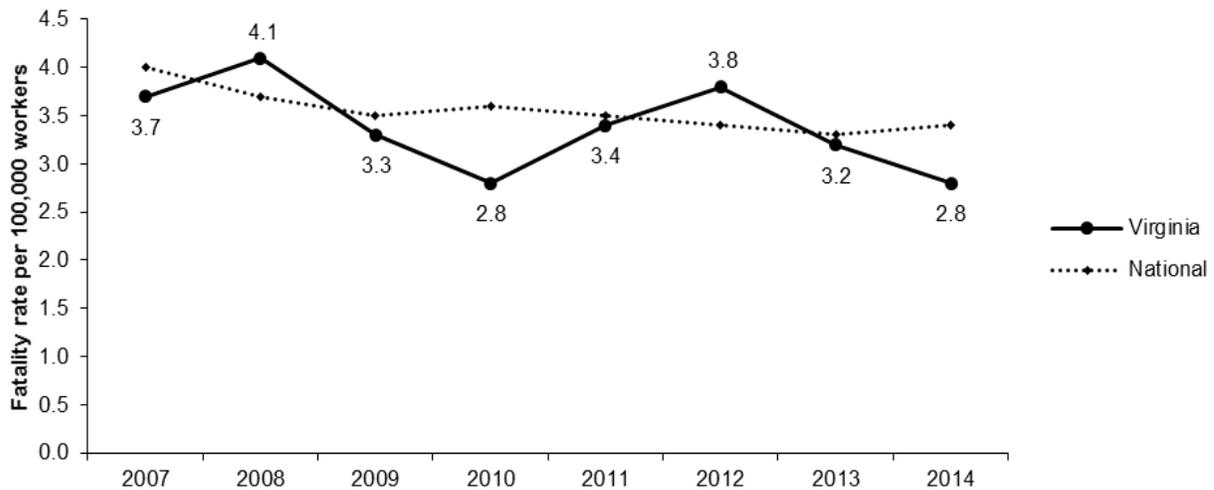


VIRGINIA

Worker Safety and Health



Number of employees: ¹	3,654,831
Number of establishments: ¹	240,112
State or federal OSHA program: ²	State
Number of workplace fatalities, 2014: ³	116
Rate per 100,000 workers: ⁴	2.8
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	11
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	66,200
Rate per 100 workers:	2.7
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	35,400
Rate per 100 workers:	1.5
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	51
Length of time it would take for OSHA to inspect each workplace once:	87 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	2,743
Construction:	1,493
Non-construction:	1,250
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$893
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$8,301
National average:	\$9,271

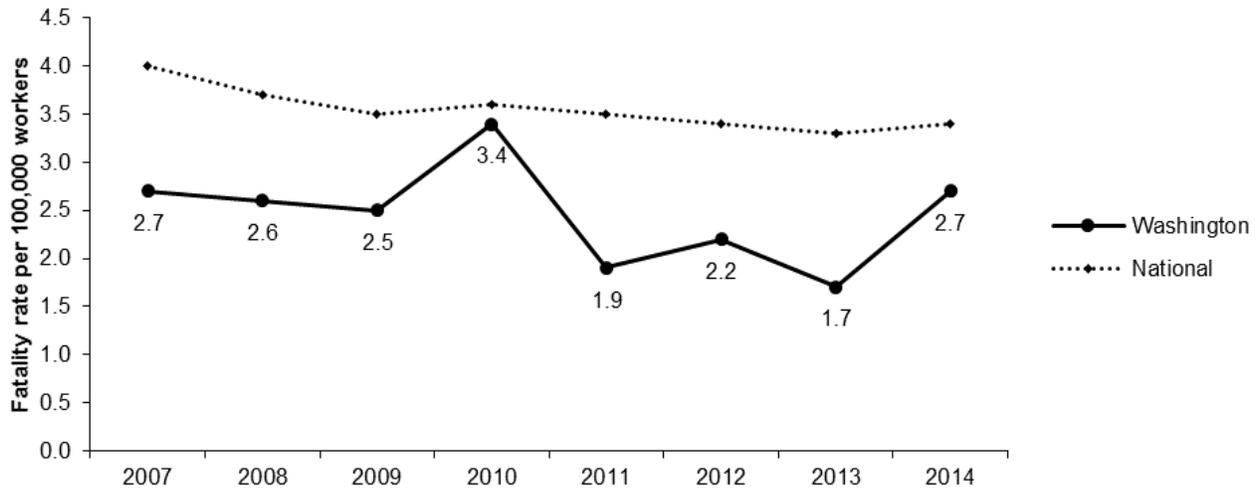


WASHINGTON

Worker Safety and Health



Number of employees: ¹	3,043,562
Number of establishments: ¹	242,942
State or federal OSHA program: ²	State
Number of workplace fatalities, 2014: ³	88
Rate per 100,000 workers: ⁴	2.7
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	9
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	90,000
Rate per 100 workers:	4.6
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	49,600
Rate per 100 workers:	2.5
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	109
Length of time it would take for OSHA to inspect each workplace once:	54 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	4,478
Construction:	1,984
Non-construction:	2,494
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$1,089
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$15,874
National average:	\$9,271

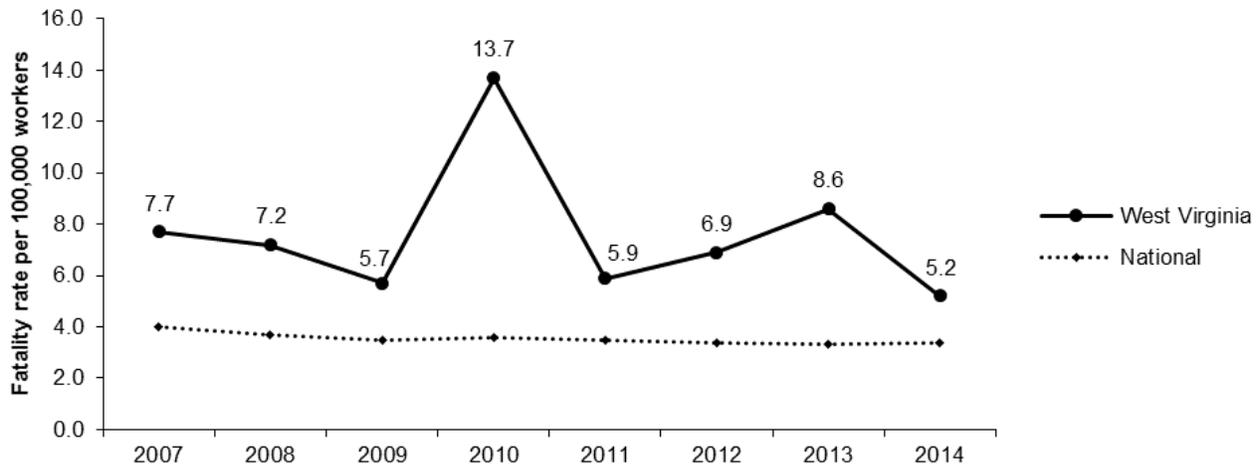


WEST VIRGINIA

Worker Safety and Health



Number of employees: ¹	700,846
Number of establishments: ¹	49,866
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	114,217
Number of workplace fatalities, 2014: ³	38
Rate per 100,000 workers: ⁴	5.2
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	38
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	19,000
Rate per 100 workers:	4.0
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	9,500
Rate per 100 workers:	2.0
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	7
Length of time it would take for OSHA to inspect each workplace once:	153 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	304
Construction:	135
Non-construction:	169
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$1,801
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$9,466
National average:	\$9,271

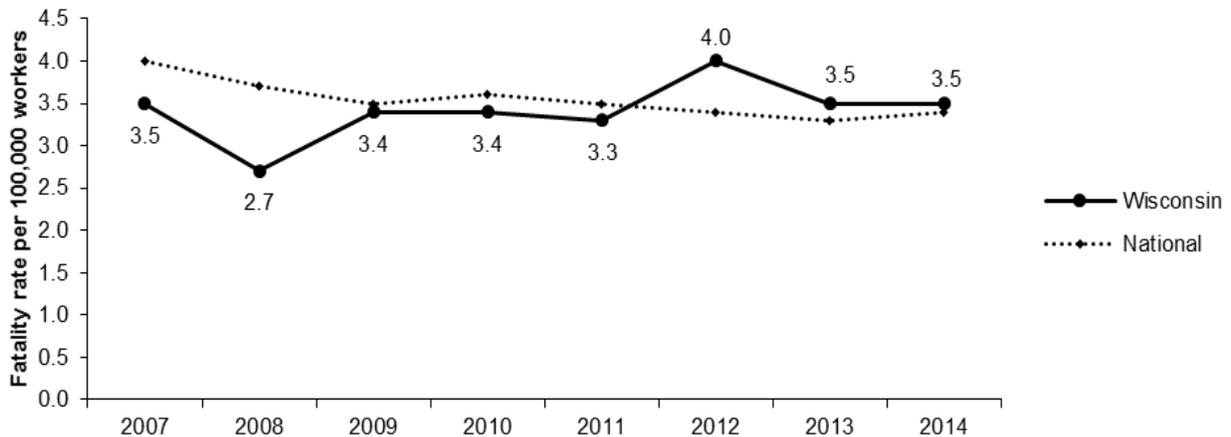


WISCONSIN

Worker Safety and Health

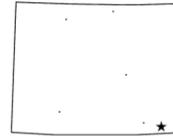


Number of employees: ¹	2,758,496
Number of establishments: ¹	163,938
State or federal OSHA program: ²	Federal
Number of state and local public employees not covered by the OSH Act:	350,736
Number of workplace fatalities, 2014: ³	99
Rate per 100,000 workers: ⁴	3.5
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	24
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	74,400
Rate per 100 workers:	3.9
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	37,900
Rate per 100 workers:	2.0
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	32
Length of time it would take for OSHA to inspect each workplace once:	112 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	1,407
Construction:	586
Non-construction:	821
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$2,277
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$15,498
National average:	\$9,271

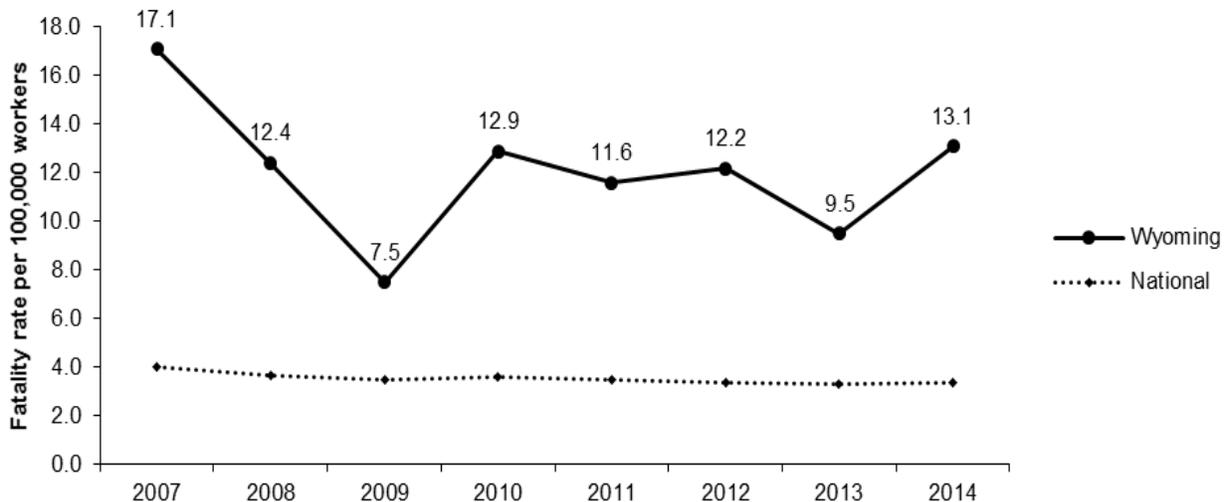


WYOMING

Worker Safety and Health



Number of employees: ¹	284,394
Number of establishments: ¹	25,518
State or federal OSHA program: ²	State
Number of workplace fatalities, 2014: ³	37
Rate per 100,000 workers: ⁴	13.1
National rate:	3.4
Ranking of state fatality rate, 2014: ⁵	50
Total cases of workplace injuries and illnesses, private industry, 2014: ⁶	6,600
Rate per 100 workers:	3.5
National rate:	3.2
Total injury and illness cases with days away from work, job transfer or restriction, private industry, 2014: ⁷	3,200
Rate per 100 workers:	1.7
National rate:	1.7
Number of workplace safety and health inspectors, FY 2016: ⁸	9
Length of time it would take for OSHA to inspect each workplace once:	98 yrs.
Number of workplace safety and health inspections conducted, FY 2015: ⁹	255
Construction:	150
Non-construction:	105
Avg. penalty assessed for serious violations of the OSH Act, FY 2015: ⁹	\$2,824
National average:	\$1,598
Avg. total penalty per fatality investigation, FY 2015: ¹⁰	\$8,354
National average:	\$9,271



SOURCES AND METHODOLOGY FOR STATE PROFILES

Employment and Establishment Data: *Employment and Wages, Annual Averages, 2014*, Bureau of Labor Statistics, U.S. Department of Labor.

Coverage of State and Local Employees: OSHA coverage of state and local employees depends on whether the state has adopted and runs its own OSHA program. States that run their own OSHA programs are required, as a condition of gaining federal approval, to cover state and local employees. Public employees in the 25 states that do not run their own OSHA programs are not covered by the OSH Act. Statistics on the number of state and local employees are from *Employment and Wages, Annual Averages, 2014*.

Workplace Fatality Information: *Census of Fatal Occupational Injuries, 2014*, Bureau of Labor Statistics, U.S. Department of Labor. Rate reflects fatalities per 100,000 workers.

Private-Sector Injury and Illness Data: *Survey of Occupational Injuries and Illnesses, 2014*, Bureau of Labor Statistics, U.S. Department of Labor. Rate reflects injuries and illnesses per 100 workers.

Inspector Information: The number of federal OSHA inspectors comes from OSHA's Directorate of Enforcement Programs records and reflects the number of inspectors, excluding supervisors and discrimination complaint inspectors. For the state-by-state profiles, inspectors are counted for the state in which the area office is located. Inspector data for state plan states are from OSHA's Directorate of Cooperative and State Programs, and reflects the number of "on board" inspectors included in the states' FY 2016 state plan grant applications. The number of "on board" inspectors may not accurately reflect the true number of inspectors that are hired and in place conducting enforcement inspections due to possible budgetary and staffing changes in individual states. National total for inspectors includes inspectors from the Virgin Islands and Puerto Rico.

Inspection Information: The number of inspections comes from the new OIS (OSHA Information System) and OSHA's Integrated Management Information System (IMIS). Federal inspection information was provided by OSHA for FY 2015 from the OIS. State inspection information was obtained from two reports in IMIS—Region by State for 18(b) State (only) for all inspections, and State by Year for 18(b) State (only) for fatality inspections, both for FY 2015—and one report from OIS: State by Year for 18(b) State (only) for fatality inspections, FY 2015.

The inspection ratio is determined by dividing the number of inspections conducted in the state by the number of establishments in the state under the jurisdiction of the agency (as determined by the Bureau of Labor Statistics data cited above). For states covered by federal OSHA, the number of covered establishments includes private-sector establishments (excluding mines, which are covered by the Mine Safety and Health Act) and federal establishments. For states that run their own OSHA programs, the number of establishments includes all private-sector establishments (excluding mines), state and local establishments and federal establishments. (Federal OSHA conducts a limited number of inspections in state plan states, presumably in federal facilities and maritime operations, for which state OSHA programs are not responsible. These inspections and establishments are included in the state profiles). It should be noted that the national average includes inspection data from the District of Columbia, the Virgin Islands, Puerto Rico, Guam, American Samoa and the Marshall Islands.

Penalty Information: Data on average penalties comes from the above referenced OIS and IMIS reports. Average penalty data is divided into individual state penalties, federal OSHA states penalties, state OSHA states penalties and a national average of penalties. The average penalty numbers are ascertained by dividing the total cost for serious penalties by the total number of serious violations. It should be noted that the national average includes penalty data from the District of Columbia and U.S. territories and protectorates: the Virgin Islands, Puerto Rico, Guam, American Samoa and the Marshall Islands.

The Length of Time It Would Take for OSHA to Inspect Each Establishment Once: This information is calculated separately for each federal OSHA state, each state plan OSHA state, the average for federal OSHA states, the average for state plan OSHA states and the national average for all states for one-time inspections. Establishment data is obtained from *Employment and Wages, Annual Averages, 2014*, at www.bls.gov/cew/cewbultn14.htm.

For individual *federal OSHA states*, the total number of private-industry (except mines) plus federal establishments is divided by the number of inspections per federal OSHA state. For Connecticut, Illinois, New Jersey and New York, the total number of establishments (except mines) is divided by the number of federal inspections plus the number of 18(b) state inspections.

For individual *state plan OSHA states*, the total number of establishments (except mines) is divided by the number of inspections per state.

For the *average of federal or state plans to inspect establishments one time*, the total number of establishments calculated above for individual federal or state plan states are added together and then divided by the total number of federal or state inspections, respectively. For federal states, Connecticut, Illinois, New Jersey and New York, the number of establishments includes the total number of private-industry (minus mines) plus federal establishments, and the number of inspections includes only federal inspections conducted in those states.

For the *national average for one-time inspections*, the total number of establishments from the number calculated for both federal states and state plan states are added together and then divided by the total number of federal and state inspections.

NOTES: Due to the revised recordkeeping rule, which became effective Jan. 1, 2002, the estimates from the 2002 BLS Survey of Occupational Injuries and Illnesses are not comparable with those from previous years. Among the changes that could affect comparisons are: changes to the list of low-hazard industries that are exempt from recordkeeping; employers are no longer required to record all illnesses regardless of severity; a new category of injuries/illnesses diagnosed by a physician or health care professional; changes to the definition of first aid; and days away from work are recorded as calendar days.

Beginning with the 2003 reference year, both CFOI and the Survey of Occupational Injuries and Illnesses began using the 2002 North American Industry Classification System (NAICS) for industries and the Standard Occupation Classification system (SOC) for occupations. Prior to 2003, the surveys used the Standard Industrial Classification (SIC) system and the Bureau of the Census occupational classification system. The substantial differences between these systems result in breaks in series for industry and occupational data. Therefore, this report makes no comparisons of industry and occupation data from BLS for years beginning with 2003 and beyond with industry and occupation data reported by BLS prior to 2003.

FOOTNOTES FOR STATE PROFILES

¹U.S. Department of Labor, Bureau of Labor Statistics, Employment and Wages: Annual Averages, 2014.

²Under §18 of the Occupational Safety and Health Act, a state may elect to run its own occupational safety and health program, provided it is as effective as the federal program. One condition of operating a state plan is that the program must cover state and local employees who otherwise are not covered by the OSH Act. Currently, 21 states and one territory administer their own OSHA programs for both public- and private-sector workers. Connecticut, Illinois, New Jersey, New York, Maine and the Virgin Islands have state programs for public employees only. Maine's state plan went into effect Aug. 5, 2015.

³U.S. Department of Labor, Bureau of Labor Statistics, Census of Fatal Occupational Injuries, 2014.

⁴U.S. Department of Labor, Bureau of Labor Statistics, Census of Fatal Occupational Injuries, 2014, Final Release, April 21, 2016.

⁵Ranking based on best to worst (1=best; 50=worst).

⁶U.S. Department of Labor, Bureau of Labor Statistics, Survey of Occupational Injuries and Illnesses, 2014 private sector only.

⁷U.S. Department of Labor, Bureau of Labor Statistics, State Data, Nonfatal Occupational Injuries and Illnesses Requiring Days Away from Work, Job Transfer or Restriction, 2014 private industry only.

⁸U.S. Department of Labor, OSHA. Federal Compliance Safety and Health Officer Totals by State, Feb. 19, 2016. State plan state Compliance Safety and Health Officers "on board" from FY 2016 State Plan Grant Applications, Feb. 24, 2016.

⁹U.S. Department of Labor, OSHA. Inspection data provided by the Directorate of Enforcement programs, OIS Inspection Report; and the Directorate of Cooperative and State programs, IMIS State by Year for 18(b) State (only) and OIS State by Year for 18(b) State (only).

¹⁰U.S. Department of Labor, OSHA, FY 2016. Fatality inspection penalty data provided by the Directorate of Enforcement programs, OIS Inspection Report; and the Directorate of Cooperative and State programs, State by Year for 18(b) State (only) from IMIS and OIS State by Year for 18(b) State (only).

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