

Miller, Diane M. (CDC/NIOSH/EID)

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To: NIOSH Docket Office (CDC)
Cc: Chen, Jihong (Jane) (CDC/NIOSH/EID) (CTR); Doyle, Glenn (CDC/NIOSH/EID)
Subject: 132 - WorkLife Comments

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Comments

#3: Mid-level management support is completely distinct from worker involvement; the latter is not at all guaranteed by the former. The last sentence should be moved into a new item #4:

"Employee participation. Mechanisms are also important that ensure that employees are not just recipients of services but have opportunities to contribute to goal-setting, program design and implementation."

(N.B. To keep to 20 items in total, #14 and #15 could readily be combined into one.)

#4 (Integrate systems): this is important to include, but it does not address the separate issue that many factors which impact employee health are not "programs" per se but rather secondary consequences of how the work is organized (e.g., scheduling, division of labor), the tools and materials used, and so on. The need to coordinate and integrate applies here, too, but the process is entirely different.

#9: By law, employees should be informed of many occupational exposures (noise, chemicals, etc.) so, in theory, at least, they could report those through a HRA process, although the information originates from the employer or a contractor of the employer's. Other exposures (e.g., ergonomic hazards) are not covered explicitly by any OSHA regulations.

Thus, linking the HRA data to all of the employer's exposure databases would provide a more efficient and complete profile for each employee.

13: "Be willing to start small AND scale up."