



**PESH Federal Fiscal Year 2024
State OSHA Annual Report
(SOAR)**

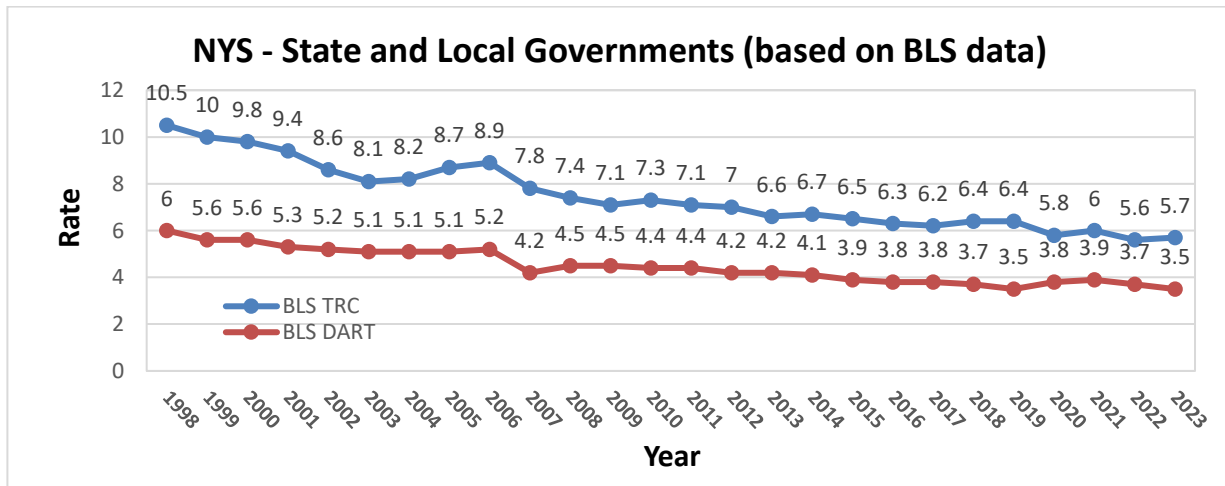
I. Executive Summary for Federal Fiscal Year 2024

The Division of Safety and Health (DOSH) is one of five units within Worker Protection in the New York State Department of Labor (NYSDOL). DOSH administers nine programs to protect the public and workers of New York State from hazards, accidents, and injuries; one of which is Public Employee Safety and Health (PESH). PESH was created in 1980 as an Occupational Safety and Health Administration (OSHA) state plan. PESH oversees workplace protection of public employees at the state and local levels through the enforcement of the PESH Act, adopted OSHA standards, and specific state regulations. Public sector employers include state, county, city, town, village governments, public authorities, paid and volunteer fire departments, and school districts. PESH provides protection through two main functions: enforcement and consultation services.

PESH instituted a Strategic Plan in 1998. The PESH Strategic Plan focuses on select industries which have high injury and illness or Days Away, Restricted or Transfer rates (DART). The current PESH Strategic Plan consists of three distinct committees including Fire Service, Police Protection, and Healthcare (specifically nursing homes, general hospitals, and surgical hospitals). Each Strategic Plan committee analyzes the cause(s) of injuries and illnesses within their sector and focuses on building partnerships with labor and management to develop strategies aimed at reducing the occurrence and/or seriousness of injuries and illnesses.

PESH continues to make significant progress in protecting the public employees of New York State (NYS) and promoting a safe and healthy workplace. The activities and accomplishments of PESH and the Strategic Plan committees are identified in this report. The following are noteworthy statistical highlights and trends.

Based on data provided by the NYSDOL Office of Research and Statistics to the United States Bureau of Labor Statistics (BLS), the Total Recordable Case Injury and Illness Incident Rate (TRC) for Calendar Year (CY) 2023 for state and local government employment was 5.7 per 100 full-time equivalent workers. This represents a 1.8% increase from the 5.6 TRC in CY 2022. The DART for CY 2023 was 3.5, a 5.4% decrease from the 3.7 DART in CY 2022. Both the TRC and DART have experienced an overall downward trend of declining rates since the inception of the Strategic Plans in 1998, when the TRC and DART were 10.5 and 6.0 respectively. Overall, the TRC has decreased 45.7% and the DART has decreased 41.7% over this period.



II. Summary of Annual Performance Plan and Progress Towards Strategic Plan Accomplishments

The overall goal this year was to continue developing and implementing strategies to improve workplace safety and health for all public employees, with special focus on those in the select strategic plan industries. Federal Fiscal Year (FFY) 2024 is the third year of the 2022-2026 five-year plan. The Strategic Plan Performance Goals for the five-year plan, which began in FFY 2022, were:

- Reduce the TRC by 5% over five years in NAICS 922120 (Police Protection).
- Reduce the TRC by 5% over five years in NAICS 922160 (Fire Service).
- Reduce the DART by 5% over five years in the following healthcare sectors:
 - o NAICS 623110 (Nursing Care Facilities).
 - o NAICS 622110 (Hospitals).

Police Departments (NAICS 922120)

Strategic Goal: Improve workplace safety and health for all public employees.

Performance Goal #1A: Reduce the TRC by 5% over five years in NAICS 922120.

Baseline: 2020

Activity Measures:

Partnerships –This Strategic Plan committee continued building and maintaining partnerships with members of the law enforcement community. Partnerships with labor and management groups in the law enforcement community were established during field activity including enforcement, consultation, and outreach.

Injury Data Collection and Analysis – 2023 injury illness data was collected by obtaining the Injury and Illness Logs (SH-900) and SH-900 Summaries (SH-900.1) from county sheriff’s departments in the state as well as the New York City Police Department (NYPD). This information will be compared to the 2020 baseline year. Data included only patrol sections of these departments, not corrections. The data will be used to identify trends as well as corresponding hazard corrections that each employer can use to reduce their TRC.

The Primary Outcome Measure of decreasing the TRC in police protection agencies by 1% per year will be assessed over the next several years by comparing each subsequent year to 2020 baseline data.

The OSHA Information System (OIS) was used to assemble Consultation, Inspection, and Compliance Assistance data.

Inspections – There were 59 Enforcement Inspections conducted in FFY 2024.

Consultations – There were no Consultation visits completed in FFY 2024.

Outreach– There were a total of 19 Compliance Assistance activities completed in FFY 2024.

Primary Outcome Measures: Police Service TRC and DART

Measure Description	Baseline (2020) *	FFY 2023 **	% Change from Baseline
TRC	17	5	-71
DART	13	3	-77

* Based on 97% of polled county law enforcement agencies with road patrol divisions in NYS.

** Based on 75% of polled county law enforcement agencies with road patrol divisions in NYS.

Intermediate Outcome Measures: Police Service FFY Activities

Measure Description	Baseline (2020) *	FFY 2024	% Change from Baseline
Enforcement Inspections	65	59	-9
Consultation Visits	4	0	-100
Outreach and Technical Assistance	7	19	+171

* Information obtained from the OIS.

Introduction:

FFY 2024 presented significant staffing challenges for this strategic plan group. Statewide consultation staff was reduced to a single industrial hygienist. Consequently, voluntary and promotional activity was proportionately limited. The committee was able to attend a few events allowing some stakeholder interaction. These included two NYS Sheriffs' Association events: The Committee on Policing and Safeguarding Schools Conference, as well as this group's annual summer training conference. PESH members had good interaction at these events promoting PESH resources and gaining valuable feedback.

Partnership Activity:

Most of PESH's partnership activity was achieved as a natural result of the core mission. As part of routine field work this past fiscal year, safety and health staff led law enforcement labor and management groups through 78 separate enforcement, consultation, and outreach activities. Essential operational elements within these actions, such as rapport building and employer/employee interviewing, naturally establish and strengthen long term relationships between those involved.

Injury Data Collection & Analysis:

FFY 2023 data was collected and compared to the 2020 baseline year. A significant reduction was achieved. This committee will again petition county law enforcement stakeholders during the current fiscal year to obtain CY 2024 SH-900 and SH-900.1 from county sheriff departments and NYPD. Rates will be compared over time to identify key trends in the injuries and illnesses.

Inspections:

There was a total of 59 inspections performed during FFY 2024, which is a 9% decrease from the 2020 baseline year (65), but a 26% increase over the previous year (47).

Consultations:

There was a total of zero consultations performed during FFY 2024, which is a decrease from the 2020 baseline year (4).

Outreach:

There were 19 compliance assistance activities conducted in FFY 2024, which is a 171% increase from the 2020 baseline year (7). These activities included technical assistance on mold assessment, evaluation of alternative respiratory protection for officers with religious facial hair, respiratory protection for riot control agents, respirator medical evaluation, new Toxic Substances Control Act requirements for methylene chloride, forensic lab ventilation, and accessing NYS DOL online resources. The committee has also continued to maintain and update a law enforcement resource library with resources such as template programs, template training material, and factsheets.

Miscellaneous Activities:

Each quarter, committee members participated in conference calls where members discussed current news pertaining to the industry, and developed strategies to address newly identified trends and issues. Numerous other mission related actions were accomplished, including the following:

- The website resource project was completed and tested, with the current Law Enforcement Resource collection now accessible from the PESH website landing page and by Quick Response (QR) codes.
- The expansion of the Workplace Violence Prevention Law to include public schools (effective January 4, 2024) generated significant interest and discussion related to its implementation. Resources that would be useful for law enforcement officers serving as School Resource Officers (SRO) were located and added to the NYSDOL Google drive resource collection.
- Members had the opportunity to observe demonstration of a hooded Powered Air Purifying Respirator at the NYS Police Academy to explore options for troopers with facial hair (under religious exemption). Typical law enforcement tasks were performed while wearing the respirator, with representatives from the manufacturer, union, and several NYS Police units present. Potential concerns included the lack of integrated eye and face protection, blower noise, natural (butyl) rubber content, donning time associated with tucking inner shroud, and battery life.
- A NYPD crossing guard fatality investigation resulted in a general duty clause violation related to visibility and traffic control. As a result, the employer improved the workplace system-wide by providing employees with additional equipment and training.
- Members attended the OSHA Suicide Prevention Webinar on September 10, 2024.

Future Activities Planned:

This committee will continue efforts to assist New York’s law enforcement community. As previously stated, the committee will again petition county law enforcement stakeholders during the current fiscal year to obtain FFY 2024 SH-900 and SH-900.1 from each county sheriff’s department and NYPD. Rates will be compared over time to identify key trends in the injuries and illnesses. This information will be provided back to each participating employer and used to produce additional outreach resources. At least two law enforcement related conferences will be attended during FFY 2025. These opportunities will again allow members to interact with constituents on a grass roots level. Quarterly meetings will continue to be held to discuss current goals and issues.

Information sharing is a critical component of the committee and a recognized strategy in reducing workplace injuries and illnesses. As previously stated, through generous assistance from PESH Program Management and Information Technology staff, a Google drive containing the complete resource library went live during FFY 2024. Stakeholders can now utilize a simple QR code to gain access to the entire resource library.

Fire Service - NAICS 922160

Strategic Goal: Improve workplace safety and health for all public employees.

Performance Goal # 1B: Reduce TRC by 5% over five years in NAICS 922160.

Baseline Year: 2020

Activity Measures:

Partnerships – This committee continued to build and maintain partnerships with the Firefighters Association of the State of New York (FASNY), New York State Association of Fire Chiefs (NYSAFC), New York State Division of Homeland Security and Emergency Services, County Fire Coordinators, New York State Emergency Managers Association (NYSEMA), Association of Fire Districts of the State of New York, and New York State Department of Health (NYSDOH).

Injury Data Collection and Analysis – Since NYS data for this NAICS continues to be unavailable from the United States Department of Labor (USDOL), BLS, or NYSDOL Office of Research and Statistics, the committee continued to collect injury and illness data from fire departments in NYS. The goal was to obtain injury and illness data from 5% of the fire departments in NYS, which resulted in requesting data from 89 fire departments. A random number generator was used to select 89 fire departments from the master list. New York City Fire Department (FDNY) was automatically included, making the total number of requests 90 departments. PESH requested data from 5% of the fire houses in FDNY (engine and ladder companies only), to keep the percentages the same, again using a random number generator to select 20 fire houses. Since FDNY has such a large number of employees, each fire house was considered a separate department. The total number of departments that PESH intended to collect data from was 109.

Letters continue to be mailed out to each selected department requesting injury and illness data. Follow up phone calls and emails were made as needed, as well as reaching out to the county fire coordinators and any contacts PESH inspectors made to continue to reach departments and gather this information. Due to most of the fire departments being staffed by volunteers, it was difficult to contact representatives.

The committee collected 100% of the data from FFY 2020, with four records only enforcement inspections required. The total FFY 2020 TRC and DART were 3.84 and 3.21 respectively. Looking at the 109 departments, there were no significant changes in fire department structure in 2020 (closed departments, mergers) and no significant injury trends in FFY 2020.

The committee collected 100% of the data from FFY 2021, with no enforcement inspections required. The total 2021 TRC and DART were 6.12 and 5.62 respectively. Of these fire departments, 19 were career, four were combination, and 81 were volunteer. Two of the fire departments in the sample dissolved and were no longer in service (both were volunteer departments) in FFY 2021.

The committee collected 86% of the data from FFY 2022, with 15 fire departments left to collect data from. PESH will reach out to each fire department one more time before referring for a record only enforcement inspection. The total FFY 2022 TRC and DART were, with 86% of data

collected, 4.42 and 4.03, respectively. Of these fire departments, 17 were career, four were combination, and 86 were volunteer. There were no significant changes in fire department structure among the departments surveyed in FFY 2022.

The committee collected 46.8% of the data from FFY 2023, with information from 58 fire departments outstanding. PESH will reach out to each fire department one more time before referring for a record only enforcement inspection. The total FFY 2023 TRC and DART were, with 46.8% of data collected, 9.58 and 8.97, respectively. Of these fire departments, 20 were career, 7 were combination, and 81 were volunteer in FFY 2023.

The committee found that if more career fire departments were randomly selected, both the TRC and DART increased. Of the fire departments that have responded, one has closed and is no longer in service.

As of FFY 2024, there were 1,779 fire departments in NYS, consisting of career, combination, and volunteer firefighters.

By contacting fire departments to receive their injury and illness data instead of relying on BLS data, PESH received a more accurate representation of the rates in NYS and maintained direct contact with the fire departments. An accurate master list of fire departments and their contact information has been maintained and kept up to date.

The OIS was used to assemble Consultation, Inspection and Compliance Assistance data.

Primary Outcome Measures: Fire Service Injury and DART Rates

Measure Description	Baseline (2012)	2013	2014	2015	2016	2017	2018	Baseline (2020)	2021	2022	2023	% Reduction from 2020 Baseline Year
TRC	21.8	24.0	79.1**	20.1	15.9	NA***	NA***	3.84	6.12	4.42	9.58	+149.5
DART	20.0	23.0	77.5**	15.1	15.3	NA***	NA***	3.21	5.62	4.03	8.97	+179.4

* Based on BLS data.

** Outlier data anomaly not detected by BLS until after data was published.

*** Data not available due to a BLS freeze on NAICS 92 data for data integrity reasons.

Intermediate Outcome Measures: Fire Service FFY 2023 Activities

Measure Description	2020 Baseline	FFY 2023
Enforcement Inspections	96	69
Consultation Visits	19	10
Compliance Assistance	11	46

* Information obtained from the OIS.

Introduction:

The main goal of the Fire Strategic Plan is to reduce the number of injuries in state and local fire protection agencies by 1% per year or 5% for the next five years. The PESH Fire Strategic Plan focuses on injury and illness reduction in city and local fire departments throughout NYS.

Partnership Activity:

This committee continues to work with FASNY, NYSAFC and County Fire Coordinators as it relates to PESH activities. Members continue to network with county level Fire Coordinators and Emergency Managers through the NYSEMA and the Local Emergency Planning Committee (LEPC) meetings.

Committee members attend the local NYSEMA and the LEPC meetings. Emergency exercises also provide an effective mechanism for committee members to engage with the local and state fire and emergency response community.

Inspections:

There were 69 inspections in the fire service NAICS 922160 in FFY 2024 compared to 85 inspections in FFY 2023, and 96 inspections in the 2020 baseline year. The decrease in the number of inspections compared to the previous year is related to the hiring and training of new inspectors. An increase is expected in future years as staff gain experience.

Consultations:

There was a total of 10 consultations performed during FFY 2024, compared to three in FFY 2023. The increase in the number of consultations was related to the focused activity of a new safety consultant with experience in the industry, and from significant interest generated by the proposed rule regarding Emergency Response.

Compliance Assistance and Outreach:

There was a total of 46 compliance assistance activities conducted during FFY 2024 compared to 67 in FFY 2023, and 11 during the 2020 baseline year. The committee continued to conduct focused outreach to volunteer fire departments through the data request and collection process, advising them of the strategic plan and its mission, the purpose of the data project, and the availability of helpful resources and free consultation services. As indicated earlier, the mailings were effective and promoted continued dialogue with individual fire departments.

Training / Conferences / Meetings:

Committee members can impact a larger audience when presenting at county chief's meetings and other fire community events. The training presentation titled "Firefighter Requirements: Myth vs. Fact" continues to be updated to reflect current questions and concerns. During 2024, this was presented at three county wide training sessions. Several members staffed an exhibit booth at the Health, Wellness and Safety Symposium at the NYS Fire Academy in February 2024, the NYSAFC Fire Expo in Syracuse in June 2024, and the FASNY Conference in Niagara Falls in August 2024.

PESH has been sharing updates from OSHA on the proposed Emergency Response Standard with county fire coordinators, with a request for them to distribute to the fire departments in their county.

Overview/Miscellaneous:

While plan-related enforcement and compliance assistance activity decreased in FFY 2024, consultation activity increased. The overall program trend was attributed to the staff changes that occurred during the year. There were positive overall indicators among departments and PESH continued to have collaborative interaction with fire service. Trends adversely affecting the fire service did not improve. Many smaller departments still appeared to be facing challenges with declining membership, which could increase the difficulties fire departments experienced in ensuring that their individual members met the training requirements. Additionally, fire departments that had recent turnover in leadership positions struggled to find new and innovative ways of providing member training. Strategic Plan members continued to help local departments by promoting networking with county and state level resources.

Future Activities Planned:

The Fire Strategic Plan Committee will continue to look for emerging trends within the local fire service community using data available from the industry, USDOL BLS, NYSDOL Office of Research and Statistics, as well as NYSEMA meetings, and through PESH activities (consultations, inspections, and outreach). Data sampling will continue in the next FFY, with comparison to the 2020 baseline. Newly appointed PESH leadership will continue to learn about trending data that can be made available to the committee. Committee members will continue to track the progress of the Emergency Response rulemaking process and target opportunities to present to County Chief Associations and other fire service groups to keep them involved and informed and help promote PESH services and resources.

Further, the committee is preparing to develop an Ice Rescue Awareness fact sheet that will discuss ways to advance awareness and mitigation of hazards posed by dangers associated with ice during rescue and training operations.

As part of an ongoing modernization project, PESH intends to make strategic plan resources available on NYSDOL's webpage. There is currently a QR code with a link to all of PESH's fire department resources on a Google Drive. The next step is to add this link to the NYSDOL website.

Residential Nursing Care (NAICS 623110) and Acute Hospital Care (NAICS 622110)

Strategic Goal: Improve workplace safety and health for all public employees.

Performance Goal #1C: Reduce the DART by 5% in NAICS 623110 and 622110.

Baseline Year: 2020

Activity Measures:

Partnerships –This Strategic Plan committee continued building and maintaining partnerships with organized labor such as Public Employee Federation (PEF) and Civil Service Employees Association (CSEA), advocacy groups such as NYS Zero Lift Task Force, New York Committee for Occupational Safety and Health, Western New York Counsel for Occupational Safety and Health (WNYCOSH), and various healthcare facilities. Safe patient handling assistance programs and other forms of assistance were provided to public sector long-term care and acute healthcare facilities. Assistance related to workplace violence prevention and PPE was also provided to a large hospital facility.

Injury Data Collection and Analysis - The SH-900 and SH-900.1 were used to assemble statistics relating to long-term care (i.e., nursing home) and acute hospital facilities covered by this committee.

The OIS was used to assemble Consultation, Inspection and Compliance Assistance data.

The Primary Outcome Measure of decreasing the number of lost workdays due to patient/resident handling injuries in the targeted health care agencies by 1% per year was exceeded in nursing homes (57% decrease) and hospitals (9% increase), as shown in the tables below.

Inspections –During FFY 2024 there were 13 inspections conducted in Nursing and Acute Hospital Care facilities compared to 14 in FFY 2023.

Consultations – There were no Nursing Home or Acute Hospital Care consultations performed during this period.

Compliance Assistance Activities – There was one Compliance Assistance activity conducted in Nursing and Hospital Care settings in FFY 2024 compared to six in FFY 2023. For the past three years an emphasis was placed on documenting members outreach efforts within the OIS.

Training Seminars – Strategic plan committee members were unable to co-sponsor any Safe Patient Handling Conferences as they were put on pause over COVID-19 pandemic and have not resumed. Discussions were held with committee members about different platforms that could be used for training purposes.

Primary Outcome Measures:

Number of Lost Workdays Due to Patient/Resident Handling

Nursing and Residential Care Facilities												
Measure	2012	2013	2014	2015	2016	2017	2018	2019	2020 Baseline	2021	2022	2023
# Lost Work Days due to Resident Handling	13,375	9,749	10,530	9,842	7,1327	6,863	9,455	8437	8261	7258	6590	3527
Change		-27%	-21%	-26%	-47%	-49%	-29%	-37%	Baseline	-12%	-20%	-57%
General and Surgical Hospitals												
Measure	2012	2013	2014	2015	2016	2017	2018	2019	2020 Baseline	2021	2022	2023
# Lost Work Days due to Resident Handling	12,868	11,583	10,139	9,603	9,079	10,505	8,071	10,363	9,433	10,948	6889	8563
Change		-10%	-21%	-25%	-29%	-18%	-37%	-19%	Baseline	+16%	-27%	-9%

DART – All Injuries and Illnesses

Nursing and Residential Care Facilities												
Measure	2012	2013	2014	2015	2016	2017	2018	2019	2020 Baseline	2021	2022	2023
DART	9.0	8.6	8.2	8.3	6.1	5.9	7.3	6.8	8.4	8.1	6.3	4.8
Change		-4%	-8.9%	-7.8%	-32.2%	-34.0%	-19%	-24%	Baseline	-4%	-25%	-43%
General and Surgical Hospitals												
Measure	2012	2013	2014	2015	2016	2017	2018	2019	2020 Baseline	2021	2022	2023
DART	4.0	2.9	3.5	3.4	3.0	4.2	5.3	4.1	5.0	4.2	2.8	3.2
Change		-28%	-12.5%	-15%	-25%	+5.0%	+25%	+2%	Baseline	-16.0%	-44%	-36%

DART - # cases resulting in lost time X 200,000 / total # work hours (Based on SH900.1)

Intermediate Outcome Measures: Nursing Care Facilities and Hospitals Healthcare FFY 2021 Activities

Measure Description	2020 Baseline	FFY 2024
Enforcement Inspections *	23	13
Consultation Visits *	0	0
Compliance Assistance *	34	1

**Based on OIS Data*

Introduction:

FFY 2024 is the third year of PESH's, FY 2022– 2026 Five-Year Strategic Plan. The main goal of the Healthcare Strategic Plan committee is to reduce the DART by 1% per year or 5% over the next five years. The PESH Healthcare Strategic Plan focuses on injury and illness reduction in county nursing homes, state veterans' homes and public Acute Hospital Care facilities.

Partnership Activity:

Strategic Plan committee members continued their partnership with the NYS Zero Lift Task Force, WNYCOSH, and NYSDOH. Committee members also continued with to build partnerships with CSEA and PEF.

Inspections:

During FFY 2024, there were 13 enforcement inspections in nursing homes and Acute Hospital Care facilities, compared to the 23 inspections during the 2020 baseline year. The spike in FFY 2020 inspections was the result of respiratory protection investigations related to COVID-19. Of the 13 inspections performed in FFY 2024, 12 were completed at acute health care facilities and one was done at a nursing home facility.

Consultations:

There were no consultations performed during this period which is consistent with the 2020 baseline year.

Compliance Assistance:

During FFY 2024 there was one compliance assistance activity conducted, reflecting a decrease of 97% compared to the 34 conducted in the 2020 baseline year.

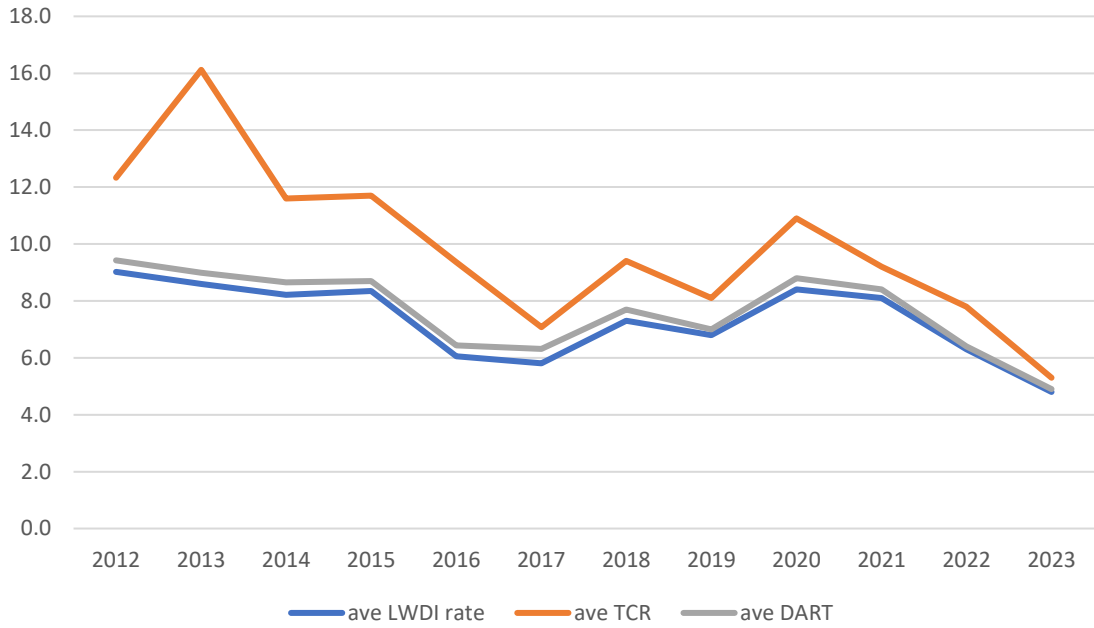
During FFY 2024, the Strategic Plan committee customized years of compiled Injury and Illness data on spreadsheets, with the intent to share multiple years of accumulated data with the facilities. The facilities could compare their rates with their NYS peers anonymously, including rate comparisons for specific causes of injuries. With this, the facilities could review how they fare against other public health care facilities on injuries due to safe patient handling, slips, falls, workplace violence, etc.

Injury Data Collection & Analysis:

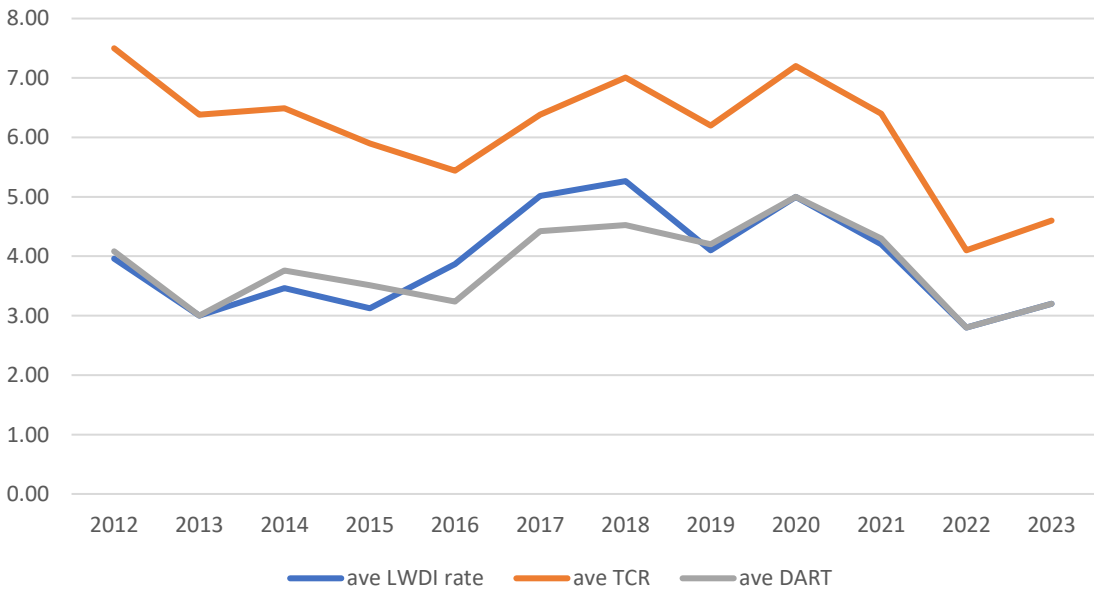
Each year, the committee spent considerable time compiling injury and illness trends within long term care and acute health care facilities. From the lost work day data obtained, the committee now has over ten years of lost work day data which has been used to categorize common injury types. Charts were created to help provide a comparison of the injury and illness data based on common injury types and the lost work days associated within each category. This data allows for an easy comparison of injury trends at specific facilities within these industries and provides a more focused comparison between New York public health care and long-term care facilities.

Data collection showed a trend of decreased injuries reported in long-term care facilities for all metrics. In acute care facilities, specifically public hospitals in New York State, the committee noted a trend of increased injuries reported due to patient handling, workplace violence, and ergonomic but a decrease in slips, trips, and falls. Below are examples of the different charts used to illustrate the trends from lost workdays for specific injury types.

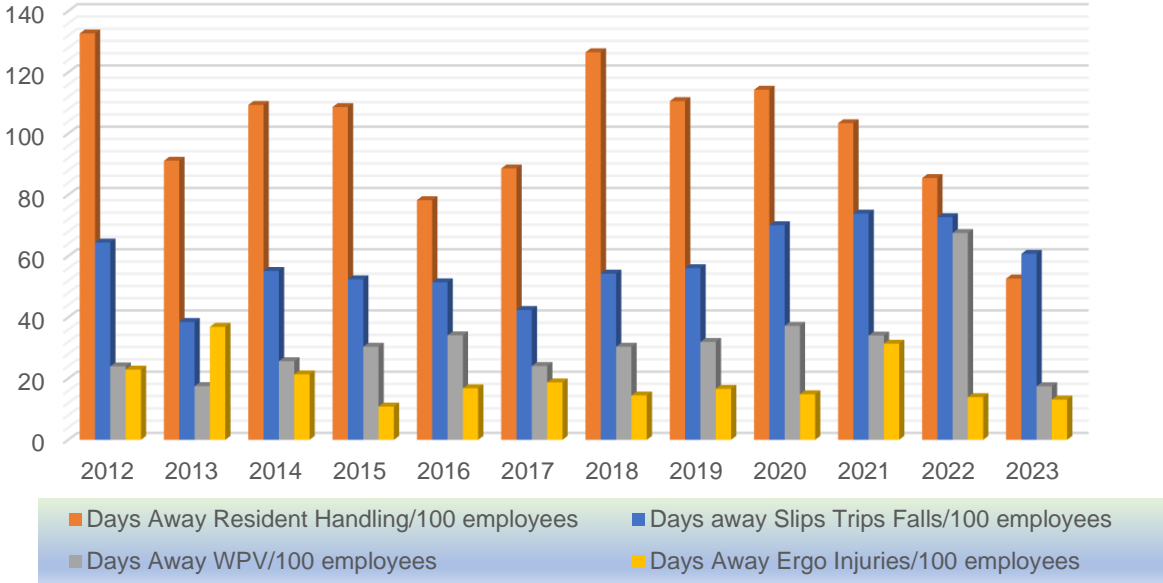
NYS Public Long-term Care Establishments Injury/Illness Incidence Rates



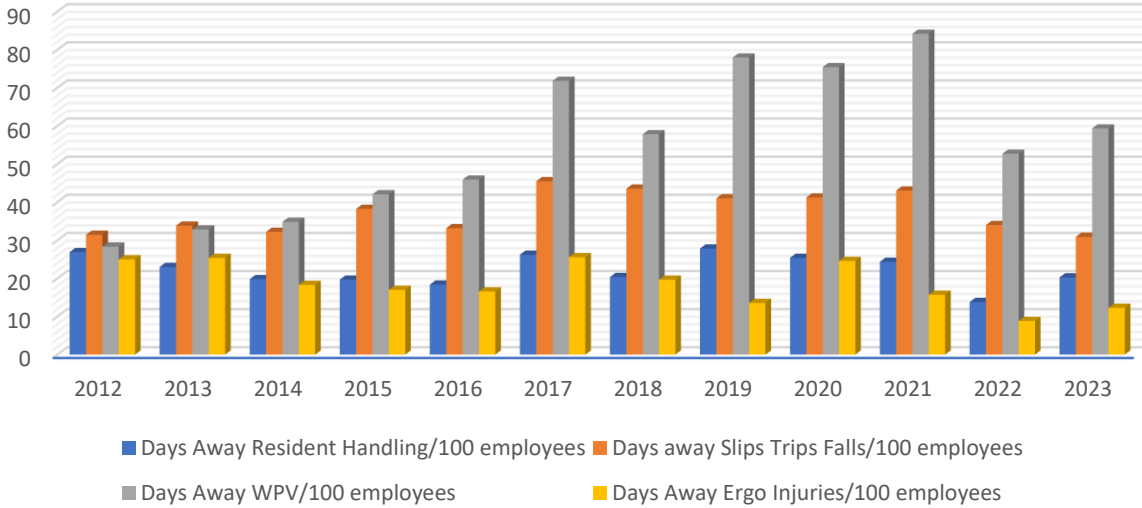
NYS Public Hospitals Injury/Illness Incidence Rates



Injury/Illness Severity as Days Away/100 Employees in NYS Public Long Term Care Establishments



Injury/Illness Severity as Days Away/100 Employees in NYS Public Hospitals



Miscellaneous Activities or Comments:

Each quarter, committee members participated in conference calls where members discussed current news pertaining to the industry, and developed strategies to address newly identified trends and issues. Members discussed the new Heat Stress National Emphasis Program (Heat NEP), as well as potential outreach and focused inspections applicable to healthcare settings.

Training:

Committee members did not conduct specific training to fulfill facility training requirements. Training successes were tied in with the Safe Patient Handling Conferences, where in the past industry experts were invited to participate by presenting on their areas of expertise. An informal training approach was used when committee members interacted with facility staff and discussed injury and illness prevention strategies.

Future Activities Planned:

The process of soliciting, compiling, and trending each year's Injury and Illness data consumes significant Strategic Plan resources. However, the awareness provided by the data is crucial for the committee's ability to develop new strategies for changing trends. The committee has compiled over ten years of injury data, categorized by common injuries for each facility. Efforts will continue to share the injury and illness data they have compiled with the long-term care facilities and acute public hospitals.

Secondary Focus Area: Correctional Institutions (NAICS 92214)

A secondary focus area was initiated with the New York State Department of Corrections and Community Supervision (NYSDOCCS) due to elevated BLS injury and illness rate trending. As a result of focused outreach, a partnership was formed with the employer and representatives from their Workers' Compensation insurance provider, the New York State Insurance Fund (NYSIF).

NYSIF previously completed the collection and compilation of five years of loss data for NYSDOCCS. A meeting was held with representatives from the NYSDOCCS health and safety team and NYSIF to review and discuss five-year claim loss data and potential causal/contributing factors. This committee discussed: the positive effect of prompt reporting of claims; the top five incurred loss injury types and characteristics; camera installation effect; recordkeeping resources available at hubs; the availability of NYSIF's Risk Control Resource Center; the Fire Safety Officer role at facilities and training lieutenants for regions; and next steps. A report was shared with project members regarding key takeaways and prompted meetings to discuss next steps. Feedback indicated a need to involve additional and new representatives from NYSDOCCS leadership. When BLS released CY 2023 injury and illness data in November 2024, data for this industry sector was not published as it had been previously.

State Government Correctional Institutions (NAICS 92214) TRC and DART

Year	Baseline (2019)	2020	2021	2022	2023	% Change from 2019 Baseline Year
TRC	13.9	10.2	10.5	10.7	*	-23.0
DART	10.1	8.8	8.4	9.4	*	-6.9

Source: BLS and USDOL.

* Data not published by BLS for this year

Progress was made on the local outreach initiative to promote awareness and implementation at county correctional facilities. A fact sheet intended for correctional and secure treatment facilities was drafted, updated, and entered the final review stage prior to publication. Future planned activities include publication and dissemination of the fact sheet, seeking and engaging in outreach opportunities, and resuming meeting with partners from NYSDOCCS. Related activity is summarized in the following table.

State Government Correctional Institutions (NAICS 92214) FFY 2024 Activity Summary

Activity Description	FFY 2024	FFY2023
Enforcement Inspections *	40	23
Consultation Visits *	0	2
Compliance Assistance *	0	3

*Based on OIS Data

III. Mandated Activities

During FFY 2024, 38 PESH Compliance Safety and Health Officers (CSHOs) conducted 1,032 inspections, compared to the 870 inspections in FFY 2023 conducted by 39 CSHOs. This represented an 18.6% increase, which significantly exceeded the corollary projected from the number of CSHOs. Twenty-one safety staff conducted 673 inspections, compared to the 555 inspections in FFY 2023 conducted by 24 safety staff. Seventeen industrial hygiene staff conducted 359 inspections, compared to the 315 inspections in FFY 2023 conducted by 15 industrial hygiene staff.

A total of 1,845 enforcement violations were issued in FFY 2024, compared to 1,818 violations issued in FFY 2023, representing a slight increase. The average number of violations per inspection was 1.8 in FFY 2024, compared to 2.1 in FFY 2023.

Of the total number of violations issued during FFY 2024, there were 21 Failure to Abate, five willful, 20 repeat, 359 other than serious, and 1,440 serious violations. There were 161,907 employees covered by the inspections performed in FFY 2024.

PESH investigated 449 complaints in FFY 2024, compared to 289 complaints in FFY 2023, an increase of 55%. From FFY 2019 to 2021, the number of complaints decreased and then the trend reversed, steadily increasing over the last three years. The most recent increase is likely due to changes made during that period to complaint intake criteria and procedures. The percentage of complaint inspections of the total yearly inspections has generally trended upward – 17% in FFY 2017, 22% in FFY 2018, 24% in FFY 2019, 27% in both FFY 2020 and 2021, 32% in 2022, 33% in 2023, and 43% in 2024. Establishment of the centralized intake unit was supported by this data and should lead to improvement in response and lapse times.

PESH conducted 30 fatality and/or catastrophe inspections in FFY 2024, compared to 17 in FFY 2023. This represents an increase of 76% over the previous year. The new Enforcement Case Coordinator position is intended to improve the quality, consistency, and timeliness of fatality inspections.

PESH received 82 discrimination claims in FFY 2024, compared to 37 discrimination claims in FFY 2023. Sixty of these cases were dismissed as non-merit and no cases were settled or determined to have merit. Twenty-two of the FFY 2024 cases were pending at the close of the fiscal year, compared to 26 at the close of the previous year, which is a reduction of 15%. During FFY 2024, PESH created and filled three dedicated discrimination positions to which new cases will be assigned. Unlike past practice, these investigators will not have collateral duties and can focus exclusively on their discrimination casework. Cases assigned to CSHOs prior to this program change will be resolved by the CSHO. PESH management continued to resolve pending cases and work closely with the region for assistance and guidance as needed. This process improved both the tracking and closure of open cases.

During FFY 2024, PESH conducted 40 consultations, compared to 53 in FFY 2023, a 25% decrease. This trend correlates to the reduction in consultation staffing compared to previous years, due to losses from retirement and priority of resource allocation as compared to enforcement program needs. Following the mandate to strictly separate enforcement and

consultation functions, newly assigned staff could not begin consultation activities until open enforcement and discrimination cases had been transferred or completed. The activity goals should therefore be adjusted based on the number of active consultants, as opposed to the reported staff allocation in the grant. Staffing level varied throughout the year because changes occurred after the start of the FFY. The following staffing data has been reported to account for the amount of time the roles were filled: during FFY 2024 there were 1.5 active consultants, including 1.25 health and 0.25 safety positions.

PESH tracks Compliance Assistance activities for both enforcement and consultation. During FFY 2024, there were 225 Compliance Assistance activities conducted by PESH consultants and 23 compliance assistance activities performed by PESH enforcement staff. The total compliance assistance activities for FFY 2024 were 248, a 6% decrease compared to 265 of the prior year. The OIS now captures data regarding the total number of employees directly reached (formerly *attended*) and potentially reached (formerly *affected*) by Compliance Assistance activities. For Enforcement Compliance Assistance activities, the number directly reached was 740, and the number potentially reached was 634. By contrast, for Consultation Compliance Assistance activities, the number directly reached was 4,374 with 4,207,503 potentially reached. The stakeholder directory developed in FFY 2022 continued to be updated with additional and amended contacts, and was used to disseminate notices on Heat NEP updates, proposed rulemaking, and standards adoption activity.

There were 21 contested cases in FFY 2024, 15 in FFY 2023, 14 in FFY 2022, and 13 in FFY 2021, representing a steady increase each year. During FFY 2024, 17 informal conferences were conducted. PESH penalties billed during FFY 2023 totaled \$264,098 and penalty collection for the year totaled \$55,822.

During FFY 2024, PESH received and responded to five new Complaints About State Program Administration (CASPA). All of the CASPAs concerned one employer, raising issues specific to PESH procedures and results of individual cases. PESH worked together with OSHA on each of them, with three of the cases closed during the year received. Where applicable, PESH used these CASPAs to identify areas for process improvement.

In FFY 2024, enforcement and consultation staff attended in-person training at the OSHA Training Institute (OTI). OTI courses and the number of staff that attended (in parentheses) are noted below. New staff who were hired during the pandemic and attended virtual courses will be enrolled in the in-person versions of the virtual courses as soon as possible, pending availability and scheduling. This is to ensure that they are not disadvantaged and receive the same level of training as others. Additional internal staff training was also conducted in April 2024.

- 1000 Initial Compliance – (6)
- 1050 Intro to Safety Standards for Safety – (4)
- 1080 Health Hazard Awareness for Safety Officers – (8)
- 1230 Accident/Incident Investigation – (12)
- 1241 Intro to Health Standards – (3)
- 1260 Health Inspection Fundamentals – (4)
- 1280 Safety Awareness for IH – (1)
- 1310 Investigative Interviewing Tech – (12)
- 1410 Inspection Techniques and Legal Aspects – (6)

1421 Whistleblower Investigation Fundamentals – (4)
1500 Intro to On-site Consultation – (1)
2080 Cranes and Materials Handling in GI – (1)
2200 Industrial Noise – (4)
2210 Principles of Industrial Ventilation (1)
2260 PRCS – (3)
2350 Expanded Health Standards – (2)
2351 Expanded Health Standards Virtual – (2)
2450 SHMS – (2)
2540 Machine Guarding & LOTO – (4)
3010 Excavation, Trenching, & Soil Mechanics – (2)
3090 Electrical Standards – (7)
3110 Fall Protection – (1)
3190 Electrical Power Generation, Transmission, & Distribution – (1)
3220 Applied Welding Principles – (3)
3320 Combustible Dust Hazards and Control – (1)

Currently two CSHO positions are being filled. Further, the need for additional positions was identified during a strategic meeting held in November 2023. Evaluation of civil service item numbers and funding is underway for those positions.

IV. Special Measures and Accomplishments

PESH staff attended the OSHSPA Winter (Tennessee), Spring (New Jersey) and Fall (Massachusetts) meetings during FFY 2024.

Beginning in FFY 2023, PESH leadership initiated re-envisioning the structure and systems within PESH. PESH is committed to re-envisioning work with the goals of:

- Continuously improving inspection and consultation quality.
- Bolstering enforcement.
- Serving customers.
- Developing staff.
- Increased transparency.
- Improving work processes to reduce lapse time.

Recent improvements include:

- PESH issued its first Severe Violator Enforcement Program (SVEP) case in November 2023 when four willful violations were cited following a work zone struck-by-vehicle fatality.
- Significant progress was made by the Enforcement Case Coordinator in working with inspectors and supervisors to bring a number of aged fatality cases to completion. An assistant position was added to further improve the efficiency and effectiveness of the role and process.

- On January 4, 2024, PESH put organizational change plans into action to formally separate enforcement and consultation program functions. Steps taken include amending the organizational chart, designating a Consultation Program Manager, and partitioning the review process.
- The Central Intake Unit worked with leadership to develop a new online complaint form, which was implemented as of January 17, 2024.
- Refinement of case management procedures to ensure timely feedback and tracking at all levels.
- An analyst position was hired in the New York City location and PESH worked to train this new employee to help with many administrative activities, as well as OTI registrations, stats generation, and running reports. The benefits of the new analyst position in NYC continue to grow as this team member is trained and takes on additional program support functions, such as weekly/monthly report generation and conducting analysis in support of district/statewide case management, as well as improving the quality of reports and the efficacy of the process.
- PESH has continued its statewide training program, holding a Spring staff meeting in Suffern, NY April 9-11, 2024, with participation of Region staff. The training continued to focus on improving the technical, writing, and interview skills of PESH Inspectors. Also included in this event was a specially crafted session titled Assertiveness in Action: Strategies for Effective Enforcement Communication. Part of the training continued to reinforce some back-to-basics training focused on inspection procedures and casefile documentation. The training was designed to address program-specific issues, bridge the skills gap between the training offered at OTI and implementation at PESH, and to address ongoing issues from the Federal Annual Monitoring and Evaluation, Corrective Action Plan, and CASPAs.
- A project involving the standardization of field inspection forms was completed and the next step of digitizing the forms was started. Staff pilot tested Notability software to increase user friendliness and effectiveness of iPads for field staff.
- PESH inspectors are strongly encouraged to evaluate all hazards, regardless of whether an OSHA standard applies, and to consider general duty clause violations or hazard alert letters where appropriate. Staff are being re-trained on how to write these violations and letters as improvements are applied to active cases. Citations issued in FFY 2024 include 25 general duty clause citations issued in 23 cases. Eight hazard alert letters were issued in FFY 2024 cases.
 - Relatedly, staff are being re-trained on writing willful classification of violations. Violations issued in FFY 2024 included five willful-serious violations issued under two separate cases (four willful citations in one construction fatality case and one in a general industry complaint case). PESH issued one fatality case in FFY 2024, which falls within the SVEP.
- Adoption of FFY 2015 and FFY 2023 Federal Standard Number 1904 – Occupational Injury and Illness Recording and Reporting Requirements was addressed by revision of the

applicable parts of 12 NYCRR Part 801, which went into effect on July 31, 2024. Stakeholders were kept informed of the process through website updates.

- PESH conducted extensive outreach related to the expansion of the NYS Workplace Violence Prevention Law to primary and secondary public schools. PESH developed a program template, training templates, Frequently Asked Questions, and a Fact Sheet for use by all employers, not only schools. Updates were made to the PESH Workplace Violence Prevention webpage and there was extensive communication with stakeholders on the equal change to this law. Active outreach continued with employers, unions, State Education Department, Boards of Cooperative Education Services (BOCES), and other involved parties through virtual meetings, ongoing planning for statewide and regional webinars, and improving the accessibility of consultation services. Webinars and in-person presentations were conducted for the NYS Education Department, NYS Charter Schools Association, Association of Educational Safety and Health Professionals (AESHP), CSEA Annual Health and Safety Conference, Association of School Business Officials and New York State Association of School Attorneys Expert Panels, effectively reaching thousands of stakeholders. Planning commenced for a series of seminars in Spring 2025 with the host/sponsor (Utica National), AESHP/BOCES, and New York State United Teachers. Early and frequent outreach during the rollout phase has paid big dividends in terms of continued partnership with stakeholders.

As per the guidance of OSHA, many of the changes made this past year, have been done utilizing a directive or memo. Following a period of implementation, these will then be incorporated into a Field Operation Manual update.

In summary, PESH has been working towards continuous improvement, recovering from impacts of the pandemic, restoring trained staffing following a long hiring freeze, and keeping pace with changing customer needs with the ultimate priority of protecting workers. PESH is evaluating the work, processes, and organizational structure with improvement in mind. PESH is working collaboratively with OSHA and state plans partners to identify best practices and ensure that both requirements are met and New Yorkers are protected.