



# Off-Site (Letter) Investigations

**Zulfiquar “Ali” Merchant**  
December 13, 2024



# Cal/OSHA takes Complaints from employees and their representatives very seriously



# Updates

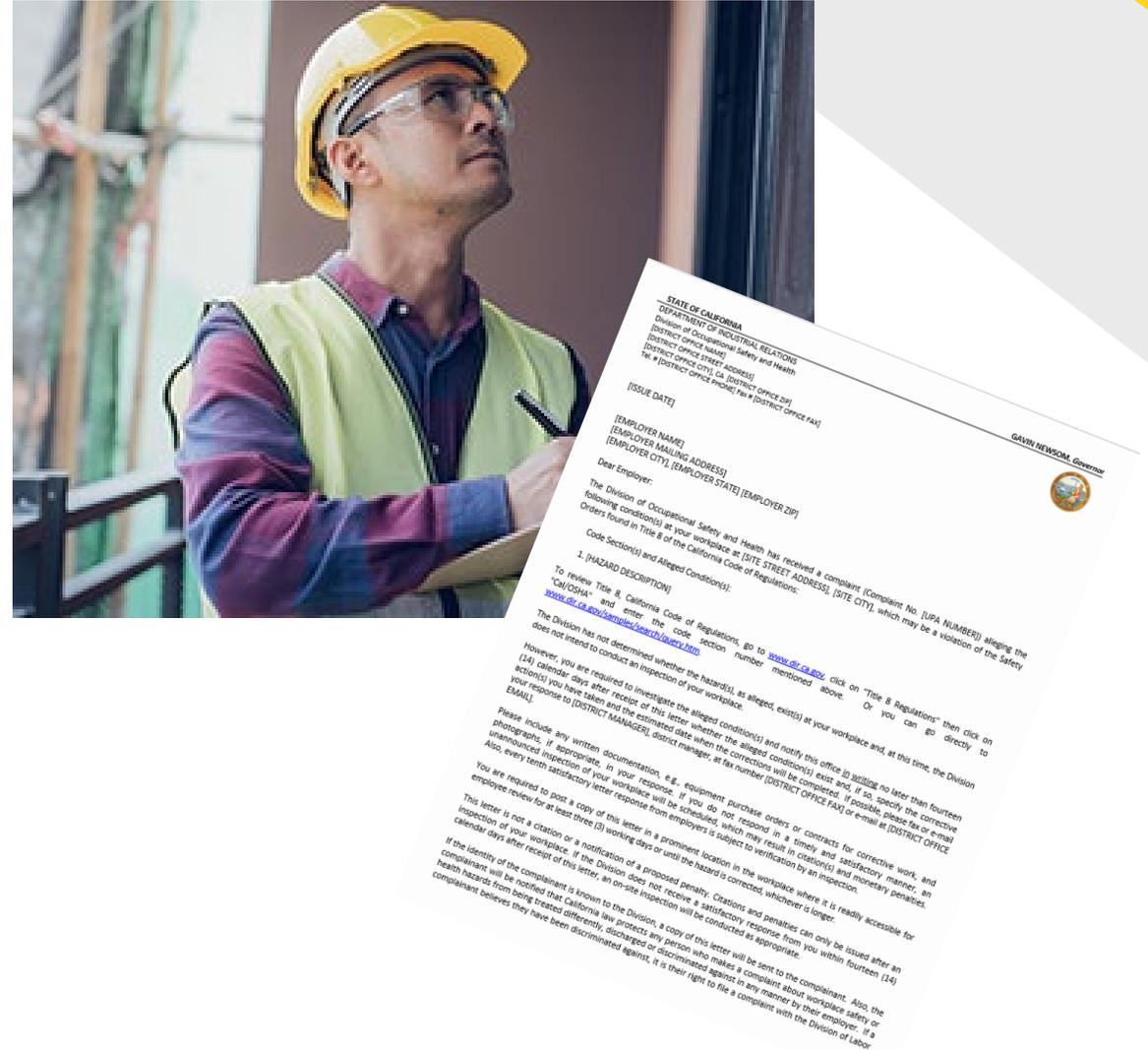
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Cal/OSHA DMS  
Digital  
Management  
Systems

Updating the  
Complaint Policy  
& Procedures

# How Does Cal/OSHA Respond to Complaints?

- On-site inspection
- Off-site investigation, also known as a “phone/fax letter investigation.”



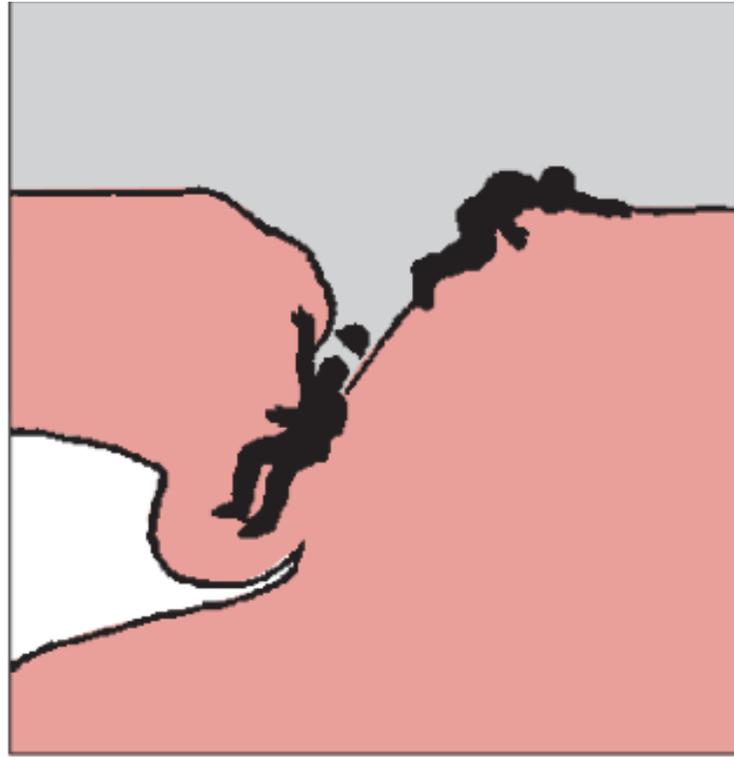
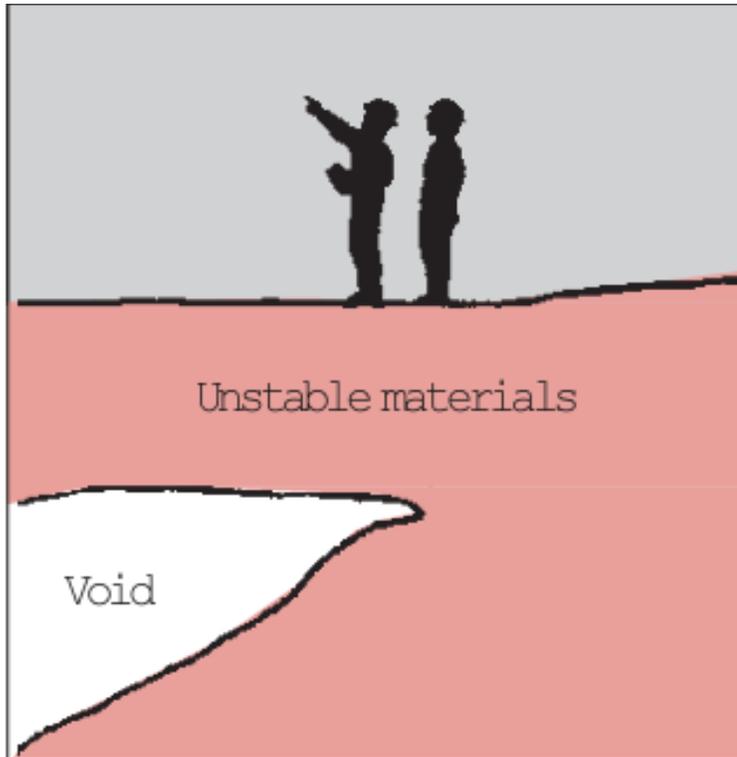
# Onsite Inspection

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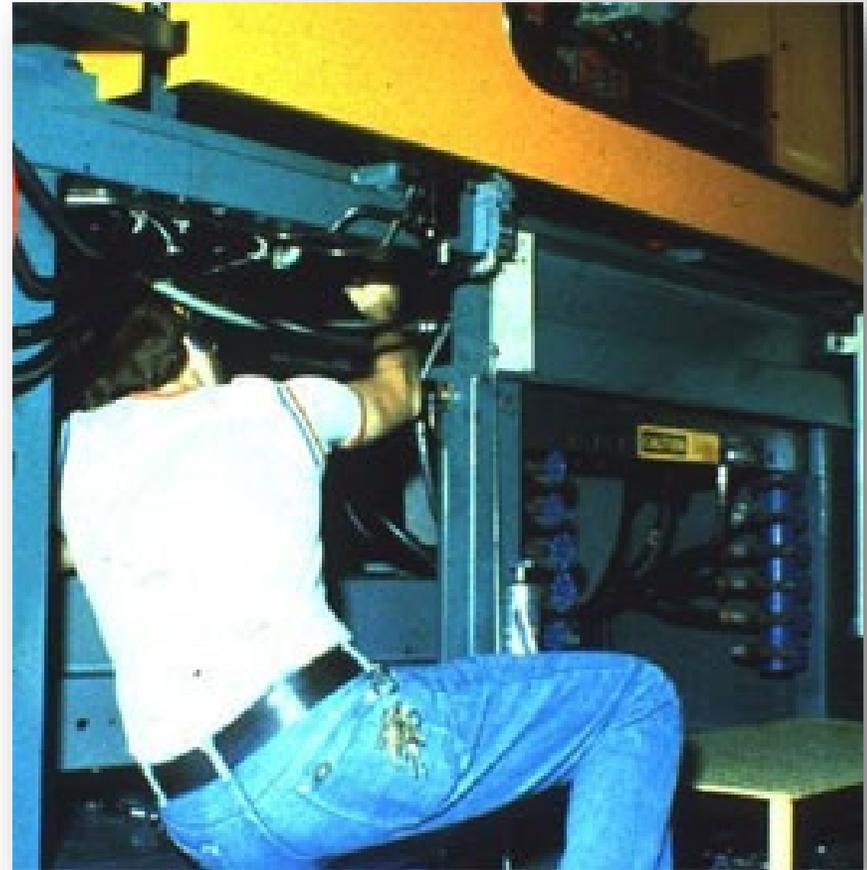
## Criteria:

- Fatalities
- Serious physical harm
- Imminent dangerous situations; and
- Situations where the employer provided an inadequate response to a phone/fax letter investigation.

# Cave-in and Engulfment Hazards



# Machine Guarding and Lock/Out Tag



# Fall Hazards



# Heat Illness



**PROVIDE YOUR EMPLOYEES  
WATER**

# District Manager Reviews All Complaints

## Cal/OSHA receives a complaint



Cal/OSHA



## District Manager Question:

- Is it appropriate to assign as a letter investigation?



# Cal/OSHA Calls Employer /Sends Letter



## STATE OF CALIFORNIA

GAVIN NEWSOM, Governor

DEPARTMENT OF INDUSTRIAL RELATIONS  
Division of Occupational Safety and Health  
[DISTRICT OFFICE NAME]  
[DISTRICT OFFICE STREET ADDRESS]  
[DISTRICT OFFICE CITY], CA [DISTRICT OFFICE ZIP]  
Tel. # [DISTRICT OFFICE PHONE] Fax # [DISTRICT OFFICE FAX]



[ISSUE DATE]

[EMPLOYER NAME]  
[EMPLOYER MAILING ADDRESS]  
[EMPLOYER CITY], [EMPLOYER STATE] [EMPLOYER ZIP]

Dear Employer:

The Division of Occupational Safety and Health has received a complaint (Complaint No. [UPA NUMBER]) alleging the following condition(s) at your workplace at [SITE STREET ADDRESS], [SITE CITY], which may be a violation of the Safety Orders found in Title 8 of the California Code of Regulations:

Code Section(s) and Alleged Condition(s):

1. [HAZARD DESCRIPTION]

To review Title 8, California Code of Regulations, go to [www.dir.ca.gov](http://www.dir.ca.gov), click on "Title 8 Regulations" then click on "Cal/OSHA" and enter the code section number mentioned above. Or you can go directly to [www.dir.ca.gov/samples/search/query.htm](http://www.dir.ca.gov/samples/search/query.htm).

The Division has not determined whether the hazard(s), as alleged, exist(s) at your workplace and, at this time, the Division does not intend to conduct an inspection of your workplace.

However, you are required to investigate the alleged condition(s) and notify this office in writing no later than fourteen (14) calendar days after receipt of this letter whether the alleged condition(s) exist and, if so, specify the corrective action(s) you have taken and the estimated date when the corrections will be completed. If possible, please fax or e-mail your response to [DISTRICT MANAGER], district manager, at fax number [DISTRICT OFFICE FAX] or e-mail at [DISTRICT OFFICE EMAIL].

Please include any written documentation, e.g., equipment purchase orders or contracts for corrective work, and photographs, if appropriate, in your response. If you do not respond in a timely and satisfactory manner, an unannounced inspection of your workplace will be scheduled, which may result in citation(s) and monetary penalties. Also, every tenth satisfactory letter response from employers is subject to verification by an inspection.

You are required to post a copy of this letter in a prominent location in the workplace where it is readily accessible for employee review for at least three (3) working days or until the hazard is corrected, whichever is longer.

This letter is not a citation or a notification of a proposed penalty. Citations and penalties can only be issued after an inspection of your workplace. If the Division does not receive a satisfactory response from you within fourteen (14) calendar days after receipt of this letter, an on-site inspection will be conducted as appropriate.

If the identity of the complainant is known to the Division, a copy of this letter will be sent to the complainant. Also, the complainant will be notified that California law protects any person who makes a complaint about workplace safety or health hazards from being treated differently, discharged or discriminated against in any manner by their employer. If a complainant believes they have been discriminated against, it is their right to file a complaint with the Division of Labor

# Employer Must Post Letter

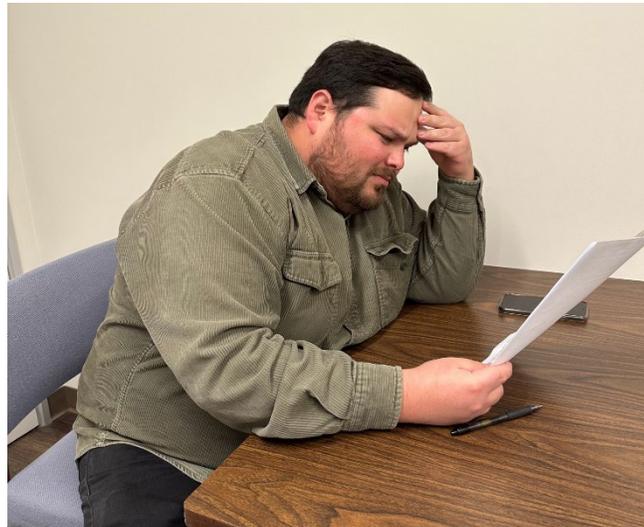
## Employer



## Employees



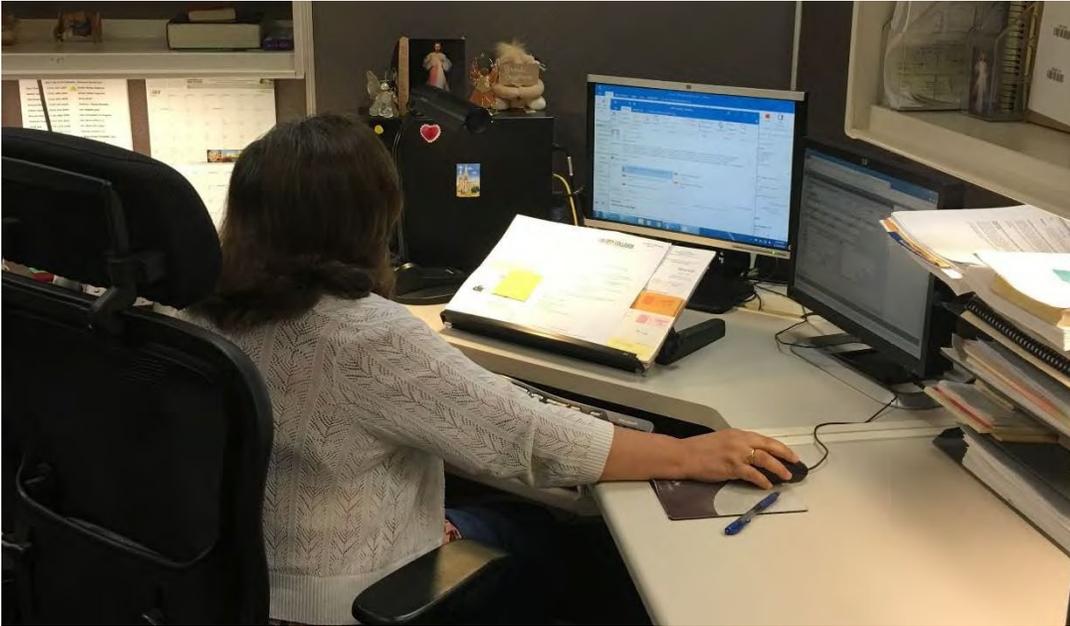
# Employer Addresses Hazards



## Employer Documents Corrections



# Cal/OSHA Staff Reviews Employer Response



The employer adequately addresses all hazards.



The employer does not adequately address all hazards.

# Unsatisfactory Letter Response

Call Employer for Additional Information



Conduct Onsite Inspection



# Satisfactory Letter Response

## Letter Mailed to Complainant with Employer Response

STATE OF CALIFORNIA  
DEPARTMENT OF INDUSTRIAL RELATIONS  
Division of Occupational Safety and Health  
[DISTRICT OFFICE NAME]  
[DISTRICT OFFICE STREET ADDRESS]  
[DISTRICT OFFICE CITY], CA [DISTRICT OFFICE ZIP]  
Tel. # [DISTRICT OFFICE PHONE] Fax # [DISTRICT OFFICE FAX]

GAVIN NEWSOM, Governor



[ISSUE DATE]

[COMPLAINANT NAME]  
[COMPLAINANT STREET ADDRESS]  
[COMPLAINANT CITY], [COMPLAINANT STATE] [COMPLAINANT ZIP]

Dear [COMPLAINANT FIRST NAME] [COMPLAINANT LAST NAME]:

On [UPA RECEIPT DATE], the Division of Occupational Safety and Health received your complaint (Complaint No. [UPA NUMBER]) of the following hazardous condition(s) at [EMPLOYER NAME] [SITE STREET ADDRESS] in [SITE CITY]:

[HAZARD DESCRIPTION]

[EMPLOYER NAME] has advised the Division that the hazard(s) you complained about has/have either been identified and corrected and/or determined not to exist. **A copy of the employer's response is enclosed.**

Based on this information, the Division believes that the complaint can be closed. **If you do not agree with these findings, please contact me within ten (10) days of the date of this letter.** If I do not hear from you, I will assume that the hazard(s) has/have been adequately investigated and/or corrected and will close the complaint.

Thank you for your concern about workplace safety and health.

Sincerely,

[DISTRICT MANAGER NAME]  
District Manager

/[TYPIST INITIALS]

enclosure(s): Employer response letter(s)  
reference: Complaint No. [UPA NUMBER]

## Complainant Reviews and Responds



# Questions

