

Kim Reynolds, Governor  
Adam Gregg, Lt. Governor  
Rod A. Roberts, Labor Commissioner

IOWA  
**WORKFORCE**  
DEVELOPMENT

*Smart. Results.*

**Division of Labor**

April 16, 2021

Iowa Federation of Labor, AFL-CIO  
Charles Wishman, President  
2000 Walker Street  
Suite A  
Des Moines, IA 50317

Dear Mr. Wishman,

Enclosed please find a copy of the citation which was issued to Iowa General Assembly, regarding unsafe working conditions.

You might have listed conditions on your complaint that are not addressed in the citation. The complaint items may not have been within the scope of our jurisdiction or they may not have existed during the inspection.

Please call my office if you have any questions.

Sincerely,



Russell Perry,  
Iowa OSHA Administrator

Enclosure

Cc: Case File# 06399 (1512266)



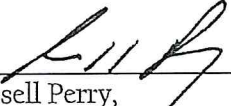
IOWA OSHA  
Expedited Informal Settlement Agreement (EISA)

In the Matter of:     Iowa General Assembly  
                              and its successors  
                              1007 East Grand Ave  
                              Des Moines, IA 50319

Inspection #: 1512266     C.F. #: 06399

The Employer and the Iowa Occupational Safety and Health Administration (Iowa OSHA) agree to settle this matter as follows:

1.     The Employer agrees to correct the violations as cited in the above citation or as amended below.
2.     The Employer agrees to complete the abatement form provided with the citation.
3.     The Employer will send the completed abatement form to Iowa OSHA. The Employer agrees to post a copy of the completed abatement form for 3 working days in the place where the citations were posted as described in paragraph 6 of this agreement.
4.     The Employer agrees to pay the reduced penalties totaling \$5,219.50 and send the payment to Iowa OSHA with this agreement. The employer agrees that failure to comply with the terms of this Agreement shall cause the penalty to revert to the initially proposed penalty of \$10,439.00.
5.     The Employer waives its right to contest the citations pursuant to Section 88.8(3) of the Iowa Occupational Safety and Health Act. It is understood and agreed that the citations as amended by this agreement shall be deemed a final order not subject to review by any court or agency.
6.     The Employer agrees to immediately post a copy of this Settlement Agreement in a prominent place at or near the location of the violation(s). This Settlement Agreement must remain posted until the violations cited have been corrected, or for 3 working days (excluding weekends and State and Federal Holidays), whichever is longer.
7.     The Employer agrees to continue to comply with the applicable provisions of the Iowa Occupational Safety and Health Act, and the applicable safety and health standards.

  
\_\_\_\_\_  
Russell Perry,

Iowa OSHA Administrator

For the Employer:

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Iowa OSHA**

150 Des Moines Street  
Des Moines, IA 50309  
Phone: (515) 242-5870  
Fax: (515) 281-7995  
www.iowaosha.gov  
osha@iwd.iowa.gov

## Citation and Notification of Penalty

**To:**

Iowa General Assembly  
and its successors  
1007 East Grand  
Des Moines, IA 50319

<b>Inspection Number:</b>	1512266
<b>Case File Number:</b>	6399
<b>CSHO:</b>	G6516
<b>Inspection Date(s):</b>	01/26/2021-04/02/2021
<b>Issuance Date:</b>	04/13/2021

**Inspection Site:**

1007 East Grand  
Des Moines, IA 50319

This Citation and Notification of Penalty (Citation) alleges violations of the Iowa Occupational Safety and Health Act and proposes penalties. Fifteen working days after you receive this Citation, the allegations and proposed penalties will become final unless you reach a settlement agreement with Iowa OSHA or contest the Citation. After 15 working days have passed, there will be no further chance to challenge these allegations and penalties.

Each violation described in this Citation is alleged to have occurred on or about the days the inspection was made unless another date is noted.

**Contest.** You may contest in writing all or part of the Citation. You may file a notice of contest yourself or hire an attorney to help you at your own expense.

**Notice to employees.** A copy of the Citation must be posted immediately in a prominent place near the location where each violation occurred. If posting near the site of each violation is not feasible, the Citation must be posted where it will be easily seen by all affected employees. The Citation must remain posted until the violation is corrected or for 3 working days, whichever is longer.

**Payment.** In the absence of a contest or settlement agreement, the penalties must be paid within 15 working days. Make your check or money order payable to "Iowa OSHA" and note the inspection number on it. Iowa OSHA does not agree to any restriction, condition, or endorsement put on any check or money order, and will cash the check or money order as if the restriction, condition or endorsement does not exist.



**Working days.** Working days are Monday through Friday excluding State and Federal holidays.

**Hazard correction.** In the absence of a contest or settlement agreement, each violation must be corrected by the date set in the Citation. You are required to provide documentation of abatement to your employees and to Iowa OSHA. The enclosed form and booklet will help you with this process.

**Employee right to contest.** An employee or employee representative may contest an abatement date set in the Citation. The contest must be mailed to Iowa OSHA within 15 working days of the employer's receipt of this Citation.

**Whistleblower protection.** An employer may not retaliate against an employee for cooperating with an OSHA inspector, filing an OSHA complaint, or exercising other rights under the OSHA law. An employee may file a complaint within 30 days after retaliation occurred.

**Guide to Iowa OSHA Citations.** *The Guide to Iowa OSHA Citations* covers topics related to this Citation in more detail. Please review it carefully.

**Informal conference.** You may request an informal conference or meeting to discuss any part of this Citation. Frequently, citations are settled at informal conferences. Call the number above right away if you wish to schedule an informal conference because after 15 working days an informal settlement agreement is not possible. If you schedule an informal conference you must complete the form on page 3 and post it where affected employees can see it.

## IOWA OSHA

Inspection Number: 1512266  
Inspection Date: 01/26/2021-04/02/2021  
Issuance Date: 04/13/2021

### Citation and Notification of Penalty

**Company Name:** Iowa General Assembly  
**Inspection Site:** 1007 East Grand, Des Moines, IA 50319

Citation 1 Item 1 Type of Violation: **Serious**

IAC 875 - Chapter 10

1910.305(b)(2)(i): Each outlet box in completed installations did not have a cover, faceplate, or fixture canopy:

(a) Room 305 - The faceplate of outlet E-8 CIR. 7 had been removed, exposing the terminal screws and incoming wire's copper conductors. This condition exposed employees to a shock/burn hazard and was observed on or about 1/28/2021.

**Date by Which Violation Must Be Abated:**

**Corrected During Inspection**

**Proposed Penalty**

**\$8,525.00**

Citation 2 Item 1 Type of Violation: **Other-than-Serious**

IAC 875 - Chapter 4

1904.4(a): The employer did not record each work-related fatality, injury or illness case that resulted in the general recording criteria on the OSHA Form 300 or equivalent:

(a) 1007 E Grand Ave Des Moines, IA - The employer did not keep OSHA 300 logs or equivalent records of injuries and illnesses. This condition may result in the employer not identifying injury/illness trends and was noted on or about 1/27/2021.

**Date by Which Violation Must Be Abated:**

**May 07, 2021**

**Proposed Penalty**

**\$957.00**

Citation 2 Item 2 a Type of Violation: **Other-than-Serious**

IAC 875 - Chapter 10

1910.1200(e)(1): Employer had not developed or implemented a written hazard communication program included the requirements outlined in 1910.1200(e)(1)(i) and (e)(1)(ii):

(a) 1007 E Grand Ave Des Moines, IA - The employer has not developed written and implemented a hazard communication program. Employees use chemicals such as Pure Hard Surface, Decon30, and RTU Disinfectant Cleaner. The information that would be contained in the program could help prevent employee exposure to harmful chemicals, assist in personal protective equipment selection, etc. This condition was noted on or about 1/26/2021.

**Date by Which Violation Must Be Abated:**

**May 07, 2021**

**Proposed Penalty**

**\$957.00**



IOWA OSHA

Inspection Number: 1512266  
Inspection Date: 01/26/2021-04/02/2021  
Issuance Date: 04/13/2021

Citation and Notification of Penalty

Company Name: Iowa General Assembly  
Inspection Site: 1007 East Grand, Des Moines, IA 50319

Citation 2 Item 2 b Type of Violation: **Other-than-Serious**

IAC 875 - Chapter 10

1910.1200(f)(6): The employer did not ensure that each container of hazardous chemicals in the workplace was labeled, tagged or marked with the identity of the hazardous chemical(s) contained therein:

(a) 1007 E Grand Ave Des Moines, IA - Secondary chemical containers of Decon30 were not labeled to identify the contents. Improperly labelled spray bottles of Decon30 were throughout the building and being used by employees as a sanitizer. This condition was observed on or about 1/27/2021.

Date by Which Violation Must Be Abated:

May 07, 2021

Proposed Penalty

\$0.00

Citation 2 Item 2 c Type of Violation: **Other-than-Serious**

IAC 875 - Chapter 10

1910.1200(g)(8): The employer did not maintain in the workplace copies of the required safety data sheets for each hazardous chemical, and did not ensure that they were readily accessible during each work shift to employees when they were in their work area(s):

(a) 1007 E Grand Ave Des Moines, IA - The employer did not have safety data sheets for chemicals employees had been provided. Employees use chemical such as Pure Hard Surface, Decon30, and RTU Disinfectant Cleaner. The information detailed on the safety data sheets would help prevent employee exposure to harmful chemicals and assist in personal protective equipment selection. This condition was noted on or about 1/26/2021.

Date by Which Violation Must Be Abated:

May 07, 2021

Proposed Penalty

\$0.00

  
\_\_\_\_\_  
Russell Perry  
Iowa OSHA Administrator

**Iowa OSHA**

150 Des Moines Street

Des Moines, IA 50309

Phone: (515) 242-5870

Fax: (515) 281-7995

www.iowaosha.gov

osha@iwd.iowa.gov

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**PENALTY SUMMARY**

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**Company Name:** Iowa General Assembly  
**Inspection Site:** 1007 East Grand, Des Moines, IA 50319  
**Issuance Date:** 04/13/2021

**Penalty Summary of Inspection Number:** 1512266

Citation 1 Item 1, Serious	\$8,525.00
Citation 2 Item 1, Other-than-Serious	\$957.00
Citation 2 Item 2a, Other-than-Serious	\$957.00
Citation 2 Item 2b, Other-than-Serious	\$0.00
Citation 2 Item 2c, Other-than-Serious	\$0.00

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<b>TOTAL PENALTIES:</b>	<b>\$10,439.00</b>
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Make check or money order payable to **"IOWA OSHA."** Please indicate the inspection number and DBA, if company name is different, on the remittance.

Iowa OSHA  
150 Des Moines Street  
Des Moines, IA 50309-1836  
Phone: 515-725-5621  
Fax: 515-281-7995  
Email: osha@iwd.iowa.gov  
www.iowaosha.gov

FOR OFFICE USE ONLY

Close: ☐ Yes ☐ No Follow up: ☐ Yes ☐ No

Diary sheet updated: ☐ Yes ☐ No

Database updated: ☐ Yes ☐ No

Inspection #: 1512266

Case file #: 06399

CSHO: G6516

Abatement due date: May 07, 2021

## Abatement Record

### Instructions

You have been cited for at least one Iowa OSHA violation. Unless you file a notice of contest or a petition for modification of abatement, the law requires the following:

1. Abate the cited conditions by the deadline on the Citation and Notification of Penalty (citation);
2. Send Iowa OSHA certification that the conditions have been abated;
3. Post this form for at least three working days near the site of each violation; and
4. Provide proof of abatement by sending photos, invoices, training records or similar documents

This form is to help you meet these requirements. Complete the form and return it to the address provided above. If the citation has more than one abatement deadline, you may need to complete this form more than once. To get an additional copy of this form visit [www.iowaOSHA.gov](http://www.iowaOSHA.gov). For more information about a notice of contest or petition for modification of abatement, please refer to the *Guide to Iowa OSHA Citations* booklet.

Citation	Item	Instance (if any)	Method of Abatement	Date Abated	Documentation
2	1				
2	2	a			
2	2	b			
2	2	c			

(You may continue the above table on another page and submit it with this form if needed)

### Abatement Certification

I certify all items above have been abated. I certify I will post a copy of this document near the place where each violation occurred and I will leave it posted for at least 3 working days. I certify the information on this form is accurate.

Iowa General Assembly

Employer Name

1007 East Grand Avenue

Des Moines

IA

50319

Employer Address

City

State

Zip Code

Print Name

Title

Signature

Date