

JSHQ

JOB SAFETY & HEALTH QUARTERLY

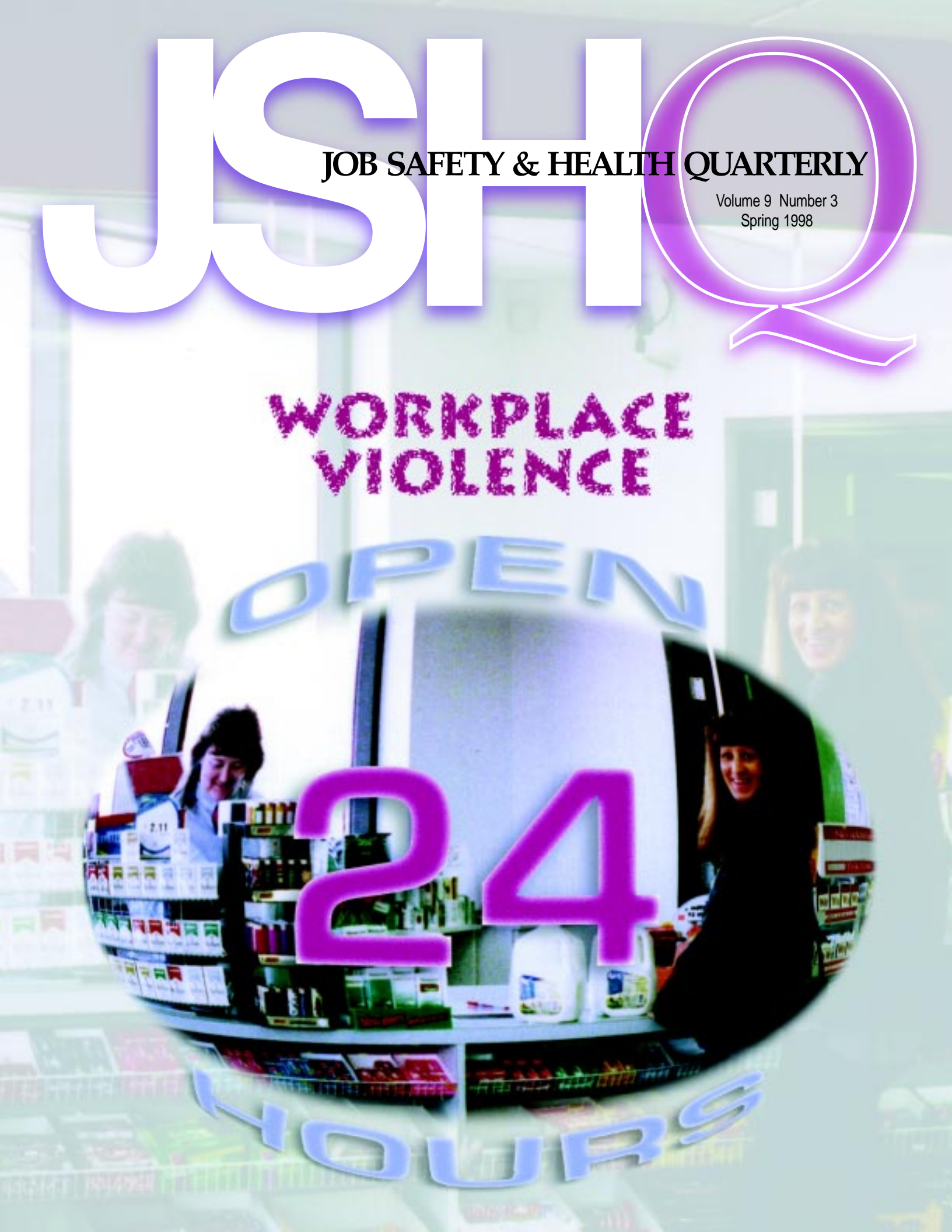
Volume 9 Number 3
Spring 1998

WORKPLACE
VIOLENCE

OPEN

24

24 HOURS



U.S. Department of Labor
Alexis M. Herman, Secretary



Occupational Safety and Health Administration
Charles N. Jeffress, Assistant Secretary

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From the Editor...

I think you'll find the spring issue of *JSHQ* interesting and informative. Our feature story covers the timely issue of workplace violence—one we hear about every day in the news. OSHA's recommendations for employers in the late-night retail industry reflect current best practices for protecting workers in these types of jobs.

We also begin the first part of a new series on state safety and health programs and provide the latest update on the revisions to OSHA's respiratory protection standard. Note also stories on the State of Minnesota's safety and health program, a summary of OSHA reform legislation before the Congress, and a brief overview of some recent agency reinvention efforts. For timely information on training, publications, and other events, see our *What's Happening?*, *Mark Your Calendar*, and *Q&A* columns. Our *Toolbox* and *FatalFacts* tear-out columns focus, on trenching and fall hazards.

Hope you enjoy the issue.

A handwritten signature in cursive script that reads "Anne Crown-Cyr".

Anne Crown-Cyr
Editor

P.S. Don't forget to give us your ideas by filling out the reader response card in this issue.

JSHQ

JOB SAFETY & HEALTH QUARTERLY
Volume 9 Number 3
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FEATURES



OSHA Seeks to Curb the Violence Against Late-Night Retail Workers

by Kerri L. Lawrence

16

Legislative Update: Congress Continues to Challenge OSHA

by Jennifer Liebman

22

Grassroots Worker Protection

How State Programs Help Ensure Safe and Healthful Workplaces

25

New Respirator Protection for 5 Million Workers in 1.3 Million Worksites

by John Steelnack

32

Bridging the Gap Between MNOSHA and Industry

by Erin Sullivan

38

OSHA Reinvention—A Proactive Approach

by Robert Pitulej

41



DEPARTMENTS



Assistant Secretary's Message

2

OSHA Q&A

3

What's Happening?

5

Mark Your Calendar

7

OSHA Semiannual Agenda—April 1998

14

The Toolbox

45

FatalFacts

47

ASSISTANT SECRETARY'S MESSAGE

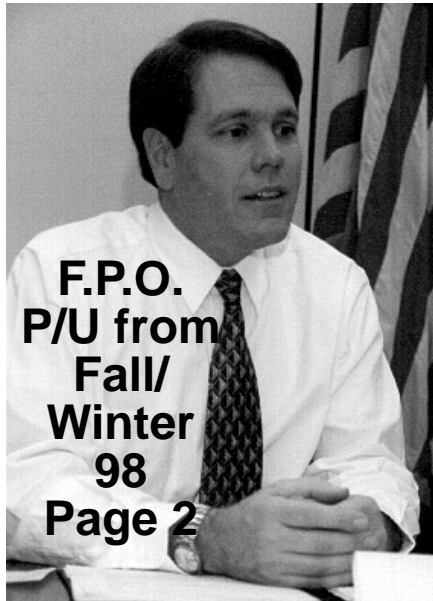
OSHA's goal is to send every worker home every day whole and healthy. To do that, we need to zero in on the specific hazards that result in harm to workers. And we must identify and assist employers with high rates of injuries and illnesses in improving their records—whatever industry they are in.

Profiled in this issue of *Job Safety & Health Quarterly* are our recommendations for preventing workplace violence in late-night retail establishments. Although workplace murders declined somewhat in 1996, homicide remains the number two cause of death for all workers. It's the leading cause for women.

Almost half of workplace homicides occur in the retail industry. Those who work in stores open late at night are particularly vulnerable. But they need not be defenseless. It is possible to forestall violence and protect law-abiding employees who are just doing their jobs.

Seneca, a Roman statesman, once said, "He who does not prevent a crime when he can, encourages it." Our recommendations are intended to discourage violence against retail clerks in a wide variety of ways. They provide a "toolbox" of options for employers to draw upon as they evaluate the risks present at their sites. We believe offering employers an array of practical suggestions is a sensible way to proceed.

These aren't new ideas. They've come from convenience stores, gas stations, liquor stores, and other facilities. Some are suggestions from law enforcement officials. Many make cash more difficult to get to discourage potential criminals. We believe that employers who consider them carefully will be able to reduce the risk that their



employees will come to harm at the hands of criminals.

In addition to concentrating on specific hazards, we want to identify individual companies that particularly need our help. That was the goal of OSHA's Cooperative Compliance Program. CCP would offer a reduced chance of inspection to employers with high injury and illness rates in exchange for establishing or improving a safety and health program for workers.

Unfortunately, as you know, CCP is on hold as the result of a judicial stay. The challenge to CCP brought by the U.S. Chamber of Commerce probably will not be resolved until early next year. So, we've moved to plan B.

This spring, we launched our interim inspection targeting system. The initial inspection pool includes about 3,300 companies in 99 industries with lost workday injury and illness rates higher than average for their specific industry.

So, for the moment, OSHA is headed **back** to the future. We now have a ground-breaking, old-fashioned inspection program in place. It's a step forward and a step back at the same time.

We're moving forward because we have worksite-specific data gathered from 80,000 employers who sent us their injury and illness data last year. That helps us pinpoint individual employers that need our help. But we've been forced to take a step back on the promise of partnership and the opportunity to multiply our impact that CCP offered.

We hoped to reach 12,000+ employers through CCP. And, in fact, more than 10,000 signed up to partner with us. The interim plan will limit us to the 3,300 workplaces we can inspect. But let me reassure you, despite this setback, we haven't given up on CCP. We expect to be vindicated in court. We expect to be able to offer partnership to employers who want to pursue a more effective strategy for protecting their workers and a collegial rather than adversarial relationship with OSHA.

Since OSHA was created 27 years ago, workplace fatalities have been cut in half. Occupational injury and illness rates have been declining for the past 5 years, dropping in 1996 to the lowest level since the Bureau of Labor Statistics began collecting this information.

But we can't stop. When nearly 50 American workers are injured **every minute** during a 40-hour workweek and more than 23 die each week, we know we need to do even better. We must continue to develop innovative strategies like CCP and target public attention on workplace tragedies such as murder. We must press on toward our goal of health and wholeness for all workers. And we will.

Charles N. Jeffress,
Assistant Secretary
of Labor for Occupational
Safety and Health

Q What is the Cooperative Compliance Program (CCP)?

A CCP is an enforcement program that offers worksites with injury and illness rates of more than twice the national average the opportunity to partner with OSHA to reduce workplace injuries and illnesses. Participants promise to establish or improve safety and health programs and find and fix hazards. In exchange, these worksites would receive substantial benefits, such as a reduced chance of inspection, possible penalty reductions, and technical assistance in correcting workplace hazards. Those who do not opt for partnership have no change in their status—they remain on the agency's primary inspection list.

Q What is the current status of CCP?

A On January 21, 1998, the U.S. Chamber of Commerce, the National Association of Manufacturers, the American Trucking Associations, and the Food Marketing Institute challenged CCP in the U.S. Court of Appeals for the District of Columbia Circuit Court, claiming that the program is unconstitutional. The court stayed the CCP effort in response to the Chamber's request and denied OSHA's request for expediting hearings. The court did, however, rule that the stay does not preclude OSHA from doing traditional enforcement and refused to stay an interim inspection program that OSHA began April 13, 1998. A final ruling on CCP is expected early next year.

Q Does OSHA have a standard on tuberculosis (TB), and if not, why is there a need for proposing one when the disease has been declining during the past 40 years?

A OSHA has no standard on TB, but published a proposed standard in the *Federal Register* on October 17, 1997. Although it is true that the rate of active TB has declined by 1 to 3 percent per year during the past 40 years, the resurgence in TB cases that occurred in the late 1980s and early 1990s demonstrates that the battle against TB has not been won, and that continued vigilance is necessary. Further, a new and deadly form of the disease, multidrug-resistant TB (MDR-TB), has emerged.

Although there has been an overall decline in the rate of active TB in the general U.S. population, the risk of infection among workers who care for clients and patients

The agency estimates that the proposed standard would prevent 90 percent of TB infections in hospitals and from 70 to 90 percent of TB infections in other work settings.

with suspected or confirmed infectious TB remains high. OSHA estimates that more than 5 million workers are at significant risk of contracting TB through their work in hospitals, homeless shelters, nursing homes, detention facilities, and other work settings.

OSHA's proposed standard would cover 5.3 million workers in



Family members of workplace violence victims endorse the agency's late-night retail recommendations. (From left to right: Charles N. Jeffress, OSHA Assistant Secretary; sisters Nancy Carothers and Jean Berrier, whose father was killed on the job; and Alexis M. Herman, Secretary of Labor.

guidelines and that compliance is even lower in other occupational settings.

It is important to note that OSHA relied heavily on the expertise of the CDC in preparing the proposed TB standard. The basic elements of the CDC's revised guidelines have been incorporated into the proposal. Although there are minor differences between OSHA's proposal and the CDC's guidelines, the vast majority of the provisions in the proposal closely track the recommendations of the CDC. The major distinction between the two is that the CDC's guidelines are voluntary; a final OSHA standard would be enforceable.

Q Today, workplace violence is more frequent and poses a serious safety and health hazard. Does OSHA have a new standard on workplace violence?

A No. OSHA did, however, recently publish *Recommendations for Workplace Violence Prevention Programs in Late-Night Retail Establishments*. The recommendations provide information about possible workplace violence prevention strategies and describe a variety of tools that may be useful to employers designing a violence prevention program. (See cover story on page 16.) For a copy of the recommendations, contact the U.S. Government Printing Office at (202) 512-1800, or visit OSHA's Home Page at www.osha.gov. **JSHQ**

about 102,000 establishments including hospitals, nursing homes, hospices, correctional facilities, homeless shelters, substance abuse centers, immigration detainment facilities, and laboratories. The agency estimates that the proposed standard would prevent 90 percent of TB infections in hospitals and from 70 to 90 percent of TB infections in other work settings.

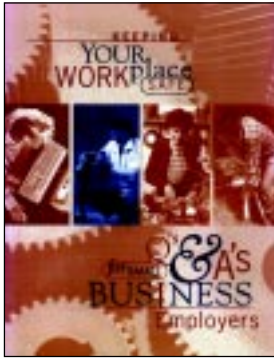
Q Isn't TB really a public health problem that would be better dealt with by the Centers for Disease Control and Prevention (CDC)?

A The CDC has issued "Guidelines for Preventing the Transmission of TB in Health Care Facilities," in addition to guidelines for the prevention of TB in homeless shelters, correctional facilities, and long-term care for the elderly. But compliance with these guidelines has been poor. OSHA estimates that only 50 percent of hospitals comply with current CDC

WHAT'S HAPPENING?

Publications

OSHA



Keeping Your Workplace Safe—Q's & A's for Small Business Employers assists small business employers in providing safe and healthful workplaces.

The booklet is available under **What's New** on OSHA's Web site at <http://www.osha.gov>.

NIOSH

The National Institute for Occupational Safety and Health (NIOSH) offers a variety of *Hazard Controls* that are based on research studies that show how worker exposures to hazardous agents or activities can be significantly reduced. The following reports can be obtained by calling NIOSH at 1-800-35-NIOSH (1-800-356-4674), or visit the NIOSH Home Page on the World Wide Web at <http://www.cdc.gov/niosh/homepage.html>.

- *Control of Exposure to Perchloroethylene in Commercial Dry Cleaning*, (HC16);
- *Control of Exposure to Perchloroethylene in Commercial Dry Cleaning (Substitution)*, (HC17);
- *Control of Exposure to Perchloroethylene in Commercial Dry Cleaning (Machine Design)*, (HC18); and
- *Control of Exposure to Perchloroethylene in Commercial Dry Cleaning (Ventilation)*, (HC19).

Perchloroethylene (PERC) is the most commonly used dry cleaning solvent and can enter the body through respiratory and dermal exposure. Symptoms associated with exposure include depression of the central nervous system; damage to the liver and kidneys; impaired memory; confusion; dizziness; headache; drowsiness; and eye, nose, and throat irritation. Repeated dermal exposure may result in dermatitis. NIOSH considers PERC a potential human carcinogen.

- *Control of Spotting Chemical Hazards in Commercial Dry Cleaning*, (HC20). Many hazardous chemicals are commonly used in dry cleaning shops to remove garment stains. Workers performing stain removal may be exposed to these toxic chemicals through skin absorption, eye contact, or inhalation of vapors. The primary hazard is dermatitis from chronic or acute exposure. Dilute hydrofluoric acid, found in some products that remove rust stains, may cause severe chemical burns with deep tissue destruction that may not be evident until several hours after prolonged contact.
- *Control of Fire Hazards in Commercial Dry Cleaning Shops Using Petroleum-Based Solvents*, (HC21). Dry cleaning shops contain all elements necessary for uncontrolled fires: fuels, ignition sources, and oxygen. Potential combustible materials include furniture, garments, lint, and portions of the building. The greatest risk of fire and explosion exists if the dry cleaning shop uses a petroleum-based solvent in dry cleaning machines. Ignition can be triggered by a burning or smoldering cigarette, heated equipment such as a



press, a frictional spark inside the solvent reclaimer cage, or even static electricity within the reclaimer.

- *Control of Ergonomic Hazards in Commercial Dry Cleaning*, (HC22). Ergonomic risk factors increase the threat of injury to the musculoskeletal system of the worker. Musculoskeletal disorders are caused by repetitive motions, awkward postures, excessive reaching, and precision gripping. In the dry cleaning industry, ergonomic risks occur during garment transfer, pressing, and bagging. These activities, combined with a high work rate and frequency, may cause physical discomfort and musculoskeletal problems for workers. Disorders can include damage to tendons, muscles, nerves, and ligaments of the hand, wrist, arm, shoulder, neck, and back.

VPP Update

Recent additions to OSHA's VPP *Star* list are Benevia, a Division of Monsanto, Manteno, IL; IBM Thomas J. Watson Research Center, Yorktown Heights, NY; Montenay Energy Resources of Montgomery County, Inc., Conshohocken, PA; Motorola, Inc., Paging Products Group, Boynton Beach, FL; Union Camp Corp., Decatur, AL; and The NutraSweet Kelco Co., Augusta, GA.

A recent addition to OSHA's VPP *Demonstration Program* is Vaughn Smith Construction at Kerr McGee Chemical Corp., Soda Springs, ID.

Recent additions to OSHA's VPP *Merit* list are Ethyl Petroleum Additives, Inc., Sauget, IL; Sherwin-Williams Co., Chicago, IL; 3M Corporation, Valley, NE; Potlatch Corp., Post Falls Particleboard, Post Falls, ID; and BP Exploration (Alaska) Inc., Endicott Island, AK.

International Paper, Mansfield, LA; Eastman Chemical Co., Texas Eastman Div., Longview, TX; IBM Corp., Endicott, NY; and Exxon Chemical Co., PARAMINS, Linden, NJ, have now been in the *Star Program* for 3 years.

Georgia Pacific, Plattsburgh, NY; Wenner Bread Products, Inc., Bayport, NY; Tropicana Products, Inc., Ft. Pierce, FL; and Equistar

Chemicals, Victoria, TX, advanced from *Merit* to *Star*.

This brings the total participants to 413 sites in the Federal VPP; 345 in *Star*, 55 in *Merit*, and 13 in *Demonstration*.

For more information on OSHA's VPP, write the OSHA Directorate of Federal-State Operations, 200 Constitution Avenue, N.W., Room N-3700, Washington, DC 20210; or call (202) 219-7266. See also **Programs and Services** on OSHA's Web site at www.osha.gov. **JSHQ**

Office of Cancer Communications • National Cancer Institute



Pap Tests

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4-A
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Pap tests can help find cervical cancer at an early stage — while it's still easier to cure.

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Persons with TTY equipment, dial 1 800-332-8615.

Visit NCI's website at <http://www.nci.nih.gov>

MARK YOUR CALENDAR

Conferences

National Institute of Standards and Technology (NIST)

NIST is an agency of the Department of Commerce's Technology Administration. For general information on all NIST conferences, contact Kathleen D. Kolmer or Patrice S. Soulangier, Public and Business Affairs, B116 Administration Building (101), NIST, Gaithersburg, MD 20899, USA, (301) 975-2776 at <http://www.nist.gov>.

On July 6-10, 1998, at the Washington Renaissance Hotel in Washington, DC, NIST will hold its conference on *Precision Electromagnetic Measurements* to provide a forum in which the international metrology community can discuss the most recent developments in physics and electrotechnology that apply to precision electromagnetic measurements and international standardization. For technical information, contact Norman Belecki at (301) 975-4223, (301) 926-3972 (fax), or email: norman.belecki@nist.gov. See also <http://www.eeel.nist.gov/cpem98>.

On July 7-14, 1998, at NIST in Boulder, CO, NIST will hold its *Coupled Ocean-Atmosphere Response Experiment (COARE)* conference to bring together oceanographers and meteorologists to review progress with the coupled problems which stimulated COARE, and to bring together and foster collaboration between observers and modelers in pursuit of the general objectives of COARE. For technical information, contact Brian Jackson at (303) 497-8663, or email: bjackson@ucar.edu. See also http://www.joss.ucar.edu/jos_psg/project/coare98.

On August 20-21, 1998 in Breckenridge, CO, NIST will hold its international workshop on *Optical Ferroelectric Materials* to discuss the science and technology of optical ferroelectric materials, emphasizing areas such as optical telecommunications and remote sensing. For technical information, contact Norman Sanford at (303) 497-5239, (303) 497-7671 (fax), or email: sanford@boulder.nist.gov.

Tennessee Safety Congress

On July 12-15, 1998, at the Opryland Hotel Complex in Nashville, TN, the Tennessee Safety Congress—co-sponsored by Tennessee OSHA and the Tennessee Chapters of the American Society of Safety Engineers (ASSE)—will hold its twenty-first annual Tennessee Safety Congress to share information and ideas for the development of programs and educational techniques and to ensure and promote good safety and health practices in the workplace. For more information contact Diane Johnson, Tennessee Safety Congress, P.O. Box 190601, Uptown Station, Nashville, TN 37219-0601, or call (615) 741-7143.

OSHA Training Institute Schedule

100 Initial Compliance Course

Introduces compliance personnel to the provisions of the *Occupational Safety and Health Act of 1970 (OSH Act)*. Includes an orientation to OSHA regulations, the *Field Inspection Reference Manual*, the *Technical Manual*, hazard recognition and control, and fundamental safety and health program elements.

Tuition: Federal and state personnel only

Dates: 8/25/98 - 9/4/98

121 Introduction to Industrial Hygiene for Safety Personnel

Focuses on the general concepts of industrial hygiene, including the recognition of common health hazards such as air contaminants and noise, hazard reevaluation through screening and sampling, and control methods for health hazards including ventilation and personal protective equipment.

Tuition: \$1,039

Dates: 8/11/98 - 8/21/98



141 Inspection Techniques and Legal Aspects

Describes investigative techniques related to OSHA compliance activities and to the formal requirements and processes of the legal system, including interviewing techniques, case file documentation, and workplace communication skills.

Tuition: Federal and state personnel only

Dates: 9/15/98 - 9/25/98

200 Construction Standards

Gives an overview of OSHA's requirements of the most frequently referenced standards. Also covers rights and responsibilities under the OSH Act, contesting situations, and OSHA inspection procedures.

Tuition: Federal and state personnel only

Dates: 9/22/98 - 10/2/98

200a Construction Standards

A shortened version of course 200 that gives an overview of OSHA's construction standards and of the requirements of the most frequently referenced standards.

Tuition: \$540

Dates: 8/3/98 - 8/7/98

201 Hazardous Materials

Covers OSHA general industry standards and consensus and proprietary standards relating to hazardous materials such as flammable and combustible liquids, compressed gases, LP-gases, and cryogenic liquids.

Tuition: \$1,039

Dates: 8/25/98 - 9/4/98

201a Hazardous Materials

A shortened version of course 201 covering OSHA general industry standards and consensus and proprietary standards relating to hazardous materials such as flam-

mable and combustible liquids, compressed gases, LP-gases, and cryogenic liquids.

Tuition: \$540

Dates: 7/13/98 - 7/17/98

202 Advanced Accident Investigation

Provides advanced information on accident investigation techniques and methods. Includes a review of sources of evidence and developing facts, findings, and conclusions.

Tuition: \$415

Dates: 9/15/98 - 9/18/98

203 Basic Electrical Principles

Covers basic principles of electricity, including Ohm's Law, series and parallel circuits, and adverse effects of electricity on the human body.

Tuition: \$415

Dates: 9/22/98 - 9/25/98

205 Cranes and Rigging Safety for Construction

Describes various types of mobile and tower cranes used in construction operations and provides information on crane operations, inspection, and maintenance.

Tuition: \$415

Dates: 9/1/98 - 9/4/98

220 Industrial Noise

Deals with problems of occupational noise such as nature, hazards, evaluation, and control. Includes physics of sound, effects of noise, occupational noise standards, noise instrumentation and measurement, frequency analysis, and noise control techniques.

Tuition: \$790

Dates: 7/23/98 - 7/31/98

222 Respiratory Protection

Includes the requirements for establishing, maintaining, and



monitoring a respirator program. Includes terminology, OSHA and ANSI standards, NIOSH certifications, and medical evaluation recommendations.

Tuition: \$790

Dates: 8/27/98 - 9/4/98

223 Industrial Toxicology

Focuses on the principles of toxicology as they relate to industrial processes. Includes recent toxicological data related to OSHA standards and current methods of toxicological testing as well as the chemical hazards encountered in the industrial environment.

Tuition: \$415

Dates: 7/14/98 - 7/17/98

225 Principles of Ergonomics

Provides an overview of ergonomic principles for the reduction of stresses and strains on the employee's body. Includes work physiology, vibration, anthropometry, cumulative trauma disorders, video display terminals, manual lifting, and temperature stress.

Tuition: \$415

Dates: 9/15/98 - 9/18/98

245 Evaluation of Safety and Health Programs

Assesses safety and health programs, emphasizing techniques to evaluate the thoroughness of the programs and effectiveness of their implementation. The application of the OSHA safety and health program guidelines is supplemented by OSHA policy, related directives, and the current field manual.

Tuition: \$415

Dates: 7/21/98 - 7/24/98

301 Excavation, Trenching, and Soil Mechanics

Presents detailed information on OSHA standards and on the safety aspects of excavation and trench-

ing. Introduces concepts such as practical soil mechanics and its relationship to the stability of shored and unshored slopes and walls of excavations.

Tuition: \$415

Dates: 8/18/98 - 8/21/98

305 OSHA Technical Update—Safety

Provides experienced safety and health compliance officers with current technical information on significant topics in the safety field as well as recent development in physical, electrical, and fire explosion hazard identification and abatement methods.

Tuition: \$415

Dates: 8/4/98 - 8/7/98

312 Hazardous Waste Site Inspection and Emergency Response for the Construction Industry

Increases knowledge of hazardous waste site operations, emergency response procedures, safety and health hazards, and enforcement issues for the construction industry.

Tuition: \$415

Dates: 7/14/98 - 7/17/98

323 OSHA Technical Update—Health

Provides information about health standards, national directives, toxicology, noise, ergonomics, respiratory protection, industrial hygiene instrumentation, and hazard abatement methods.

Tuition: \$415

Dates: 8/4/98 - 8/7/98

330a Safety and Health in the Chemical Processing Industries

A shortened version of Course 330 that provides the student with a survey of 29 CFR 1910.119, *Process Safety Management of Highly*



Hazardous Chemicals. Topics include an overview of processes, equipment, and materials commonly found in the chemical processing industries; safety and health hazard recognition; and effective hazard control techniques. Includes an overview of the Process Safety Management standard and OSHA compliance policies.

Tuition: \$540

Dates: 8/10/98 - 8/14/98

501 Trainer Course in Occupational Safety and Health Standards for General Industry

Teaches how the provisions of the *OSH Act* may be implemented in the workplace. Includes an introduction to OSHA's general industry standards and an overview of the requirements of the more frequently referenced standards.

Tuition: \$540

Dates: 8/10/98 - 8/14/98

510 Occupational Safety and Health Standards for the Construction Industry

Covers OSHA policies, procedures, standards, and construction safety and health principles as well as the scope and application of the OSHA construction standards.

Tuition: \$540

Dates: 7/27/98 - 7/31/98



OSHA Training Institute Education Centers

The OSHA Training Institute also has a program for other institutions to conduct OSHA courses for the private sector and other federal agencies. These include Eastern Michigan University/United Auto Workers, Ypsilanti, MI, (800) 932-8689; Georgia Technological Research Institute, Atlanta, GA, (800) 653-3629; Great Lakes OSHA Training Consortium, St. Paul, MN, (800) 493-2060; Keene State College, Manchester, NH, (800) 449-6742; Maple Woods OSHA Training Center, Kansas City, MO, (800) 841-7158; National Resource Center for OSHA Training, Washington, DC, (800) 367-6724; Niagara County Community College, Lockport, NY, (800) 280-6742; Red Rocks Community College/Trinidad State Junior College, Lakewood, CO, (800) 933-8394; The National Safety Education Center, DeKalb, IL, (800) 656-5317; Texas Engineering Extension Service, Mesquite, TX, (800) 723-3811; University of California, San Diego, CA, (800) 358-9206; and University of Washington, Seattle, WA, (800) 326-7568.

For tuition rates and registration information, contact the institution offering the courses, and see also OSHA's Web site at www.osha.gov.

600 Collateral Duty Course for Other Federal Agencies

Teaches how the provision of the *OSH Act*, Executive Order 12196, 29 CFR 1960, and 29 CFR 1910 may be implemented in the workplace and to effectively assist agency safety and health officers in inspection and abatement efforts.

Tuition: \$478

Dates: 7/20/98 - 7/24/98

601 Occupational Safety and Health Course for Other Federal Agencies

Designed for full-time federal agency safety and health officers or supervisors assigned responsibilities under Executive Order 12196 and CFR 1960.

Tuition: \$1,101

Dates: 7/27/98 - 8/7/98

To register for courses or to obtain a training catalog, write the OSHA Training Institute, 1555 Times Drive, Des Plaines, IL 60018; or call (847) 297-4913. See also OSHA Training and Registration on OSHA's Web site at www.osha.gov.

201a Hazardous Materials

Location: Georgia Technological Research Institute

Dates: 8/24/98 - 8/29/98

Location: Keene State College

Dates: 7/27/98 - 7/31/98

Location: Maple Woods OSHA Training Center

Dates: 8/17/98 - 8/20/98

Location: Niagara County
Community College
Dates: 7/20/98 - 7/23/98
9/28/98 - 10/1/98
Location: Red Rocks
Community College
Dates: 9/21/98 - 9/24/98
Location: University
of Washington
Dates: 7/27/98 - 7/30/98

204a Machinery and Machine Guarding Standards

Location: Eastern Michigan
University-United
Auto Workers
Dates: 9/21/98 - 9/25/98
Location: Georgia Technological
Research Institute
Dates: 8/10/98 - 8/14/98
Location: Great Lakes OSHA
Training Consortium
Dates: 9/15/98 - 9/18/98*
Location: Keene State College
Dates: 7/20/98 - 7/24/98
Location: Maple Woods OSHA
Training Center
Dates: 8/31/98 - 9/3/98
Location: Niagara County
Community College
Dates: 7/27/98 - 7/30/98
Location: Red Rocks
Community College
Dates: 8/3/98 - 8/6/98
Location: Texas Engineering
Extension Service
Dates: 7/6/98 - 7/10/98 (H)
Location: The National Safety
Education Center
Dates: 8/3/98 - 8/7/98
Location: University of Califor-
nia, San Diego
Dates: 7/20/98 - 7/23/98

225 Principles of Ergonomics

Location: Georgia Technological
Research Institute
Dates: 9/15/98 - 9/18/98
Location: Great Lakes OSHA
Training Consortium
Dates: 7/21/98 - 7/23/98

Location: Maple Woods OSHA
Training Center
Dates: 8/31/98 - 9/3/98
Location: National Resource
Center for OSHA
Training
Dates: 7/13/98 - 7/16/98
Location: Niagara County
Community College
Dates: 9/1/98 - 9/4/98
Location: Red Rocks
Community College
Dates: 9/9/98 - 9/11/98
Location: The National Safety
Education Center
Dates: 9/15/98 - 9/17/98
Location: University of Califor-
nia, San Diego
Dates: 8/17/98 - 8/20/98

226 Permit-Required Confined Space Entry

Location: Eastern Michigan
University-United
Auto Workers
Dates: 9/14/98 - 9/17/98
Location: Keene State College
Dates: 8/31/98 - 9/3/98
Location: Maple Woods OSHA
Training Center
Dates: 8/24/98 - 8/26/98
Location: National Resource
Center for OSHA
Training
Dates: 8/10/98 - 8/13/98
Location: Niagara County
Community College
Dates: 7/7/98 - 7/10/98
9/8/98 - 9/11/98
Location: Red Rocks
Community College
Dates: 9/2/98 - 9/4/98
Location: Texas Engineering
Extension Service
Dates: 8/17/98 - 8/19/98 (D)
Location: The National Safety
Education Center
Dates: 8/25/98 - 8/27/98
Location: University of Califor-
nia, San Diego
Dates: 9/14/98 - 9/16/98

309a Electrical Standards

Location: Maple Woods OSHA
Training Center
Dates: 7/6/98 - 7/9/98
9/14/98 - 9/17/98
Location: National Resource
Center for OSHA
Training
Dates: 7/27/98 - 7/30/98 (W)
Location: Niagara County
Community College
Dates: 8/3/98 - 8/6/98
Location: Red Rocks
Community College
Dates: 7/21/98 - 7/24/98
9/29/98 - 10/2/98
Location: University of Califor-
nia, San Diego
Dates: 7/13/98 - 7/16/98

500 Trainer Course in Occupational Safety and Health Standards for the Construction Industry

Location: Eastern Michigan
University-United
Auto Workers
Dates: 9/21/98 - 9/25/98
Location: Georgia Technological
Research Institute
Dates: 7/20/98 - 7/24/98 (TA)
Location: Keene State College
Dates: 8/10/98 - 8/14/98



Location: Maple Woods OSHA Training Center

Dates: 7/27/98 - 7/30/98
9/28/98 - 10/1/98

Location: National Resource Center for OSHA Training

Dates: 8/10/98 - 8/13/98
8/17/98 - 8/20/98 (W)
9/21/98 - 9/24/98

Location: Niagara County Community College

Dates: 7/6/98 - 7/9/98
9/7/98 - 9/10/98

Location: Red Rocks Community College

Dates: 7/6/98 - 7/9/98
8/10/98 - 8/13/98
9/14/98 - 9/17/98

Location: Texas Engineering Extension Service

Dates: 7/27/98 - 7/31/98 (S)
8/10/98 - 8/14/98 (D)
9/7/98 - 9/11/98**

Location: The National Safety Education Center

Dates: 8/24/98 - 8/28/98
9/21/98 - 9/25/98

Location: University of California, San Diego

Dates: 8/3/98 - 8/6/98
9/14/98 - 9/17/98

Location: University of Washington

Dates: 9/28/98 - 10/1/98

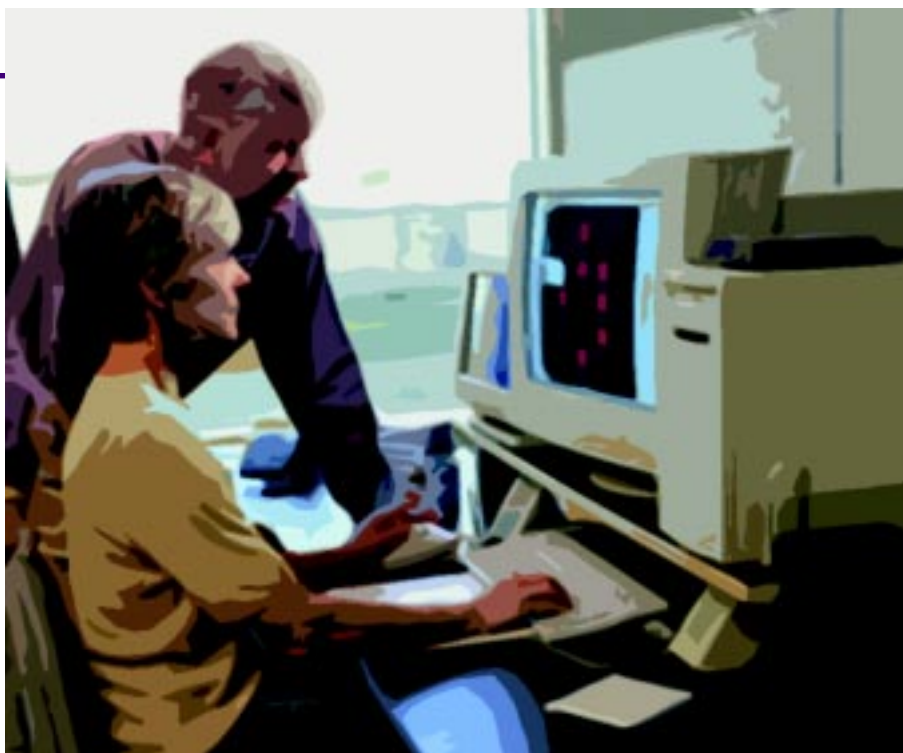
501 Trainer Course in Occupational Safety and Health Standards for General Industry

Location: Eastern Michigan University-United Auto Workers

Dates: 7/13/98 - 7/17/98
8/17/98 - 8/21/98***
9/14/98 - 9/18/98

Location: Georgia Technological Research Institute

Dates: 7/20/98 - 7/24/98 (TA)
9/21/98 - 9/25/98



Location: Great Lakes OSHA Training Consortium

Dates: 9/14/98 - 9/17/98

Location: Keene State College

Dates: 8/17/98 - 8/21/98
9/21/98 - 9/25/98

Location: Maple Woods OSHA Training Center

Dates: 8/3/98 - 8/6/98
9/21/98 - 9/24/98

Location: National Resource Center for OSHA Training

Dates: 8/3/98 - 8/6/98 (W)
9/14/98 - 9/17/98

Location: Niagara County Community College

Dates: 7/13/98 - 7/16/98
8/10/98 - 8/13/98
9/14/98 - 9/17/98

Location: Red Rocks Community College

Dates: 7/13/98 - 7/16/98
8/17/98 - 8/20/98
9/21/98 - 9/24/98

Location: Texas Engineering Extension Service

Dates: 7/6/98 - 7/10/98**
8/3/98 - 8/7/98**
8/24/98 - 8/28/98**
9/21/98 - 9/25/98 (D)

Location: The National Safety Education Center

Dates: 7/13/98 - 7/17/98
9/21/98 - 9/25/98

Location: University of California, San Diego

Dates: 7/27/98 - 7/30/98
9/21/98 - 9/24/98

Location: University of Washington

Dates: 7/20/98 - 7/23/98

502 Update for Construction Industry Outreach Trainers

Location: Eastern Michigan University-United Auto Workers

Dates: 8/10/98 - 8/12/98

Location: Georgia Technological Research Institute

Dates: 9/28/98 - 9/30/98

Location: Great Lakes OSHA Training Consortium

Dates: 8/19/98 - 8/21/98*
9/30/98 - 10/2/98*

Location: Keene State College

Dates: 8/24/98 - 8/26/98

Location: Maple Woods OSHA Training Center

Dates: 9/14/98 - 9/16/98

Location: National Resource Center for OSHA Training
 Dates: 9/28/98 - 9/30/98 (W)
 Location: Niagara County Community College
 Dates: 8/24/98 - 8/26/98
 Location: Red Rocks Community College
 Dates: 8/24/98 - 8/26/98
 Location: Texas Engineering Extension Service
 Dates: 7/27/98 - 7/29/98 (S) 8/10/98 - 8/12/98 (D)
 Location: University of California, San Diego
 Dates: 9/28/98 - 9/30/98
 Location: University of Washington
 Dates: 8/24/98 - 8/26/98

503 Update for General Industry Outreach Trainers

Location: Eastern Michigan University-United Auto Workers
 Dates: 7/20/98 - 7/22/98 9/21/98 - 9/23/98
 Location: Georgia Technological Research Institute
 Dates: 8/18/98 - 8/20/98
 Location: Great Lakes OSHA Training Consortium
 Dates: 8/19/98 - 8/21/98* 9/30/98 - 10/2/98*
 Location: Keene State College
 Dates: 8/3/98 - 8/5/98
 Location: Maple Woods OSHA Training Center
 Dates: 7/13/98 - 7/15/98 8/24/98 - 8/26/98
 Location: National Resource Center for OSHA Training
 Dates: 7/27/98 - 7/29/98 (W) 8/17/97 - 8/19/98
 Location: Niagara County Community College
 Dates: 8/25/98 - 8/27/98
 Location: Red Rocks Community College
 Dates: 8/19/98 - 8/21/98

Location: Texas Engineering Extension Service
 Dates: 8/3/98 - 8/5/98**
 Location: The National Safety Education Center
 Dates: 7/14/98 - 7/16/98
 Location: University of California, San Diego
 Dates: 8/10/98 - 8/12/98
 Location: University of Washington
 Dates: 8/31/98 - 9/2/98

510 Occupational Safety and Health Standards for the Construction Industry

Location: Keene State College
 Dates: 9/14/98 - 9/18/98
 Location: Maple Woods OSHA Training Center
 Dates: 9/21/98 - 9/24/98
 Location: National Resource Center for OSHA Training
 Dates: 7/20/98 - 7/23/98 9/14/98 - 9/17/98 (M)
 Location: Niagara County Community College
 Dates: 8/17/98 - 8/20/98
 Location: Texas Engineering Extension Service
 Dates: 7/20/98 - 7/23/98 (S)
 Location: The National Safety Education Center
 Dates: 8/10/98 - 8/14/98
 Location: University of California, San Diego
 Dates: 8/31/98 - 9/3/98
 Location: University of Washington
 Dates: 9/21/98 - 9/24/98

521 OSHA Guide to Industrial Hygiene

Location: Eastern Michigan University-United Auto Workers
 Dates: 7/13/98 - 7/17/98
 Location: Maple Woods OSHA Training Center
 Dates: 7/13/98 - 7/16/98 9/28/98 - 10/1/98

Location: National Resource Center for OSHA Training
 Dates: 7/13/98 - 7/16/98 (M)
 Location: Red Rocks Community College
 Dates: 7/27/98 - 7/30/98
 Location: University of California, San Diego
 Dates: 9/28/98 - 10/1/98
 Location: University of Washington
 Dates: 7/20/98 - 7/23/98****

600 Collateral Duty Course for Other Federal Agencies

Location: Great Lakes OSHA Training Consortium
 Dates: 7/20/98 - 7/23/98
 Location: Keene State College
 Dates: 9/28/98 - 10/1/98
 Location: Niagara County Community College
 Dates: 9/21/98 - 9/24/98
 Location: Red Rocks Community College
 Dates: 7/27/98 - 7/30/98
 Location: Texas Engineering Extension Service
 Dates: 8/10/98 - 8/14/98 (D)
 Location: University of California, San Diego
 Dates: 8/24/98 - 8/27/98
 Location: University of Washington
 Dates: 9/14/98 - 9/17/98 **JSHQ**

*Course scheduled at University of Cincinnati, Cincinnati, OH
 **Contact education center for course location
 ***Course scheduled at University of Findlay, Findlay, OH
 ****Course scheduled in Portland, OR
 (D) Course scheduled in Dallas Area
 (H) Course scheduled in Houston, TX
 (M) Course scheduled at Marshall University, Huntington, WV
 (S) Course scheduled in San Antonio, TX
 (TA) Course scheduled in Tampa, FL
 (W) Course scheduled at West Virginia University, Morgantown, WV.

Agenda

Published in April and October each year, the agenda includes all regulations expected to be under development or review by the agency during that period. The following list is from the agenda as published in the *Federal Register* 63(80) 22257-22275, April 27, 1998.

Prerules

Title and Regulation Identifier Number (RIN)*

Control of Hazardous Energy Sources (Lockout/Tagout) (Section 610 Review)
1218-AB59

Occupational Exposure to Ethylene Oxide (Section 610 Review)
1218-AB60

Process Safety Management of Highly Hazardous Chemicals
1218-AB63

Fire Brigades
1218-AB64

Grain Handling Facilities (Section 610 Review)
1218-AB73

Cotton Dust (Section 610 Review)
1218-AB74

*Office of Management and Budget (OMB) Regulation Identification Number. For copies of OSHA final rules published in the *Federal Register*, contact the Superintendent of Documents, Government Printing Office, Washington, DC 20402, for \$8.00 a copy prepaid. Subscriptions are available at \$651 per year. GPO products also can be ordered online at <http://www.gpo.gov>.

Proposed Rules

Longshoring and Marine Terminals (Parts 1917 and 1918)—Reopening of the Record (Tandem Lifts)
1218-AA56

Steel Erection (Part 1926) (Safety Protection for Ironworkers)
1218-AA65

Safety and Health Programs (for General Industry and Shipyards)
1218-AB41

Fire Protection in Shipyard Employment (Part 1915, Subpart P) (Phase II) (Shipyards: Fire Safety)
1218-AB51

Permissible Exposure Limits (PELS) for Air Contaminants
1218-AB54

Plain Language Revision of Existing Standards (Phase I)
1218-AB55

Nationally Recognized Testing Labs Programs: Fees
1218-AB57

Flammable and Combustible Liquids
1218-AB61

Fall Protection in the Construction Industry
1218-AB62

Revocation of Certification Records for Tests, Inspections, and Training
1218-AB65

Requirements to Pay for Personal Protective Equipment
1218-AB77

Consultation Agreements
1218-AB79

Final Rules

Respiratory Protection (Proper Use of Modern Respirators)
1218-AA05

Glycol Ethers: 2-Methoxyethanol, 2-Ethoxyethanol, and Their Acetates: Protecting Reproductive Health
1218-AA84

Recording and Reporting Occupational Injuries and Illnesses (Simplified Injury/Illness Recordkeeping Requirements)
1218-AB24

Powered Industrial Truck Operator Training (Industrial Truck Safety Training)
1218-AB33

register

Permit Required Confined Spaces
(General Industry: Preventing
Suffocation/Explosions in
Confined Spaces)
1218-AB52

Standards Improvement Project
1218-AB53

Long-Term Actions

Scaffolds in Shipyards (Part
1915—Subpart N) (Phase I)
(Shipyards: Safer Scaffolds)
1218-AA68

Access and Egress in Shipyards
(Part 1915, Subpart E) (Phase I)
(Shipyards: Emergency Exits
and Aisles)
1218-AA70

Accreditation of Training
Programs for Hazardous Waste
Operations (Part 1910)
1218-AB27

Prevention of Work-Related
Musculoskeletal Disorders
1218-AB36

Indoor Air Quality
in the Workplace
1218-AB37

Occupational Exposure
to Hexavalent Chromium
(Preventing Occupational Illness:
Chromium)
1218-AB45

Occupational Exposure
to Tuberculosis
1218-AB46

Confined Spaces in Construction
(Part 1926) (Construction: Pre-
venting Suffocation/Explosions
in Confined Spaces)
1218-AB47

General Working Conditions in
Shipyards (Part 1915, Subpart F)
(Phase II) (Shipyards: General
Working Conditions)
1218-AB50

Standards Advisory Committee
on Metalworking Fluids
1218-AB58

Plain Language Revision of
Existing Standards (Phase II)
1218-AB66

Electric Power Transmission and
Distribution; Electrical Protective
Equipment
1218-AB67

Safety Standards for Scaffolds
Used in the Construction Indus-
try—Part II
1218-AB68

Safety and Health Programs
for Construction
1218-AB69

Occupational Exposure
to Crystalline Silica
1218-AB70

Control of Hazardous Energy
(Lockout) in Construction (Part
1926) (Preventing Construction
Injuries/Fatalities; Lockout)
1218-AB71

Occupational Exposure
to Beryllium
1218-AB76

Consolidation of Records
Maintenance Requirements
in OSHA Standards
1218-AB78

Completed Actions

Walking Working Surfaces
and Personal Fall Protection
Systems (Part 1910) (Slips,
Trips, and Fall Prevention)
1218-AB04

Procedures for Handling
Discrimination Complaints
Under Federal Employee
Protection Statutes
1218-AB75 JSHQ

OSHA Seeks to Curb the Violence Against Late-Night Retail Workers

by Kerri L. Lawrence

One summer night in 1993, a convenience store robbery in Corpus Christi, TX, altered a woman's life forever and claimed the life of her only son. Today, Lana Dillon's personal tragedy drives her strong and active advocacy on behalf of worker protection in late-night retail. Dillon shares her son's story in hopes of preventing a similar tragedy from happening to others. "I couldn't stand by and watch another mother lose her son," she says.

Just 5 weeks after starting a summer job as a retail clerk in the Texas convenience store, Dillon's 20-year-old son, Clay Peterson, was working alone on his first night shift when one of two armed robbers entered the store and demanded money from the cash register. At 3:29 a.m., one intruder fatally stabbed Clay eight times, making off with just \$25.65 from the cash drawer.

Dillon says her son was told there was little crime at the store,

"No workers should have to sacrifice their lives for their livelihoods."

Alexis M. Herman,
U.S. Secretary of Labor



OSHA Assistant Secretary Charles Jeffress lends his support and concern as Lana Dillon, whose son was killed on the job, shares her story at OSHA's press conference introducing recommendations to prevent workplace violence in late-night retail.

but after the murder, she pulled the police records. "That store averaged a violent crime every 4 months for the 2 years prior to that," says Dillon. "And yet my son was told it was safe with no problems." The murderer later testified he waited over an hour until Clay was alone in the store and chose that location to rob because he mistakenly believed there were no surveillance cameras.

OSHA Responds

Recognizing that needless deaths such as Clay Peterson's occur all too often throughout the country, OSHA is taking a proactive stand in the fight against workplace violence. Agency officials realize the urgency to protect the 100 million workers exposed daily to violence in the workplace. "No workers should have to sacrifice their lives for their livelihoods," says Alexis M. Herman, U.S. Secretary of Labor. "The statistics are shocking. Homicide is the number one killer of women in the workplace, and the second leading cause of all American workers. And 48 percent of homicides in the workplace occur in retail. The risk is apparently greater for those who work at night in convenience stores, liquor stores, and gasoline stations," she adds.

Statistics support Herman's claims. According to the Bureau of Labor Statistics, homicide—the second leading cause of death for American workers—claimed the lives of 912 workers in 1996 alone and accounted for 15 percent of the 6,112 fatal work injuries in the U.S.¹ The Department of Justice's National Crime Victimization Survey reported that from 1987 to 1992, almost 1 million persons annually were victims of violent

crime at work,² including 615,160 simple assaults, 264,174 aggravated assaults, 79,109 robberies, and 13,068 rapes. And data recently released by the Centers for Disease Control in Atlanta show that murders accounted for 13.5 percent of all occupational-related deaths between 1980 and 1994.

Taking the First Step

BLS data showed that the highest numbers of nonfatal assaults and homicides occur in the health care and night retail sectors. A sizable proportion of the victims of nonfatal workplace violence are caregivers in nursing homes and hospitals. Recognizing a need to help employers better protect their

²U.S. Department of Justice, Bureau of Justice Statistics, "Violence and Theft in the Workplace," *National Crime Victimization Survey* (Washington, DC).



Family members of victims of workplace violence console each other during OSHA's press conference.

¹U.S. Department of Labor. *National Census of Fatal Occupational Injuries, 1996*, News Bulletin USDL 97-266 (Washington, DC).

According to the Bureau of Labor Statistics, homicide—the second leading cause of death for American workers—claimed the lives of 912 workers in 1996 alone and accounted for 15 percent of the 6,112 fatal work injuries in the U.S.

By addressing workplace violence as a preventable hazard, employers can develop practical and effective strategies to protect their employees from serious risk and provide a safe and healthful workplace.

employees, OSHA issued workplace violence guidelines for health care and social service workers on March 14, 1996. These recommendations contain practical steps to prevent potential assaults on employees. OSHA developed them to aid employers of health care workers in institutional and community settings in evaluating working conditions and implementing safety programs.

Acknowledging that the late-night retail industry also needs to combat the large number of workplace violence incidents, OSHA developed recommendations similar to those already developed for the health care industry and social workers. Once again, data supported this need to stop the violence in the retail sector. According to the National Institute for Occupational Safety and Health (NIOSH), from 1980 to 1992 the overall rate of homicide was 1.6 per 100,000 workers per year in the retail industry, compared with a national average of 0.70 per 100,000 workers.³ And according to BLS, job-related homicides in retail trade accounted for 48 percent of all workplace homicides in 1996 alone.⁴

Homicides in convenience and other grocery stores, eating and drinking places, liquor stores, and gasoline service stations made up the largest share of homicides in retail establishments from 1990 to 1992 according to NIOSH studies. Data also suggest that workers in many occupations in the retail sector face an above-average risk of

violence. Gasoline service and garage workers, sales counter clerks, stock handlers and baggers, and sales supervisors and proprietors have an elevated risk of being victimized.⁵

Proven Experience in Florida

OSHA doesn't just use data as proof that its recommendations can work. The agency points to Gainesville, FL, which passed the toughest convenience store security law in the nation in 1987 requiring—among other things—that convenience stores employ at least two clerks during night shifts. After enactment of the Gainesville ordinance, retail robberies dropped 92 percent between the hours of 8:00 p.m. and 4:00 a.m. The city's arrest rate went up from 28 percent to 80 percent as witness identification improved and cameras gained more widespread use.⁶ In 1992, the State of Florida enacted the *Convenience Store Safety Act*, requiring extra security measures at night, including two clerks or bullet-resistant enclosures. Since enactment, the state has experienced a reduction in robberies, which were the main cause of homicide in retail establishments.

Late-Night Retail Recommendations

OSHA's new voluntary recommendations offer a basic framework to help employers protect employees from risks of injury and death from occupationally related

³U.S. Department of Health and Human Services, National Institute for Occupational Safety and Health (NIOSH), *Current Intelligence Bulletin 57: Violence in the Workplace—Risk Factors and Prevention Strategies*, Publication No. 96-100 (Cincinnati, OH).

⁴*National Census of Fatal Occupational Injuries, 1996*, News Bulletin USDL-97-266 (Washington, DC).

⁵U.S. Department of Health and Human Services, *Current Intelligence Bulletin 57: Violence in the Workplace—Risk Factors and Prevention Strategies*, Publication No. 96-100 (Cincinnati, OH).

⁶“Where Big Donors Tread, Big Favors Seem to Follow,” *Los Angeles Times*, September 23, 1997.

violence. By addressing workplace violence as a preventable hazard, employers can develop practical and effective strategies to protect their employees from serious risk and provide a safe and healthful workplace.

It is important to note that the recommendations are advisory in nature and informational in content. They offer both policy recommendations and practical suggestions employers can use to prevent attacks on employees in the workplace. The recommendations are **not** a new standard or regulation and do **not** create any new OSHA duties.

“The recommendations are tools that we hope will raise the awareness of employers and provide them with the information they need to better protect their employees,” says OSHA Administrator Charles N. Jeffress.

“Nor are these recommendations a one-size fits all approach,” Jeffress adds. He points out that the recommendations offer suggested elements from which employers can tailor a prevention program specific to their needs.

OSHA emphasizes that a workplace violence prevention program should include the elements of any good safety and health program: management commitment and employee involvement, worksite analysis, hazard prevention and control, safety and health training and education, and evaluation.

The first objective is to prevent violence, which begins with *management commitment and employee involvement*. All violent and threatening incidents should be taken seriously and management should develop a plan for workplace security, working with police and other public safety agencies to improve physical security.



Family members of workplace violence victims get together with Department of Labor Secretary and OSHA Assistant Secretary after OSHA's press conference: (From left to right: OSHA Assistant Secretary Charles Jeffress; Esther Henderson; Rebecca Morris; Sylvia Babcock; Rachel Morris-Clark; Labor Secretary Alexis Herman; Lana Dillion; Nancy Carothers; Pat Biles, OSHA Directorate of Compliance; and Jean Berrier).

A *worksite analysis* is a step-by-step common-sense look at the workplace to find existing and potential hazards for workplace violence. NIOSH identified several risk factors that may increase a worker's risk for workplace assault, which OSHA has incorporated into the new recommendations. Those pertaining to late-night retail include:

- contact with the public,
- exchange of money,
- delivery of passengers, goods, or services,
- working alone or in small numbers,
- working late at night or during early morning hours, and
- working in high-crime areas.

The worksite analysis also should include a review of past incidents, a review of workplace security, and periodic safety audits.

The next step is to develop measures to protect employees from the identified risks of injury and violent acts. *Hazard prevention and control* programs include engineering and administrative controls that specifically address those identified hazards.

Workers' Memorial Day Presentation of OSHA's Recommendations for Preventing Workplace Violence

In honor of Workers' Memorial Day, U.S. Department of Labor Secretary Alexis Herman and Assistant Secretary for OSHA Charles Jeffress unveiled the new late-night retail recommendations last month. Several family members of workplace violence victims spoke at the event and hailed the new recommendation as "a giant step forward."

"This document that we celebrate today represents a victory not of money or power, but of truth," said Nancy Carothers, a New Jersey woman whose father was killed in a convenience store robbery.

Recounting her father's story, Carothers said "just improving visibility by providing adequate lighting or mirrors, maintaining surveillance that people can actually see" could have an significant impact. Secretary Herman added that the man who killed Carothers' father said there had been no deterrents when he robbed the store. "If he had known there was a surveillance camera, if he had known there was a personal alarm system, maybe it would have made a difference."

The new recommendations are a result of talking to store owners, police departments, unions, insurance companies, and victims' family members. Assistant Secretary Jeffress stressed, however, that OSHA is not offering any workplace violence standard or a substitute for a standard. "These recommendations are not a 'one-size-fits-all' approach. They are simply tools that employers can use to raise employee awareness and employers can use to tailor a



Nancy Carothers speaks out in support of OSHA's new recommendations. Her father was murdered while working at a convenience store. OSHA Assistant Secretary Charles Jeffress listens attentively.

prevention program," Jeffress noted.

"For the store owners who have implemented these recommendations in different places across the country, we have found they reduce the likelihood of stores being robbed," Jeffress added. He noted the measures also improve customer safety and can be good for business.

In a written statement, Robert A. Butterworth, Attorney General for the State of Florida commended

OSHA's new recommendations. "They are proactive with a focus on deterrence, safety training, and responsibility at all levels....Most importantly, they include all the security measures and standards that have been proven to be effective, including the provisions for two clerks and safety enclosures," Butterworth writes.

Secretary Herman concluded, "Every day they work to make our lives easier, today we act to make their lives safer."

Recognizing that each establishment is different, OSHA's recommendations encourage employers to evaluate their needs and adopt a combination of these suggested controls:⁷

- Improve visibility by providing adequate lighting and installing mirrors; keep signs and shelves low.
- Install drop safes and signs that indicate little cash is kept on-hand.
- Maintain video surveillance.
- Provide silent and personal alarms.
- Establish emergency procedures including communications systems, training, and education.
- Restrict customer access by reducing store hours and closing portions of a store.
- Take precautions when going to remote, isolated spots such as garbage areas and outdoor freezers.
- Lock doors not in use.
- Increase staffing during high-risk periods.
- Install bullet-resistant enclosures.
- Implement standard operating procedures for both management and employees to follow in the aftermath of a violent incident.

The fourth step—*training and education*—ensures that all staff are aware of potential security hazards and the procedures for protecting themselves and their co-workers. Patricia Biles, OSHA's workplace violence project officer and author of the recommendations, notes that "this whole effort is really about education—making employers aware of their options to

OSHA emphasizes that a workplace violence prevention program should include the elements of any good safety and health program: management commitment and employee involvement, worksite analysis, hazard prevention and control, safety and health training and education, and evaluation.

keep their workers safe and ensuring that employees are instructed on specific hazards associated with their jobs and worksites to minimize their risk of assault and injury."

Finally, an *evaluation* of injury and illness records, incidents, hazards, corrective actions, and training can help identify problems and solutions for a safe and healthful workplace. Good records help employers determine the severity of the risks, evaluate the methods of hazard control, and identify additional training needs.

The recommendations also include a sample workplace violence factor and control checklist to help employers identify present or potential workplace violence problems at their own worksite as well as a sample incident report, a suspect description form, and a listing of other sources of available OSHA assistance. To obtain a copy of this publication, contact the Government Printing Office, Superintendent of Documents, P.O. Box 371954, Pittsburgh, PA 15250-7954; (202) 512-1800; Order Number 029-016-00194-8; Cost \$3.75. This publication is also available via OSHA's Internet site at <http://www.osha.gov> under **Publications**. **JSHQ**

⁷For a complete list of recommendations, refer to *Recommendations for Workplace Violence Prevention Programs in Late-Night Retail Establishments*. Information on how to obtain a copy runs at the end of this article.

Lawrence is the associate editor of Job Safety & Health Quarterly in OSHA's Office of Public Affairs, Washington, DC.



Legislative Update:

Congress Continues to Challenge OSHA

by Jennifer Liebman

Each term, there are congressional efforts to develop legislation to reform OSHA. Over the past 20 or so years, members of the Congress have repeatedly proposed legislation to amend the *Occupational Safety and Health Act of 1970*, but to date, the *Act* remains unchanged.

This year is no different. In the 105th Congress, Republicans Senator Michael Enzi (WY) and Representatives, James Talent (MO), Cass Ballenger (NC), and David McIntosh (IN) have introduced OSHA reform legislation.

In addition to the legislation introduced expressly to reform OSHA, members have introduced bills that, although not central to OSHA, would have a direct affect on OSHA. Issues like regulatory reform, paperwork reduction, and tobacco regulation all would affect OSHA's obligations and operations.

OSHA Reform

This term, OSHA reform has all shapes and sizes. For example, the "SAFE Act," introduced by Enzi and Talent, is a comprehensive bill addressing many issues that would change OSHA. In contrast, Ballenger made a strategic choice to introduce eight separate bills, each addressing a specific discrete OSHA reform issue.

The "SAFE Act" contains several controversial provisions that

The "SAFE Act"...would create additional layers of scientific review for standards, permit employer-dominated safety and health committees, provide for employee citation, inaccurately codify OSHA's consultation program, and allow private-sector auditors to exempt employers from OSHA penalties.

have made it more difficult to move the bill forward in the legislative process. The bill would create additional layers of scientific review for standards, permit employer-dominated safety and health committees, provide for employee citation, inaccurately codify OSHA's consultation program, and allow private-sector auditors to exempt employers from OSHA penalties. As a result, in a letter to Senator James Jeffords (R-VT), Chairman of the Committee on Labor and Human Resources, Department of Labor Secretary Alexis M. Herman explicitly opposed the bill, stating that she would recommend a presidential veto, if necessary. The committee reported favorably on the "SAFE Act" committee, but Senate leadership has yet to review the legislation. In the House, Representative Talent's version of the "SAFE Act" has not received committee attention. Talent's version is similar to Enzi's, but has no provi-

sion to codify OSHA's consultation program.

Representative Ballenger's eight separate bills have met with more success than the comprehensive SAFE Act. Two of his bills, H.R. 2864 and H.R. 2877, have passed in the House. Because the bills address relatively non-controversial issues—consultation and quotas—and due to a spirit of cooperation among the majority and minority, the committee was able to craft compromise legislation. OSHA Assistant Secretary Charles N. Jeffress in a statement on March 17, commended the majority's willingness to compromise and came out in support of these two bills, stating that the passage of these measures would "...ensure a long and lasting impact in workplaces across the country." It is unclear whether the Senate will treat these bills as favorably as the House.

The six additional bills sponsored by Ballenger address more

controversial issues, such as limiting the liability of general contractors and creating an evidentiary privilege for records related to employer self-audit activities. Chairman Ballenger held hearings on March 27, 1998, to discuss the merits of each piece of legislation. He has taken no further action on these bills to date.

Other members, such as Scott McInnis (R-CO), have followed Ballenger's lead, introducing single-issue bills. McInnis' bill, the "Sound Scientific Practices Act," is similar to Ballenger's bill on scientific peer review. These bills would require OSHA to create an advisory panel to review scientific and economic data every time OSHA proposed a new standard. The main difference between the bills is that Ballenger's would exempt standards that are promulgated through negotiated rulemaking. In fact, the bills are so similar that Ballenger has asked for testimony for the two at the same congressional hearings to be held sometime in the future.

Regulatory Reform

Other potential legislation that could affect federal regulatory agencies is the Levin-Thompson bill, "The Regulatory Improvement Act of 1998," S.981. Sponsored by Senators Carl Levin (D-MI) and Fred Thompson (R-TN), the bill is intended to improve regulatory programs and increase public awareness by adding layers of stringent scientific, economic, and risk analyses to the regulatory process. As such, all agencies, not just OSHA, would be required to add several steps to their rulemaking processes. The Senate Committee on Governmental Affairs voted favorably on the bill on March 10, 1998. The bill has yet to reach the Senate floor.

Paperwork Reduction

On March 3, 1998, Congressman David McIntosh (R-IN) introduced the "Small Business Paperwork Reduction Act Amendments of 1998" (H.R.3310). This bill would require each Federal agency (1) to establish one agency point of contact to act as a liaison with small businesses, (2) to publish annually in the *Federal Register* and on the Internet a list of collection requirements applicable to small-business concerns, (3) to eliminate first-instant sanctions for paperwork violations by small businesses, and (4) to establish a task force to study streamlining of paperwork requirements for small businesses. H.R. 3310 passed the House on March 26 and was received in the Senate on March 30.

OSHA already has voluntarily met the bill provision to create a small business liaison. The Office of Management and Budget already provides a list of all OSHA collections and most of these apply to small business. The agency is not opposed to the establishment of a task force to study streamlining paperwork violations for small businesses. OSHA, however, objects to the provision that prohibits it from imposing fines for first-time violators. OSHA already provides significant penalty reductions based on employer size, good faith and history of violations, with the smallest employers eligible for the largest reductions. Our penalty system is required both by the *OSH Act* and *Small Business Regulatory Enforcement Fairness Act (SBREFA)*. Consequently, the provision is duplicative. Moreover, eliminating the potential for any penalties for first-time violations removes the incentive for employers to voluntarily comply without intervention. This is particularly

important where requirements have a true safety and health impact.

Tobacco Regulation

Senate Commerce Chairman John McCain's (R-AZ) bill on tobacco reform would create additional obligations for OSHA. Title V of the bill, "National Tobacco Policy and Youth Smoking Reduction Act," would create a protection from involuntary exposure to environmental tobacco smoke. Under the bill, all owners and lessors of public facilities would be required to create and post smoking policies in their facilities. State governments, however, could choose to opt out of this provision. Private citizens and OSHA could bring suit in district court for violation of the bill. If passed, the bill would require OSHA to promulgate a regulation on specially designated smoking areas and to define "fast food restaurant."

On April 1, the Senate Commerce, Science, and Transportation Committee voted 19 to 1 in favor of the bill. In the meantime, the bill has stagnated while discussions are taking place on its other more controversial aspects, such as the constitutionality of advertising restrictions and how the government will spend the money paid by tobacco companies.

With few legislative days left before the 105th Congress comes to a close, it's likely that most of this legislation could languish and die in committee. It would ill be up to the next Congress, then, to determine whether issues affecting OSHA should be taken up again next term. **JSHQ**

Liebman is a presidential management intern in OSHA's Directorate of Policy, Washington, DC.

Grassroots Worker Protection— How State Programs Help Ensure Safe and Healthful Workplaces

This is the first in a series of articles on state safety and health plans and how they protect American workers.



What Is a State Plan?

States and territories may elect to develop their own unique occupational safety and health programs. These “state plans” are approved and monitored by Federal OSHA, which provides up to 50 percent of an approved plan’s operating costs. A state plan program, including the job safety and health standards which employers are required to meet, must be “at least as effective” as Federal OSHA. Benefits of a state plan include coverage for public sector employees, and the opportunity to promulgate unique standards or to develop innovative programs which address the types of hazards found in that state’s workplaces.

What Is OSHSPA?

The Occupational Safety and Health State Plan Association (OSHSPA) links the 25 state plan jurisdictions, federal agencies with occupational safety and health jurisdiction, and the Congress. OSHSPA holds three meetings a year, giving state programs the opportunity to address common problems and share information. The group provides information to states or territories that are considering application for state plan status. OSHSPA representatives also have appeared before congressional committees and other bodies to report on job safety and health issues.

Sharing a Common Goal

The 25 states and territories operating state plan programs share a common goal: a safe and healthful workplace for every worker

State Plan Programs Covering Both Private and Public Sector

(21 states and two territories)

Alaska	Arizona	California	Hawaii
Indiana	Iowa	Kentucky	Maryland
Michigan	Minnesota	Nevada	New Mexico
North Carolina	Oregon	Puerto Rico	South Carolina
Tennessee	Utah	Vermont	Virgin Islands
Virginia	Washington	Wyoming	

State Plan Programs Covering Public Sector Only

(Private sector coverage provided by Federal OSHA)

Connecticut	New York
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States Covered by Federal OSHA

(29 states and the District of Columbia)

(Private Sector Only – The Act does not provide the authority to cover public sector employees.)

Alabama	Arkansas	Colorado	Connecticut
Delaware	District of Columbia	Florida	Georgia
Idaho	Illinois	Kansas	Louisiana
Maine	Massachusetts	Mississippi	Missouri
Montana	Nebraska	New Hampshire	New Jersey*
New York	North Dakota	Ohio	Oklahoma
Pennsylvania	Rhode Island	South Dakota	Texas
West Virginia	Wisconsin		

*State Plan application in process

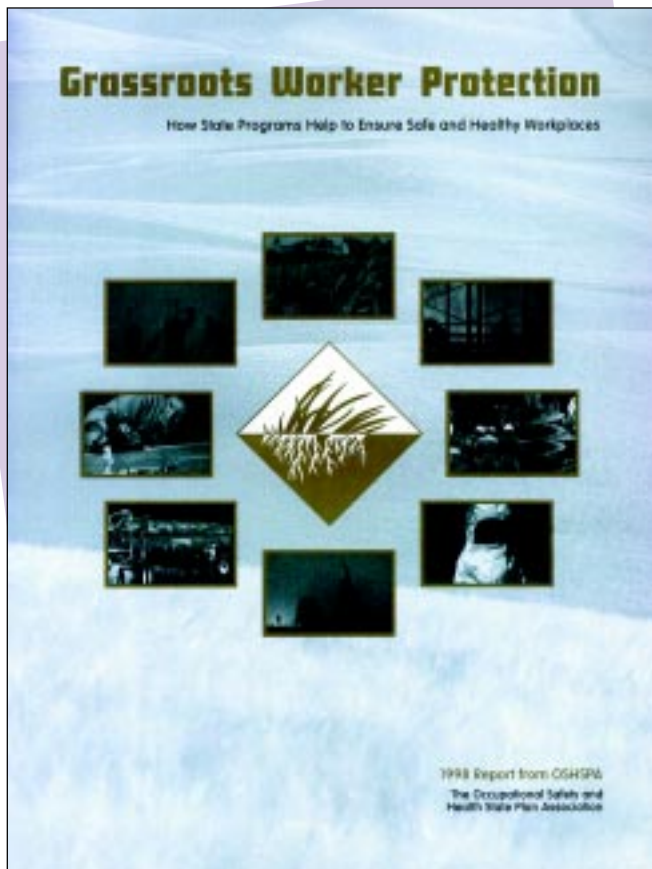
through prevention of on-the-job injuries, illnesses, and fatalities. Sharing the mission of the U.S. Department of Labor's Occupational Safety and Health Administration (OSHA), these states take responsibility for developing and enforcing occupational safety and health standards in their jurisdictions. These state and territorial programs cover 40 percent of the

nation's work force, conducting enforcement inspections and providing consultative services. They also conduct free training and education programs, teaching and encouraging employers and employees to work in a safe and healthful manner.

Section 18 of the Federal *Occupational Safety and Health Act of 1970*¹ says that "Any State which, at any time, desires to assume responsibility for development and enforcement therein of occupational safety and health standards relating to any occupational safety and health issue with respect to which a Federal standard has been promulgated under section 6 shall submit a State plan for the development of such standards and their

The 25 states and territories operating state plan programs share a common goal: a safe and healthful workplace for every worker through prevention of on-the-job injuries, illnesses, and fatalities.

¹ The *OSH Act*, P.L. 91-596, December 29, 1970; as amended by P.L. 101-552, § 3101, November 5, 1990.



States that have used their resources to model their own unique occupational safety and health program are pioneers in the development of innovative concepts and programs.

enforcement.” State standards and their enforcement must be “at least as effective” as OSHA in promoting safe and healthful working conditions.

Safety and Health Pioneers

As early as the 19th century, states created laws for worker safety. Soon after statehood was granted in 1837, Michigan adopted worker safety laws, and started a factory inspection program in 1893. Massachusetts issued occupational safety rules around 1875. Iowa began collecting worker injury and illness statistics in 1884, and also began inspecting factories in an attempt to reduce accidents. In 1889, Washington’s state constitution required the legislature to “pass necessary laws for the protection of

persons working in mines, factories, and other employments dangerous to life or deleterious to health; and fix pains and penalties for the enforcement of the same.” California began operating a safety enforcement program in 1913. Oregon adopted a workers’ compensation law in 1913, which included provisions for the inspection of certain hazardous industries.

In 1936, the Federal Government passed the *Walsh-Healey Act*, providing some protection to workers performing government contracts. *The Williams-Steiger Act of 1970* (better known as the *OSH Act*), provided nationwide standards for the occupational safety and health of America’s private sector work force. By this time, many states had already established a long history in addressing worker safety and

health. The *OSH Act* includes a provision allowing states to operate safety and health programs. In fact, because of states’ efforts at developing innovative programs to address the specific occupational hazards found in their geographical region, and because all state plans are required to the extent allowed by state or territorial law to provide coverage to the public sector, state and territorial occupational safety and health programs have a unique opportunity to provide a high level of protection to all employees in their jurisdiction.

“It is one of the happy incidents of the federal system that a single courageous state may serve as a laboratory and try novel social and economic experiments....”

Louis Brandeis, U.S. Supreme Court Justice, (March 1932)

To paraphrase Justice Brandeis, states are the laboratories of democracy. States that have used their resources to model their own unique occupational safety and health program are pioneers in the development of innovative concepts and programs. OSHA has shown a willingness to be a follower as well as a leader by expanding some of the tools developed and proved by states to the national level.

State plans use a variety of data sources to direct their enforcement and consultation efforts toward establishments at risk, and those actually experiencing injuries and illnesses.

Workplaces at Risk

The foundation of an effective program is the ability to target workplaces that have the most hazardous conditions. State plans use a variety of data sources to direct their enforcement and consultation efforts toward establishments at risk, and those actually experiencing injuries and illnesses. Some states have an occupational safety and health program and a workers' compensation system housed within the same agency, providing an unequaled opportunity to use injury, illness and claims data to target hazardous industries and problem employers. Access to site specific claims history rather than industrywide data is a better indicator of an employer who may have safety and health deficiencies. Correction of these problems through voluntary or enforced compliance with safety and health standards may prevent workplace injuries and illnesses.

Protection for Public Servants

The *OSH Act* specifically excludes all employees of public agencies of the states and their political subdivisions from coverage by OSHA, but states with an approved state plan are required to provide occupational safety and health protection to public sector employees. This is a significant requirement and benefit of the state plan programs. Some of our most hazardous workplaces are in the public sector—firefighting, emergency response, corrections, law enforcement, publicly funded health care facilities, and transportation workers. Under a state plan program, public servants can receive protection equal to coverage of private sector employees.

Hazard-Specific Standards

Individual states and territories have promulgated standards addressing the specific hazards found in their local industry, often involving labor and management representatives in the process. The regulatory process can work more quickly at the state level when compared with the federal level. Standards set by individual state plan programs have sometimes been a model and a forerunner of standards that are later adopted or expanded by OSHA at a national level.

Workplace Safety and Health Programs

Increasingly, states are encouraging employers to set up worker protection programs that stress management commitment and employee involvement. At present, there are 11 states that require employers to establish a safety and health program designed to prevent injuries and illnesses: Alaska, California, Connecticut, Hawaii, Minnesota, Nevada, New Mexico, North Carolina, Oregon, Tennessee, and Washington.

Preventing Workplace Violence

Workplace violence is an occupational safety and health hazard demanding action. Whether the risk of violence comes from a coworker, client, patient or the public, employees deserve a safe workplace. Employers must be provided with tools to develop comprehensive plans to reduce levels of risk. State programs are developing formal rules as well as voluntary guidelines to help employers prevent this workplace hazard.

Protection from Environmental Tobacco Smoke

In 1994, OSHA issued a notice of proposed rulemaking on indoor air quality, including environmental tobacco smoke (secondhand smoke), which would ban workplace smoking unless a separate, enclosed and ventilated room to contain smoke is in place. Several states now regulate smoking in the workplace and public access buildings.

Enforcing Workplace Safety and Health Standards

States use a variety of innovative tools to assure employer compliance with occupational safety and health standards. They also protect the rights of employees who file a complaint or who participate in workplace safety and health activities.

Most states now use the “phone-fax” method pioneered by OSHA to address some types of safety or health complaints. When a complaint is received that meets a state’s criteria for using this policy, the employer is contacted by phone. A follow-up letter is faxed to the employer, who is asked to investigate the conditions that are alleged to be unsafe. The employer must respond within a short period of time, usually five days. A compliance investigation may be conducted if the employer does not respond, if the response is not satisfactory, or if the state program deems it necessary. Many workplace hazards have been abated faster, using fewer program resources, by using phone-fax.

FY 97 State Plan Statistics

Total State Population	133,454,564
Private Sector Employers Covered	2,770,381
Private Sector Employees Covered	40,867,257
Public Sector Employers Covered	83,817
Public Sector Employees Covered	8,389,630
Enforcement Safety Positions	776
Enforcement Hygiene Positions	448
Total Enforcement Inspections	56,895
Safety Inspections	44,844
Health Inspections	12,051
Accident Inspections	3,603
Complaint Inspections	12,428
Referral Inspections	2,995
Scheduled/Programmed Inspections	31,877
Follow-up Inspections	3,394
Other Inspections	2,532
Total Violations	146,957
Serious Violations	58,837
Other-Than-Serious/General Violations	85,642
Repeat Violations	2,139
Willful Violations	279
Failure-to-Abate	596
Average Number of Violations per Inspection	3.8
Total Penalties Assessed	\$55,442,084
Total Serious Penalties	\$39,182,910
Average Penalty per Serious Violation	\$666
Percentage of Inspections with No Violations	32.3 percent
Total Number of Contested Cases	7,794
Percentage of Inspections with Citations Contested	13.7 percent
Safety Consultant Positions	202
Health Consultant Positions	149
Training & Education Coordinator Positions	101
Total Consultation Visits	13,107
Serious Hazards by Consultants	67,311
Total Training & Education Programs Conducted	10,978
Total Employees/ers Provided Training	214,142

Voluntary Compliance

Enforcement is only part of the answer to reducing the incidence of worker injuries, illnesses and fatalities. A wide array of services help employers voluntarily comply with safety and health standards. These programs include free consultation visits to employers' worksites, Voluntary Protection Programs (VPP),² training and education programs for employers and employees to teach them how to work in a safe and healthful manner, and conferences on safety and health topics. More than half of state plans offer VPP to employers with comprehensive safety and health programs that are highly successful in reducing the incidence and severity of workplace injuries and illnesses. Key elements that must be met include management leadership and employee involvement; a worksite hazard analysis, prevention, and control program; and safety and health training. Qualifying worksites receive special recognition and may be removed from scheduled inspection lists for the duration of their participation in VPP.

Innovations—The Heart of State Plans

Many states have created unique safety and health initiatives that build partnerships, reward responsible employers, and use innovative methods of leveraging program resources to reach even greater numbers of employers, employees and worksites. These innovations demonstrate the commitment of the states and territories to continually

develop effective and responsive programs which improve workplace safety and health.

■ Electronic Access to Information

Many state plans are following Federal OSHA's lead in providing electronic access to occupational safety and health information via the Internet. These World Wide Web sites provide a wealth of program and reference information day and night, from any location with computerized access. Users retrieve standards, policy manuals, information on appeal rights, public hearing notices, material safety data sheets (MSDS) and a wide array of other safety and health information from terminals in their workplaces, homes, schools and libraries. Most of the state plan states now have a Web site for their occupational safety and health program, ranging from a few paragraphs to many "pages."

■ Performance Agreements: A New Relationship with OSHA

In 1995, OSHA approached state plans, proposing a new working relationship with alternatives to the state monitoring and evaluation process. The performance agreement approach provides increased flexibility to state plan programs, enhances the partnership with OSHA, and focuses on safety and health outcomes instead of activities. Currently, five states have signed performance agreements with OSHA. In 1998, all state plans will begin preparing annual performance plans as part of the section 23(g) grant applications to OSHA. Each state program will also develop a 5-year strategic plan in coordination with OSHA's planning efforts.

²For Federal VPP efforts, see also, Judith Weinberg "Changing the Way We Do Business," *Job Safety & Health Quarterly* 9(1&2):21-27, Fall/Winter 1998; Margaret R. Richardson and G.J. Catanzaro, "Introduction to the VPP," *Job Safety & Health Quarterly* 1(1):16-18, Fall 1989.

State Plan Internet Sites

Alaska	http://www.state.ak.us/local/akpages/LABOR/lss/lss.htm
California	http://www.dir.ca.gov/DIR/OS&H/DOSH/dosh1.html
Connecticut	http://www.ctdol.state.ct.us/dol/osha.htm
Hawaii	http://www.aloha.net/~edps0/annual.html#no8
Indiana	http://www.ai.org/labor/
Iowa	http://www.state.ia.us/government/wd/labor.htm
Kentucky	http://www.state.ky.us/agencies/labor/kyosh.htm
Maryland	http://www.dllr.state.md.us/labor/mosh.html
Michigan	http://www.commerce.state.mi.us/bsr/
Minnesota	http://www.doli.state.mn.us/mnosha.html
Nevada	http://www.state.nv.us/b&i/ir/
New Jersey	(State Plan application in process) http://www.state.nj.us/labor/
New Mexico	http://www.nmenv.state.nm.us/
New York	http://www.labor.state.ny.us/safety/saf_hlth.htm
North Carolina	http://www.dol.state.nc.us/DOL/osh.htm
Oregon	http://www.cbs.state.or.us/external/osha/
South Carolina	http://www.llr.sc.edu/
Tennessee	http://www.state.tn.us/labor/
Utah	http://www.ind-com.state.ut.us/uosha.htm
Vermont	http://www.state.vt.us/labind/vosha.htm
Virginia	http://www.dli.state.va.us/programs/index.htm
Washington	http://www.wa.gov/lni/wisha/
Wyoming	http://www.wydoe.state.wy.us/
Federal OSHA	http://www.osha.gov/

Commitment to Worker Safety and Health

In Federal Fiscal Year (FY) 1997, state programs received \$77.1 million in 23(g) and \$14.2 million in 7(c)(1) funding from the Occupational Safety and Health Administration's total budget of \$324.9 million. The states are required to pay at least 50 percent of the total cost of a 23(g) program, and at least 10 percent of the total cost of a 7(c)(1) program. In addition, many states fund other programs focused on safety and health in the workplace. Even in states facing serious budget constraints, the respective legislatures have continued to provide matching funds for occupational safety and health programs in recognition of their value in reducing workplace injuries and illness, conserving both human and fiscal resources. In FY 1997, state and territorial funds

of \$102.4 million were allocated to state plan programs. This commitment to worker safety and health is worthy of recognition.

Every day millions of workers provide the physical and mental energy and dedication to keep America running. Among them are the safety and health professionals who work with employers and employees to ensure that America has safe workplaces. When a logger loses an arm or a leg, or a construction worker dies in a trenching accident, safety and health workers do not see the victims as just a name on a report, or a statistic on an injury and illness log. They see precious human beings—one whose limb cannot be replaced, or whose life cannot be restored. They know the tragedy of families whose loved one is irrevocably changed, or who never came home from work at all. Then they are driven to identify the

cause of the accident and eliminate it as quickly as possible so that no one else is hurt.

The state plan programs and OSHA supplement enforcement efforts with voluntary compliance incentives, and by educating and training employers and workers, increase their ability to identify and abate hazards in their own workplaces. Employers and employees can join in the partnership and commitment to safe workplaces. Nationwide, much remains to be done to eliminate all the hazards that cause or are likely to cause death or serious physical harm. But the accomplishments are clear. State plan programs continue toward the goal of safe and healthful workplaces for all American workers.

JSHQ

Excerpted with permission from the *1998 Grassroots Worker Protection OSHSPA* report produced by the Washington State Department of Labor and Industries' WISHA Services Division under the direction of Steve Cant, CIH, the chair of the 1997-98 OSHSPA Board of Directors. Copies of the full report are available online at WISHA's web site at <http://www.wa.gov/lni/wisha/>.

The editors of *Job Safety & Health Quarterly* also wish to thank Janet Kenney, WISHA Management Analyst and editor of the report, for her assistance.

New Respirator Protection for 5 Million Workers in 1.3 Million Worksites

by John Steelnack

Firefighters battling indoor blazes are among the more than 900 workers annually whose lives can be saved by revision of a 25-year-old standard on respiratory protection. OSHA estimates that the strengthened respirator protection also will prevent more than 4,000 injuries and illnesses annually. The agency's new requirements will cover about 5 million American workers in 1.3 million establishments—mostly manufacturing—in all industry sectors covered by OSHA, except agriculture.

Respirators help reduce worker exposures to harmful substances. Some of the most common hazards are the lack of oxygen and the presence of harmful dusts, fogs, smoke, mists, fumes, vapors, or sprays, including substances that may cause

cancer, lung impairment, other diseases, or death. Some respirators also provide a separate supply of breathable air so employees can work where there is inadequate oxygen or where greater protection is needed.

The new revised standard reflects current respirator technology and better ways to ensure they fit. It also clarifies responsibility for administering a respirator program and its provisions, adds definitions, and provides specific guidance on respirator selection, use, hazard evaluation, medical evaluations, fit testing, and training.

OSHA published the revised respiratory protection standard, *Title 29 Code of Federal Regulations (CFR) Part 1910.134*,¹ on January 8, 1998 (63 FR 1152) to promote the more effective use of respirators, incorporate advances in respirator technology that have occurred since OSHA first adopted the standard in 1971, reflect changes in the National Institute for Occupational Safety and Health (NIOSH) respiratory certification standards (42 CFR 84), and eliminate duplication in the respirator provisions in substance-specific

The new revised standard...clarifies responsibility for administering a respirator program and its provisions, adds definitions, and provides specific guidance on respirator selection, use, hazard evaluation, medical evaluations, fit testing, and training.

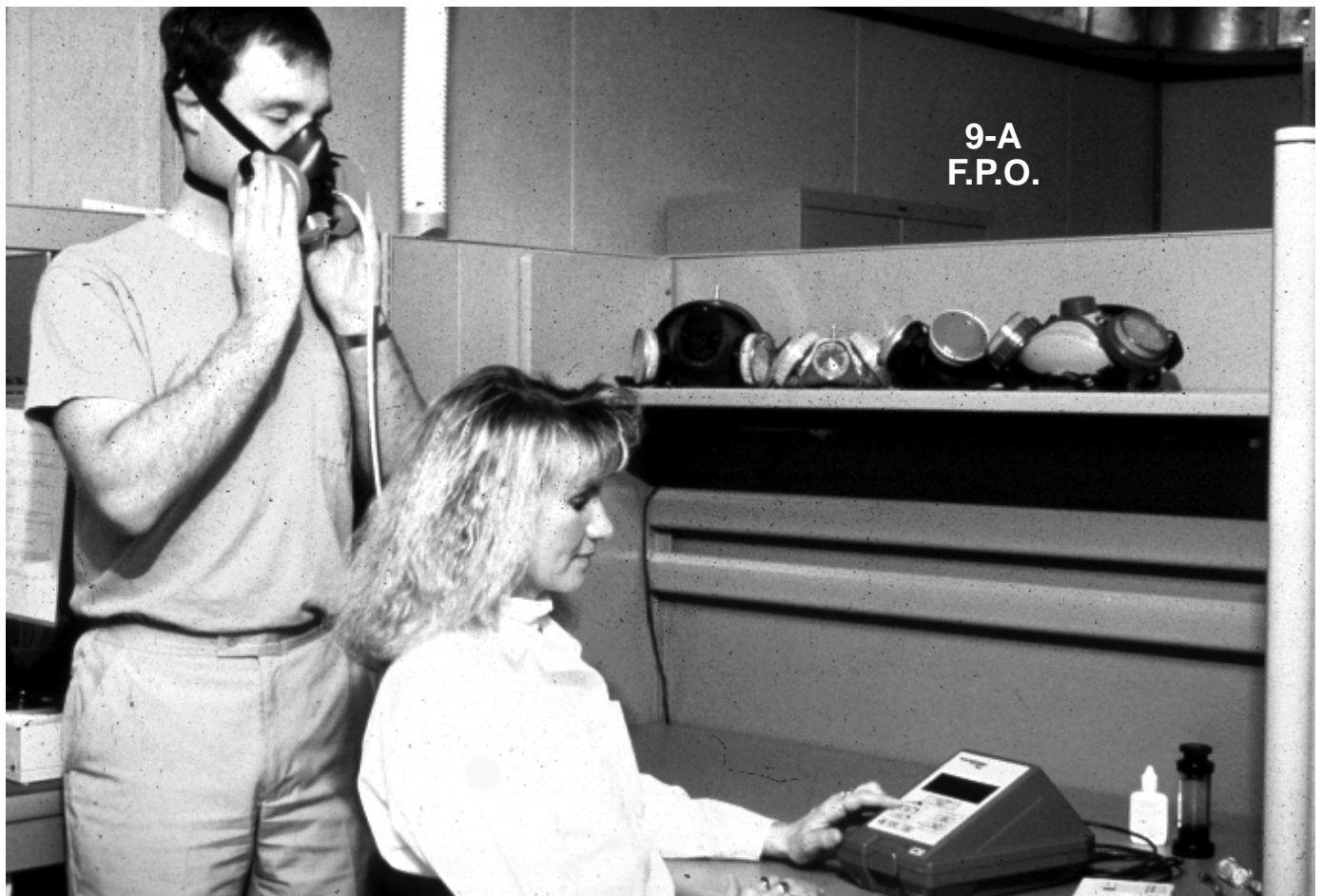
¹ *Federal Register* 63:1152-1300.

In addition, two firefighters must be on standby if two firefighters are engaged in interior structural firefighting in the burning building (“two-in/two-out”) to provide safety.

standards by referring employers to the provisions of the final respirator standard.

The revised standard also addresses use of respirators in Immediately Dangerous to Life or Health (IDLH) atmospheres, including firefighting. During interior structural firefighting (an IDLH atmosphere), self-contained breathing

apparatus is required and at least two firefighters must enter and remain in visual and voice contact with each other at all times. In addition, two firefighters must be on standby if two firefighters are engaged in interior structural firefighting in the burning building (“two-in/two-out”) to provide safety. This requirement will be



The quantitative fit-testing of respirators shown here ensures proper fit and protection.

“In addition to saving lives and preventing injuries and illnesses, employers will realize up to \$94 million a year in savings on injury- and illness-related costs,”

Alexis M. Herman,
U.S. Secretary of Labor

applicable to state and local government firefighters in the 25 states that operate OSHA-approved state plans through the adoption of an identical or “at least as effective as” standard. Federal OSHA has no jurisdiction over such workers but it does have jurisdiction over federal employees who fight fires and private-sector employees who fight fires (e.g., those in industrial fire brigades.)

“This is a major step forward in improving employee protection against toxic substances,” says Alexis M. Herman, U.S. Department of Labor Secretary. “In addition to saving lives and preventing injuries and illnesses, employers will realize up to \$94 million a year in savings on injury- and illness-related costs,” she adds.

Assistant Secretary of Labor for Occupational Safety and Health Charles N. Jeffress adds, “OSHA’s ultimate goal is to reduce injuries and illnesses. Improving and

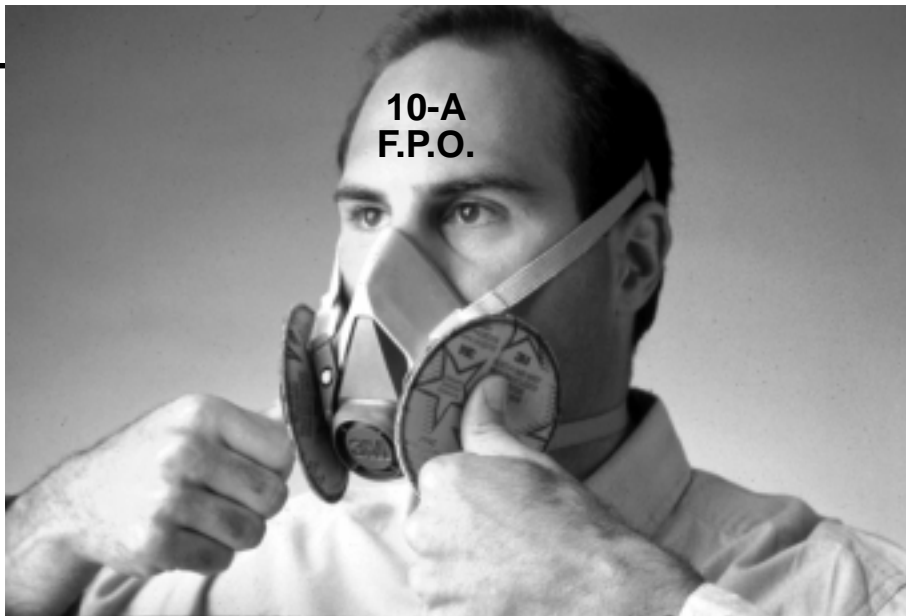
updating existing standards as we did with this one, is one way to reach that goal.”

Some major requirements of a respirator program as outlined in the standard are:

- *Written plan* with worksite-specific procedures to tailor program to each worksite.
- *Hazard evaluation* required to characterize respiratory hazards and conditions of work to assist employers in selecting appropriate respirators.
- *Medical evaluation* required to determine ability of workers to wear the respirator selected.
- *Fit testing* of tight-fitting respirators required to reduce face seal leakage and ensure that the respirators provide adequate protection.
- *Training* required to ensure that employees use respirators safely.
- *Periodic program evaluation* required to ensure that respirator use continues to be effective.



Students learn about the use, care, and maintenance of respirators.



User checks the seal of the respirator for proper wear and use.

A *Federal Register* notice published on April 23, 1998² corrects errors in the regulatory text of the respiratory protection final rule. The corrections to paragraph (n)(3) state that full compliance with the new standard begins on October 5, 1998. Until that time, the previous, unrevised 29 CFR 1910.134 respiratory protection standard remains in effect. There are also corrections to the fit test protocols in Appendix A and the medical questionnaire in Appendix C. Appendix D has been made mandatory. There are other changes to various substance-specific standards, including the lead standard (29 CFR 1910.1025) to remove a provision limiting respirator use to a maximum of 4.4 hours, and the asbestos in construction standard (29 CFR 1926.1101) to permit the use of powered air-purifying respirators (PAPRs) and supplied-air respirators (SARs) with high-efficiency filters in areas where the exposure level will not exceed 1 fiber per cubic centimeter (f/cc) as an 8-hour time-weighted average.

² *Federal Register* 63:20098-20099.

States and territories with their own occupational safety and health plans must adopt comparable standards and extend their applicability to state and local government employees within 6 months. These states and territories include Alaska, Arizona, California, Hawaii, Indiana, Iowa, Kentucky, Maryland, Michigan, Minnesota, Nevada, New Mexico, North Carolina, Oregon, Puerto Rico, South Carolina, Tennessee, Utah, Vermont, Virginia, Virgin Islands, Washington, and Wyoming. Connecticut and New York, whose plans cover public employees only, also must adopt a comparable standard.

To obtain a copy of the *Federal Register* notice, contact the OSHA Publications Office, P.O. Box 37535, Washington, DC 20013-7535; (202) 219-4667 phone or (202) 219-9266 fax. This information is also available on OSHA's Web site at <http://www.osha.gov>.

JSHQ


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“OSHA’s ultimate goal is to reduce injuries and illnesses. Improving and updating existing standards as we did with this one, is one way to reach that goal.”

*Charles N Jeffress,
OSHA Assistant Secretary*

Paragraphs of the Final Standard

Highlights

(a) Permissible practice	This unchanged provision requires that feasible engineering control measures be instituted, with respirators used where engineering controls are not feasible, or during their installation.
(b) Definitions	Adds new definitions for major terms used in the respirator standard
(c) Respiratory protection program	<ul style="list-style-type: none">• Requires written respirator program with worksite-specific procedures updated as necessary to reflect changes in workplace conditions that affect respirator use• Voluntary use of respirators• Program administrator required; qualified by appropriate training or experience• Respirators, training, and medical evaluations provided at no cost to employees
(d) Selection of respirators	 <ul style="list-style-type: none">• Select and provide appropriate National Institute for Occupational Safety and Health (NIOSH)-certified respirators• Identify respiratory hazards; perform hazard evaluation to make a reasonable estimate of exposures• Provide a sufficient number of respirator models and sizes so users can select an acceptable, correctly fitting respirator• Describes respirators for routine use and for atmospheres immediately dangerous to life and health (IDLH)<ul style="list-style-type: none">– Full-facepiece self-contained breathing apparatus (SCBA) with 30-minute service life– Combination full-facepiece pressure-demand SAR with auxiliary self-contained air supply• All oxygen-deficient atmospheres are IDLH<ul style="list-style-type: none">– Exception given in Table II (when oxygen levels are reduced for known, controlled reasons)• Respirators for non-IDLH atmospheres<ul style="list-style-type: none">– Air-purifying respirators for gases or vapors must have either an end-of-service-life indicator (ESLI) or change schedule– Change schedule based on objective information and described in written program
(e) Medical evaluation	<ul style="list-style-type: none">• Employer must provide initial medical evaluation before fit testing or requiring respirator use in the workplace• Medical evaluation performed by a physician or licensed health care professional (PLHCP) using medical questionnaire in Appendix C or medical exam that obtains same information• An additional medical evaluation is required as needed
(f) Fit testing	<ul style="list-style-type: none">• All negative pressure and positive pressure tight-fitting facepiece respirator users must be fit tested• Must pass appropriate qualitative fit test (QLFT) or quantitative fit test (QNFT) using protocols in Appendix A:<ul style="list-style-type: none">– Prior to initial respirator use– Whenever a different respirator facepiece is used– Fit testing repeated annually• Must conduct additional fit test when employee reports, or employer observes changes in employee's condition (e.g., facial scarring, dental changes, cosmetic surgery, or obvious change in body weight) that could affect respirator fit
(g) Use of respirators	<ul style="list-style-type: none">• Prohibits use of tight-fitting respirators by employees with<ul style="list-style-type: none">– Facial hair that comes between the sealing surface of the facepiece and the face or that interferes with valve function– Corrective glasses, goggles, or other personal protective equipment (PPE) that interfere with facepiece to face seal• Wearers must perform a user seal check each time a tight-fitting respirator is put on• Employers must ensure continuing respirator effectiveness• Employees must leave respirator use area, as necessary, to wash, detect leaks, and replace cartridges

Highlights



Technician cleans respirator. Cleaning and maintenance are important protective measures.

- Procedures for IDLH atmospheres:
 - One standby employee or, when needed, more than one employee must be located outside the IDLH atmosphere for rescue
 - Visual, voice, or signal line communication maintained between employees inside and outside
 - Standby employees must be trained and equipped for effective emergency rescue
 - Notify employer or authorized designee before emergency rescue starts
- Procedures for interior structural firefighting:
 - At least two employees must enter and remain in voice or visual contact with one another at all times
 - At least two standby employees are located outside
 - All employees use SCBA
 - One of the standby employees outside may be assigned an additional role (e.g., incident commander) provided this doesn't interfere with their providing assistance for rescue activities
 - Standard does not preclude firefighters from performing emergency rescue before the entire team has assembled

(h) Maintenance and care

- Respirators used must be clean, sanitary, and in good working order
- Use cleaning procedures in Appendix B-2 or equivalent manufacturer's recommended procedures
- Respirators cleaned and disinfected at the following intervals:
 - As often as necessary when issued for exclusive use
 - Before being worn by a different individual if issued to more than one employee
 - After each use for emergency use respirators and those used for fit testing and training

(i) Breathing air quality and use

- Air quality must meet Grade D levels of CGA G-7.1 - 1989 Commodity Specification for Air standard
- Compressors supplying breathing air must:
 - Prevent entry of contaminated air into air-supply system
 - Have suitable in-line air-purifying sorbent beds and filters, maintained per manufacturer's instructions
 - Ensure carbon monoxide (CO) levels do not exceed 10 ppm

(j) Identification of filters, cartridges, and canisters

- NIOSH approval label must not be removed, remain legible

(k) Training

- Employer provides effective training so respirator users are able to demonstrate knowledge of:
 - Why respirators needed
 - Limitations and capabilities of respirator used
 - Effective use of respirators for emergencies
 - How to inspect, put on and remove, use, and perform user seal checks
 - How to clean, maintain, and store
 - How to recognize medical signs/symptoms that limit or prevent effective respirator use
- Employees are trained prior to use, and retrained at least annually
- Advisory information in Appendix D must be given to all voluntary respirator users

(l) Program evaluation

- Evaluations conducted as necessary to ensure written respirator program implemented and effective
- Consult respirator users on program effectiveness and any respirator problems they have had

(m) Recordkeeping

- Records of medical evaluations retained and made available according to 29 CFR 1910.1020
- Fit test records retained until next fit test administered
- Copy of written program retained
- Written materials made available upon request to affected employees and OSHA

(n) Dates

- Effective date of standard - April 8, 1998
- Compliance dates:
 - September 8, 1998 - Determination made that respirator use is required
 - October 5, 1998 - Employer must be in full compliance with all required provisions of the revised standard

Employment in the long-term care industry has grown nearly 50 percent from 1982 to 1992 and is expected to grow to 2.4 million by 2005, according to the Bureau of Labor Statistics. In the past, rapid growth in employment has been known to increase workplace injuries and illnesses, so many concerned employers have contacted Minnesota's Department

implemented outreach programs to teach employers about workplace safety.

The goal of each outreach program is to determine where workplace injuries and illnesses occur most often. Based on the long-term care industry's high injury and illness rates, MNOSHA's Compliance unit developed a training program and guidelines specific to this industry. MNOSHA's Workplace Safety Consultation (WSC) unit also established an industry-specific training program because long-term care employers requested help to educate their employees on workplace safety. Both units established statewide partnerships to help employers interpret and understand industry-specific standards in a user-friendly format.

Bridging the Gap Between MNOSHA and Industry

by Erin Sullivan

of Labor and Industry's MNOSHA Division to request safety and health assistance. Time, money, and staffing constraints, however, prevent MNOSHA from visiting every worksite to help identify and eliminate hazards. To bridge this gap, MNOSHA has developed and

Workplace Safety Consultation

Minnesota's Consultation unit establishes partnerships with organizations to tailor industry-specific training programs. It provides the framework needed for organizations to detect, reduce, and prevent

Employment in the long-term care industry has grown nearly 50 percent from 1982 to 1992 and is expected to grow to 2.4 million by 2005, according to the Bureau of Labor Statistics.



Crystal Lake Good Samaritan Center, Minneapolis, MN.

workplace hazards on their own. Consultation staff help employers help themselves by training them and their employees so they understand and apply OSHA standards appropriately. In 1996, the consultation group conducted 193 statewide training sessions to audiences of more than 7,000 employees.

“Employers who take steps toward a safer workplace may see a decrease in lost-work time due to injuries and illnesses,” says James Collins, Minnesota WSC director. “In addition, workers’ compensation premiums may decrease due to fewer claims,” he points out.

WSC’s first concentrated partnership with a group of long-term care facilities was with the Evangelical Lutheran Good Samaritan Society of Minnesota. Lou Tomsich, a loss control manager for Good Samaritan Society, contacted WSC to ask for help to train their quickly expanding staff about workplace safety.

WSC and the Good Samaritan Society sponsored 14 training seminars to alert employees and management about occupational hazards in their workplace. Now, the Good Samaritan Society can monitor its own safety and health program and views WSC as a valuable resource.

“This type of in-depth training is invaluable to our industry,” says Merle Sampson, Risk Management Division Director, Good Samaritan Society. “The training seminars helped management and employees recognize how to evaluate and control hazards found in long-term care.”

More than 500 people attended the 1997 spring and fall training sessions. These 1-day seminars focused on the most-cited OSHA standards, workplace violence prevention, employee Right-to-Know Standards, bloodborne pathogens,

OSHA recordkeeping, tuberculosis, ergonomics, and A Workplace Accident and Injury Reduction program (AWAIR).

MNOSHA Compliance

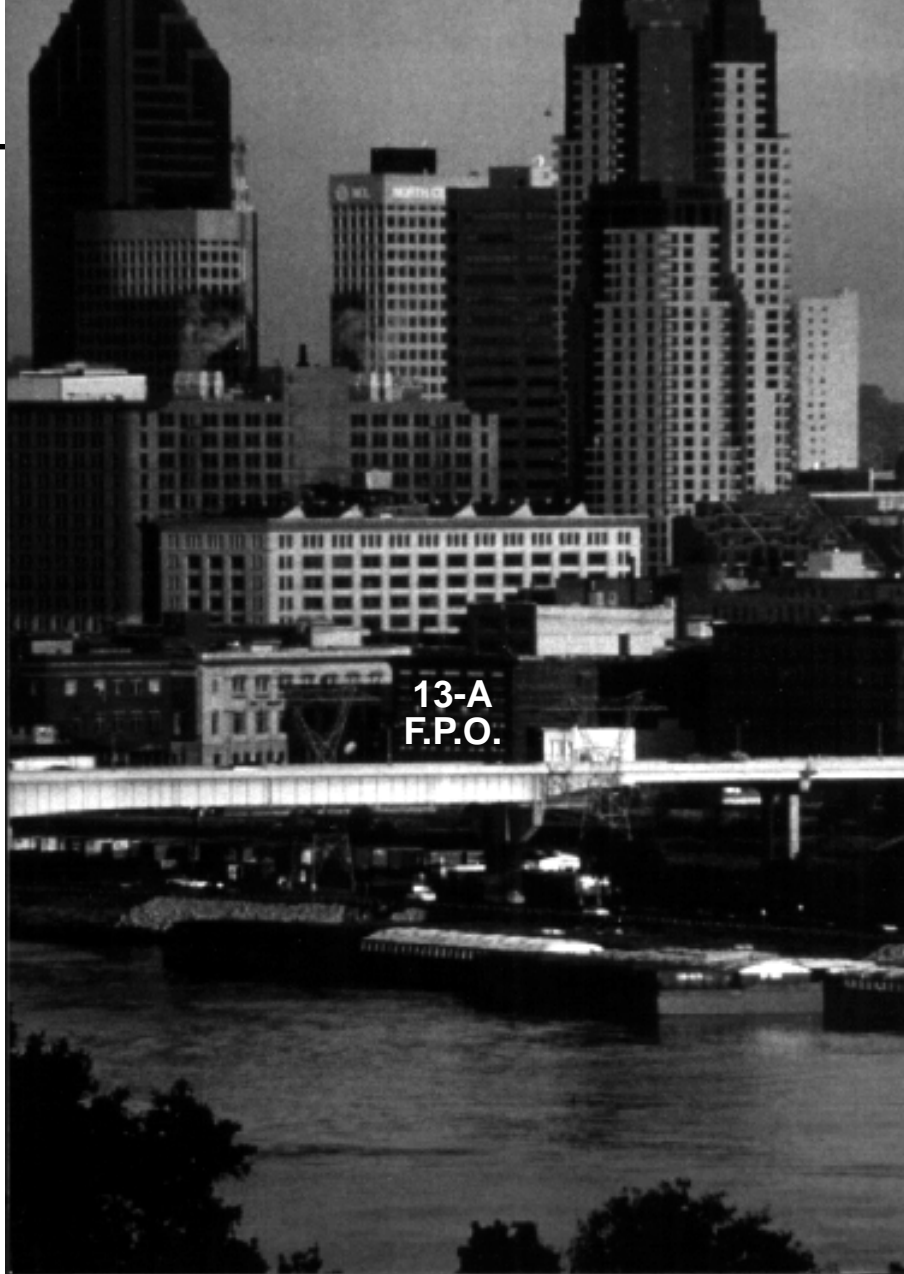
Aware of the climbing injury and illness rates in long-term care, MNOSHA Compliance staff also established and developed a special-emphasis educational program for this industry in 1997. This four-phase program took a proactive approach to include interviews, outreach materials and guidelines, training seminars, and industry-specific inspections identifying the most common occupational hazards in this industry.

During the first phase, a team of MNOSHA investigators visited long-term care facilities to ask the staff about their workplace safety and health concerns. This interaction set the framework for the program’s second phase. Using the staff’s feedback, the investigators

Consultation staff help employers help themselves by training them and their employees so they understand and apply OSHA standards appropriately. In 1996, the consultation group conducted 193 statewide training sessions to audiences of more than 7,000 employees.

and a task force committee of industry professionals developed guidelines for resident handling in long-term care facilities. These guidelines will be used to train long-term care staff on workplace hazards and help them interpret OSHA standards in a user-friendly format.

“Having 20 years experience in the health care industry, I never



Downtown St. Paul, MN.

thought I would have the opportunity to work with OSHA to address our industry's health and safety concerns," says task force member, Candi Shearen, Assistant Director of Nursing at Dayton's Bluff Community Care Center, St. Paul, MN.

These partnerships helped MNOSHA investigators design the third phase of the program: free seminars that would educate long-term care employers and employees on how to reduce accidents and injuries. Individual members of the Association of Professionals in Infection Control and Epidemiology (APIC) throughout the state offered

their services to help set up facilities and organize presentations. These 1-day seminars attracted 225 people and focused on OSHA's inspection process, ergonomics, workplace violence prevention, bloodborne pathogens, tuberculosis, Minnesota's AWAIR program, and included a question and answer session.

"This was a good opportunity for participants to get clarification and ask questions about infectious issues in a non-threatening atmosphere," says task force member, Jan Manahan, Infection Control Supervisor, St. Mary's Mayo Medi-

cal Center, Rochester, MN. "After participating in the program, I now feel that MNOSHA understands our health and safety issues in our workplace."

The fourth and final phase of the program will involve random inspections to check long-term care facilities and review their workplace safety programs. The program's success will be measured by the employers' commitment to correct identified hazards.

The development of an occupational safety and health program in a long-term care setting is a challenging task, but less of a burden when employers and employees work together. By incorporating MNOSHA's recommendations, a long-term care facility should come off MNOSHA's inspection list due to fewer injuries and illnesses. Other benefits are lower workers' compensation costs, improved employee retention, and a safe and healthful work environment.

"We expect to find good results during our inspections because of all our proactive training efforts," said Carol Brotski, MNOSHA Senior Safety Investigator.

In the future, both MNOSHA Compliance and WSC plan to focus on other industry-specific programs for employers and employees as they work to bridge the gap between OSHA and industry.

To request a free guidebook for resident handling in long-term care facilities, call (612) 296-2116 or write to: Minnesota OSHA Compliance, Department of Labor and Industry, 443 Lafayette Road, St. Paul, MN 55155. For more information, visit MNOSHA's Web site at <http://www.doli.state.mn.us>.

JSHQ

Sullivan is a writer-editor for the Minnesota Department of Labor and Industry, St. Paul, MN.

OSHA Reinvention—

A Proactive Approach

by Robert Pitulej

OSHA Assistant Secretary Charles Jeffress believes that the agency “...is not simply the enforcer of rules and regulations. We are professionals in workplace safety; we must give labor and management our best advice for reducing injuries, illnesses, and fatalities among their workers.” This philosophy also captures the intent of OSHA’s reinvention efforts. Although the agency has a strong record of enforcing rules and regulations, external factors such as decreased resources, constant growth in the American work force, and increased feedback from stakeholders indicate that the agency’s traditional focus is simply not enough to fully accomplish its mission. The agency’s reinvention efforts have helped both OSHA’s field and national office staff rediscover traditional tools and methods and develop some new ones in the quest to reduce worker injury, illness, and fatality rates.

Initial Focus: The Federal Enforcement Field Offices

Three and a half years ago, OSHA’s Design Team, consisting of union and management representatives, developed a model of

how agency field offices should work. Part of the new strategy focuses field resources towards workplaces where there is the greatest potential to minimize injuries and illnesses and evaluates components within the field office, such as strategy, processes, organization, and measurement. This effort, known as Getting Results and Improving Performance (GRIP), examined field office processes to determine where improvements in efficiency could be obtained and allow the most effective and efficient use of limited resources. When field offices transition to the GRIP model, they receive training on how to re-evaluate their processes and procedures—including the complaint process, onsite inspections, citation processing, abatement assurance, and freedom of information requests—and determine where and

The agency’s reinvention efforts have helped both OSHA’s field and national office staff rediscover traditional tools and methods and develop some new ones in the quest to reduce worker injury, illness, and fatality rates.



The GRIP model applies the team concept to address safety and health challenges proactively via strategic and response teams—a trend that has come to fruition within the agency, because it is a better and more effective way to protect workers.

OSHA staff in Jackson, MS, area office celebrate completion of their GRIP training. From left to right, back row: Carmen Bunch, Nate Williams, Billy Chandler, Eugene Stewart, Priscilla Jordan, Jesse Baynes, Donna Bradford, Edward Taylor, Courtney Bohannon. Front row, left to right: Denise Thomas, Vivian Stevens, Deputy Regional Administrator Karen Mann, Patrick Whavers, OSHA Assistant Secretary Charles Jeffress, Ken Maglicic (Vice President, National Council of Field Labor Locals), Luneal Dickey, and Carolyn Wilson-Smith.

how they can improve their performance.

On a case-by-case basis, area offices have eliminated duplicative procedures, have reduced their response times to public complaints and information requests by 20 to 40 percent, on average, and have developed local initiatives that target the reduction of workplace injuries, illnesses, and deaths. One such initiative, the Parsippany, NJ, statewide Highway Construction Project,¹ mobilized an interagency, public and private task force to find better ways to protect highway construction workers. Since the New Jersey program began in 1994, more than 4,552 workers have been removed from potentially serious hazards.

¹ See also, Edwin Bowers "Parsippany Looks at New Ways of Protecting Workers," *Job Safety & Health Quarterly* 7(2):23-24, Spring 1996; and Judith Weinberg, "Changing the Way We Do Business," *Job Safety & Health Quarterly* 9(1&2):21-27, 1998.

The GRIP model applies the team concept to address safety and health challenges proactively via strategic and response teams—a trend that has come to fruition within the agency, because it is a better and more effective way to protect workers. Strategic teams in GRIP area offices enable staff closest to the frontline and the American worker to proactively find ways to address, reduce, and help prevent injuries, illnesses, and fatalities, such as in the Parsippany, NJ, initiative.

Since the first GRIP pilot in February and March of 1995 in area offices in Parsippany, NJ, and Atlanta (East), GA,² there have been several adjustments. First and foremost, OSHA is clearly focusing on getting results, such as reductions in injuries and illnesses, and on improving area office performance rather than on simply being concerned with implementing a model.

² See Susan Hall Fleming, "'New OSHA' Works in Atlanta-East and Parsippany," *Job Safety & Health Quarterly* 6(4):14-15, Summer 1995.

A case in point is the Kansas oil and gas intervention undertaken by the Wichita Area Office and Overland Park District Office. OSHA's historic response to safety and health in the Kansas oil and gas industry was reactive and had not reduced fatalities in this industry, which was averaging approximately three per year. Beginning in August 1995, Team Kansas initiated a proactive approach to removing hazards in this industry. The team formed a partnership with the Kansas Independent Oil and Gas Association to provide training, disseminate information on fatalities, and encourage voluntary compliance. The Team also used OMDS and BLS data³ to identify employers with the highest number of fatalities and the Standard Industrial Classification codes with the highest number of occupational injuries and illnesses involving days away from work. The results were outstanding. While the program was running, from September 1995 through September 1997, there were no fatalities reported.⁴ Overall, the positive impact of this program was multiplied when Penzoil Corporation adopted the Team Kansas "Petroleum Safety Training" program for their operations in Texas.

Key to the entire reinvention effort has been developing the right mix of proactive and reactive solutions to worker health and safety issues. OSHA now applies a variety of strategic interventions based on the particularities of the health and safety issue and the parties involved. For example, for employ-

ers with a negative record of concern for worker safety and health, GRIP offices will continue to respond with comprehensive inspections. For those employers that show a willingness to develop and further improve their worker safety and health programs, OSHA will offer partnerships, outreach, and consultation as a way of doing business.

Currently, many offices are moving to the new model in several regions, thereby helping the agency achieve its commitment of transitioning all 67 of its federal enforcement offices by December 1999. To date, there are a total of 32 GRIP offices, 15 of which were trained and transitioned by newly instituted Regional Rollout Teams. These include offices in Bridgeport and Hartford, CT; Wilkes-Barre, PA; Wilmington, DE; Birmingham and Mobile, AL; Atlanta (West), GA; Jackson, MS; Toledo and Cincinnati, OH; Peoria and Fairview Heights, IL; Dallas and Austin, TX; Little Rock, AK; and Bismarck, ND.

OSHA's Reinvention Office in Washington, DC, and the OSHA



OSHA Assistant Secretary Charles Jeffress (left) joins Area Director Clyde Payne in celebrating with area office staff on GRIP accomplishments.

³ Office of Management Data Systems data based on OSHA inspections and Bureau of Labor statistics injury and illness data.

⁴ Unfortunately, however, in October 1977, an unprotected employee, at an employer who had not taken advantage of the training and outreach, fell to his death.

The bottom line for OSHA's GRIP project is to enable the agency to better serve all stakeholders—from workers to employers to the Congress.

Training Institute in Des Plaines, IL, work in partnership with the regions and their Rollout Teams to deliver a consistent and quality model for each area office and to transition offices from the old way of doing business to the new GRIP model. Regional teams have been highly successful allowing regions to increase ownership of the new process and customize it to fit the needs of their field offices.

GPRA and OSHA's 5-Year Strategic Plan

With nearly half of the agency's 67 federal enforcement offices rolled out, how will OSHA take advantage of these new skills and tools available to better protect workers? The answer may be that the GRIP project is one of the best tools to help the agency deliver its 5-year Strategic Plan. The 1993 *Government Performance and Results Act (GPRA)* requires agencies to develop 5-year integrated plans that measure performance and desired results.⁵ The level of coordination and integration required throughout the agency by the Strategic Plan is unprecedented for OSHA as well as for other agencies.

OSHA's Strategic Plan has several goals and objectives that GRIP offices will help achieve. For example, a main goal centers on improving workplace safety and health. The GRIP offices have undertaken more than 50 strategic initiatives aimed at reducing workplace injury, illness, and fatality rates. These initiatives include partnering with state and local entities to attack highway safety problems in New Jersey, working with associations in Kansas to eliminate

fatalities in the oil and gas industry, addressing safety challenges in the poultry industry in Georgia, and partnering with other federal agencies, such as the Immigration and Naturalization Service, in OSHA's Southwest Region to address federal worker safety and health issues.

Another strategic goal focuses on changing and improving workplace culture. Again, GRIP offices are taking the lead for the agency in this area by eliminating outdated practices and attitudes and replacing them with team-based approaches and a cooperative spirit. The experiences and successes of the GRIP offices should prove invaluable to the agency as it moves into the next century and continues to explore better ways to protect American workers.

The bottom line for OSHA's GRIP project is to enable the agency to better serve all stakeholders—from workers to employers to the Congress. OSHA's commitment to improvement has been rewarded and recognized time and time again. Most recently, during the 5th Anniversary Celebration of the National Partnership for Reinventing Government in March, Vice President Gore recognized OSHA for nationalizing a derivative of the Maine 200 program.⁶ Although such recognition is well deserved and well received, those on the frontlines of the redesigned offices know that it's all about OSHA's primary objective—reducing worker injury, illness, and fatality rates. **JSHQ**

Pitulej is a program analyst in OSHA's Office of Reinvention, Washington, DC.

⁵ See also, Anne Crown-Cyr, "A Strategy for Improving Worker Safety and Health," *Job Safety & Health Quarterly* 9(1&2):36-38, Fall/Winter 1998.

⁶ See Meredith Falacci, "Maines' 'Top 200' Program", in *Job Safety & Health Quarterly* 5(1):35-38, Fall 1993.

THE TOOLBOX

Spoil Pile Protection 1926.651(j)(2)

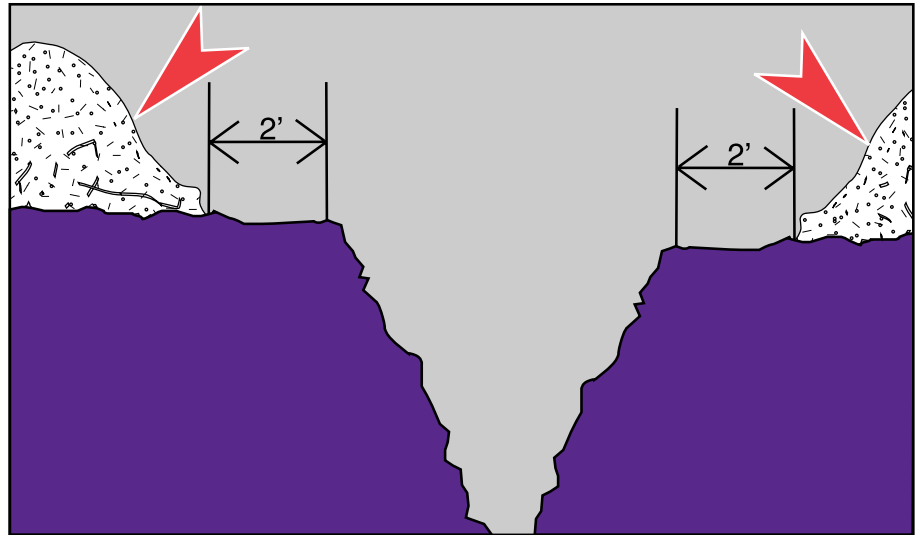
Rank in Frequency Cited: #16

Rule

Employees shall be protected from excavated or other materials or equipment that could pose a hazard by falling or rolling into excavations. Protection shall be provided by placing and keeping such materials or equipment at least 2 feet (.61m) from the edge of excavations, or by the use of retaining devices that are sufficient to prevent materials or equipment from falling or rolling into excavations, or by a combination of both, if necessary.

Intent

The intent of this standard is two-fold. By requiring excavated material (spoils) and equipment to be set back 2 feet, it (1) decreases the risk of spoils or equipment from rolling back into the excavation and on top of employees; and (2) reduces superimposed loads on the face of the excavation which possibly could contribute to a cave-in. If the superimposed load of the spoils has been considered in the design of the protection system, the spoils may be placed at the face of the excavation—if they are retained by a sufficient strength (i.e., can resist any reasonably anticipated forces applied to it, and/or height) device/operation, such as barricading or wire mesh.



VIOLATION

IN COMPLIANCE

Proper spoil pile set back (above & right). Arrows show spoil piles.

Detach Here



VIOLA TION

IN COMPLIANCE

Among other violations, spoil pile (arrow) at edge of the trench.

*Derived from OSHA's publication, *The 100 Most Frequently Cited OSHA Construction Standards in 1991: A Guide for the Abatement of the Top 25 Associated Physical Hazards*, Washington, DC, February 1993.

Hazards

- Cave-in caused by superimposed load on face of excavation. Probable injury is death.
- Rolling or falling spoils or equipment. Probable injuries could range from head concussion to bruises. Extreme cases could result in death due to suffocation or crush injuries.

(Among Other) Suggested Abatements

- Conduct a pre-job survey of the site to ensure the location is large enough to accommodate a 2-foot set back for the spoil pile. If not, materials must be obtained to provide an alternate retaining device.
- In some cases, contractor may need to haul spoils to a tempo-

rary site until the excavation is ready to back fill.

Selected Case Histories

A spoil pile had been placed on top of a curb, which formed the west face of a trench. A backhoe was spotted on top of the spoil pile. The west face of the trench collapsed on two employees who were installing sewer pipe. One employee was killed; the other received back injuries. The trench was 8 feet deep with vertical walls. No other protection was provided. In fact, the superimposed loads of the spoil pile and backhoe may have initiated the collapse.

Comments

(1) Many excavations/trenches dug for utility lines are located in narrow right-of-ways. Often spoil

piles are placed at the edge with no retaining device. This situation can be avoided with a sound pre-job survey and plan.

(2) The fatality rate for trenching and excavation work was 112 percent higher than the rate for construction in general.

(3) This standard was cited in 37 fatality inspections since it became effective in March 1990.

Additional Documents to Aid in Compliance

Guide for the Daily Inspection of Trenches and Excavations. Excavation Safety: Excavation, Trenching, and Soil Mechanics; Appendix A. U.S. Department of Labor, Occupational Safety and Health Administration, OSHA Training Institute, Des Plaines, IL.

JSHQ

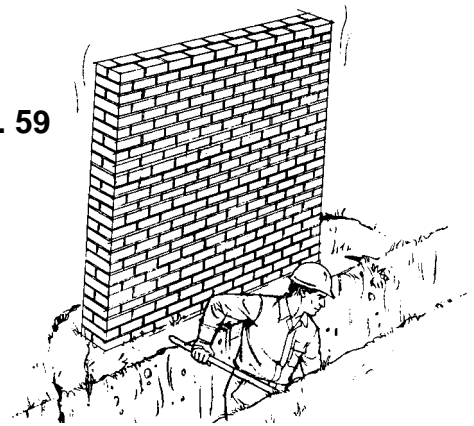
NOTE: In the last issue of *JSHQ* (Fall/Winter 1998, Vol. 9, Nos. 1&2), the *Toolbox* column contained erroneous information on rebars.

On page 55 of that issue, old photos depicted "mushroom style" rebar caps as being "In Compliance" with *Title 29 of the Code of Federal Regulations*, Part 1926.701(b), which is *reinforcing steel* under Subpart Q—Concrete and Masonry Construction. Please note that the rebar caps shown will only provide protection from abrasion and are **inadequate for use as impalement protection** as the photos suggested.



Accident Report

From the U.S. Department of Labor
Occupational Safety and Health Administration *FatalFacts* No. 59



Accident Summary

Accident Type	Struck by falling wall
Weather	Clear/wet soil
Type of Operation	Trenching
Crew Size	2
Competent Safety Monitor on Site?	No
Safety and Health Program in Effect?	Inadequate
Was the Worksite Inspected Regularly by the Employer?	No, short duration
Training and Education Provided?	Some
Employee Job Title	Laborer
Age/Sex	27/male
Experience at This Type of Work	1 year
Time on Project	1 day

Detach Here

Brief Description of Accident

An employee was in the process of locating an underground water line. A trench had been dug approximately 4 feet deep along side a brick wall 7 feet high and 5 feet long. The brick wall collapsed onto the victim who was standing in the trench. The injuries were fatal.

Inspection Results

As a result of its investigation, OSHA issued citations for violation of the standard.

Accident Prevention Recommendations

The contractor should not permit employees to excavate below the level of the base of foundation foot-

ings when walls are unpinned [*Title 29 Code of Federal Regulations* Part 1926.651(I)(1)].

Sources of Help

- **OSHA 2202 Construction Industry Digest**—includes all OSHA construction standards and those general industry standards that apply to construction. Order No. 029-016-00151-4, (\$2.25). Available from the Superintendent of Documents, Government Printing Office, Washington DC 20402-9325, phone (202) 512-1800. Make checks payable to the Superintendent of Documents. For phone orders, use Visa or MasterCard.
- For information on OSHA-funded free consultation services, call the nearest OSHA area office listed in telephone directories under U.S. Department of Labor or under the state government section where states administer their own OSHA programs.
- **OSHA Safety and Health Training Guidelines for Construction** (Available from the National Technical Information Service, 5285 Port Royal Road, Springfield, VA 22161; (703) 605-6000 or (800) 553-6847; Order No. PB-239-312/AS, \$27). Guidelines to help construction employers establish a training program in the safe use of equipment, tools, and machinery on the job.
- **OSHA 2254 Training Requirements in OSHA Standards and Training Guidelines**. Order No. 029-016-00160-3, (\$6.00).

Available from the Superintendent of Documents, Government Printing Office, Washington DC 20402-9325, phone (202) 512-1800. Make checks payable to the Superintendent of Documents. For phone orders, use Visa or MasterCard.

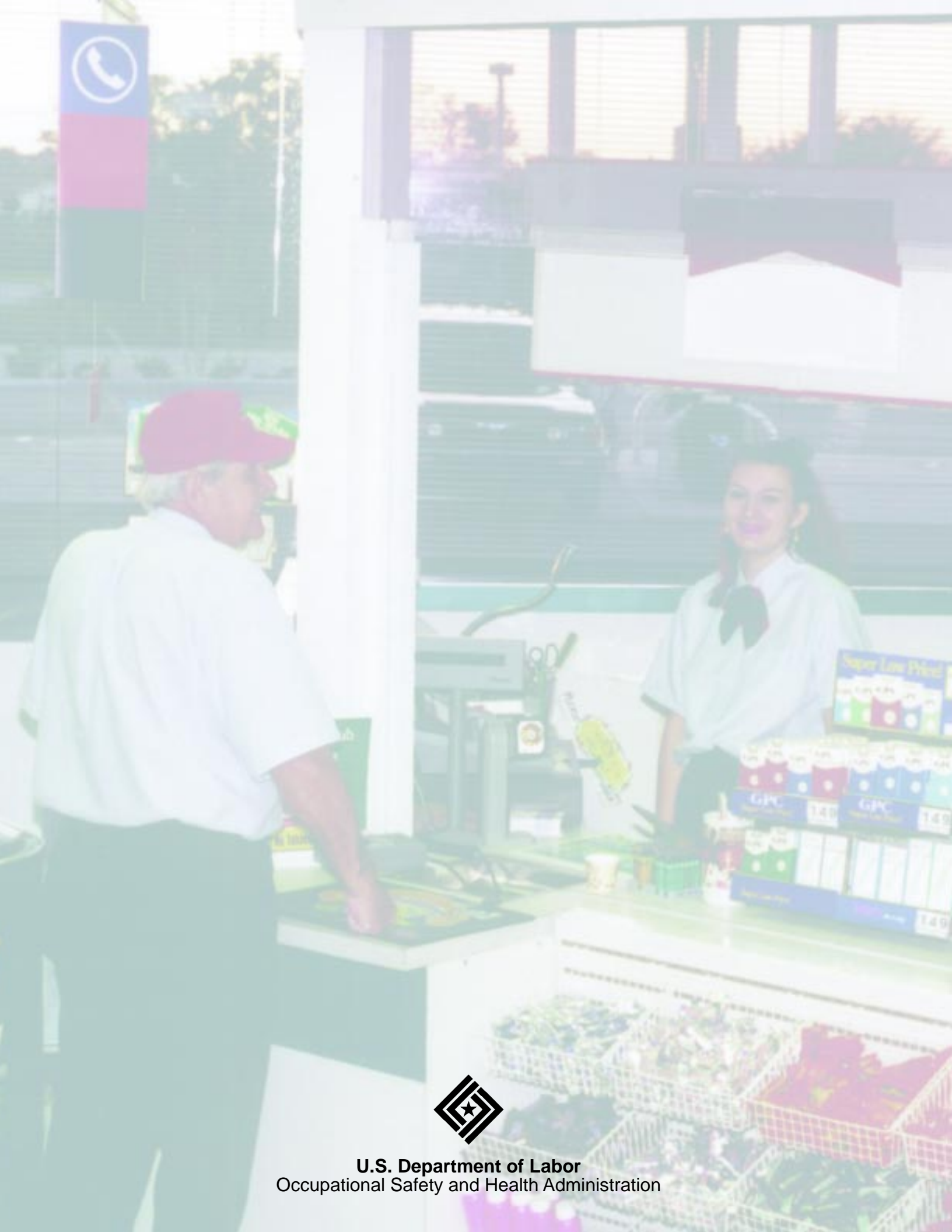
- Courses in construction safety are offered by the OSHA Training Institute, 1555 Times Drive, Des Plaines, IL 60018, (847) 297-4810.
- OSHA regulations, documents, and technical information also are available on CD-ROM, which may be purchased from the Government Printing Office, phone (202) 512-1800 or fax (202) 512-1800; Order No. S/N 729-13-00000-5; Cost \$38 annually, \$15 quarterly. This and other information and assistance also are available online at <http://www.osha.gov>. **JSHQ**

Note: The case described was selected as being representative of fatalities caused by improper work practices. No special emphasis or priority is implied nor is the case necessarily a recent occurrence. The legal aspects of the incident have been resolved, and the case is now closed. Your company or workplace is eligible to receive one free copy of this leaflet, which you can duplicate and share with your co-workers. To be placed on the distribution list, send a self-addressed label (using four or fewer lines) with your title and address to *FatalFacts*, OSHA, Room N-3647, 200 Constitution Avenue, N.W., Washington, DC 20210.

OSHA is on the World Wide Web at <http://www.osha.gov/>



Meet us in cyberspace to view Compliance Assistance, Standards, Directives, News Releases, Speeches, What's New, Frequently Asked Questions, Most Frequently Violated Standards, OSHA/Consultation Office Directory, Publications, Fact Sheets, and more!



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