# NATIONAL ADVISORY COMMITTEE ON OCCUPATIONAL SAFETY AND HEALTH (NACOSH)

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## Minutes of May 29, 2008 200 Constitution Avenue, N.W., Room N3437 at 9:00 a.m. Washington, DC 20210

#### MEMBERS PRESENT:

Douglas Kalinowski	Chairman and Public Representative
Jennifer Bailey	Management Representative
James Blessman	Health Representative
Emory Knowles	Safety Representative
Barbara McCabe	Labor Representative
Alan McMillan	Public Representative
Jim Swartz	Management Representative
Susan Randolph	Health Representative
Karl Jacobson	Safety Representative
Dr. Jo Debo Dr. B Dr. K Dr. Ja Steph Maur	n G. Foulke, Jr., Assistant Secretary, OSHA hn Howard, Director, NIOSH rah P. Crawford, NACOSH DFO ridgette E. Garrett, NIOSH eith L. Goddard, OSHA mes W. Grosch, Ph.D., NIOSH anie Pratt, NIOSH een Ruskin, OSHA regory R. Wagner, M.D., NIOSH

#### Welcome and Introduction of Committee

Chairman Kalinowski opened the meeting by welcoming the members and the public. Introductions were made by the committee members. The minutes from the previous meeting were approved. The meeting's agenda was based on the issues that were raised at the last meeting based on interest of the members.

### **OSHA Activities Update**

Assistant Secretary Foulke welcomed everyone to the meeting and thanked the members for their service. He said that his bottom line and that of every

employer should be that every employee goes home safe and sound every night to their families and loved ones. He said once that bottom line is taken care of then the financial bottom line seems to take care of itself. He thanked Mr. Kalinowski for serving as committee chairman. He noted that five members' terms will expire in June and OSHA has received approximately 75 nominations. He will work closely with NIOSH on presenting a nomination package to Secretary Elaine Chao.

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Mr. Foulke updated the committee on personnel changes. He announced that Tom Stohler had been selected as the new Deputy Assistant Secretary replacing Bryan Little. Additionally, Paula White retired after more than 15 years as the Director, Directorate of Cooperative and State Programs. Steve Witt, formerly Director, Directorate of Construction, had been appointed as her replacement. Ruth McCully, who served as Director, Directorate of Science, Technology and Medicine, accepted a position with the Environmental Protection Agency. Jennifer Ashley is the new Director of the Office of Communications. Ken Atha was selected as the new Regional Administrator for Region IX in San Francisco. John Hermanson is the new OSHA Regional Administrator for Region III in Philadelphia. The Regional Administrator position in Region II in New York is currently vacant.

Regarding OSHA's budget, Mr. Foulke reported that President Bush requested \$501.7 million for OSHA in FY 2009. This request represents a boost of nearly \$15.7 million over FY 2008 level. OSHA is proposing to increase resources by more than \$11.3 million to support enforcement and \$5.2 million to provide compliance assistance to employers and employees especially in small businesses. He believes the President's budget provides the resources need to continue to make a positive impact on safety and health.

In the area of standards, Mr. Foulke reported that on May 9, 2008, OSHA published in the Federal Register a request for comments on proposed guidance on workplace stockpiling of respirators and face masks for pandemic influenza. Comments will be accepted until July 8, 2008.

In the April 21 Federal Register, OSHA announced a July 22 informal public hearing on the proposed rule for confined spaces in construction. Also, OSHA is in the final stages of the proposed rulemaking for cranes and derricks.

Mr. Foulke said that looking ahead for the rest of 2008, he anticipates making substantial progress on the regulatory agenda and expects to issue a number of proposals or final rules. These include: a final rule on longshoring and marine terminals (vertical tandem lifts), proposed revision to walking and working surfaces standards, and a final rule to revise standards for electrical power at transmission and distribution.

Regarding enforcement, on May 21, OSHA announced its 2008 site-specific targeting plan that will focus on approximately 4,000 high-hazard worksites on its primary list for unannounced comprehensive safety and health inspections. The site-specific targeting is the primary focus on those employers who have high injury illness rates. OSHA will send out 14,000 letters to companies that have the highest lost time and injury illness rates.

OSHA has also randomly inspected about 170 workplaces with 100 or more employees across the nation that reported low injury and illness rates for the purpose of reviewing their actual degree of compliance with the OSHA requirements. He wants to make sure that all employers are complying with the recordkeeping standard.

OSHA reissued the combustible dust National Emphasis Program instructions to focus on specific industries that experience frequent combustible dust incidents. The agency is looking at industries that have a high potential for catastrophic accidents. He cited the combustible dust explosion at the Imperial Sugar plant in Savannah, GA.

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In February 2008, OSHA announced its new National Emphasis Program to target worksites where there is a risk of developing silicosis. Exposure to crystalline silica threatens nearly two million employees annually.

He mentioned that the Directorate of Construction is exploring ways to promote greater crane safety in the industry. With respect to the Directorate of Science, Technology and Medicine, OSHA has issued several new safety and health information bulletins discussing hazardous operations and equipment including transporting oil, exploration and production waste liquids.

OSHA and NIOSH issued a joint safety and health bulletin on safer medical devices for use in surgery and also the agency published guidance addressing employee exposure to diacetyl and the use of flavorings and latex use in health care facilities.

Under emergency preparedness and response, the National Response Framework was finalized in January. OSHA has worked with the Department of Homeland Security, the White House and HHS. They have been working together to make sure that the lessons learned from the 2005 hurricanes were integrated into the new National Response Framework. This framework basically provides an overall protocol for our nation to have timely and effective activation of the procedures to respond to all emergencies and disasters. OSHA's responsibilities are: to protect first responders and rescue workers; to

provide assistance for those who are coming in to provide demolition of the facilities that have been destroyed; and to provide assistance on the rebuilding efforts.

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Under training and education in FY 2007, approximately 250,000 were trained through OSHA's outreach training programs by trainers authorized by OSHA to conduct a 10-hour and 30-hour safety courses in construction or general industry. So far in 2008, more than 368,000 people have received training to exceed the numbers in FY 2007. There are 10 instructors certified by the National Heart Association and nearly 200 employee volunteers prepared to assist in the event of a cardiac emergency at work, home or in their communities. This successful program is now being expanded to other DOL agencies beyond OSHA.

In March OSHA was seeking grant applications for \$6.7 million in Susan Harwood training grants. The agency is reviewing applications.

The cooperative state programs continue to grow. In FY 2007 there were 79 new alliances. As of April 30, OSHA had assigned 45 new alliances and there are currently more than 490 alliances nationwide. Since the beginning of 2008 OSHA has signed 49 strategic partnership agreements. There are 170 active agreements covering 7,750 employers and more than 425,000 employees nationwide. There are nearly 1,100 SHARP worksite participants. SHARP is the small business recognition program. OSHA welcomed 254 new VPP participants including 78 federal agency sites bringing the total number of current VPP sites to almost 2,000.

In January 2008, OSHA unveiled its enhanced Office of Small Business Assistance website. It was redesigned to make it easier to have more data access.

Two things added are the Safety Pays e-tool and the Spanish language safety link.

On April 21, OSHA kicked off its summer job safety campaign. Secretary Chao appeared on the Today Show with Al Roker and discussed the importance of the program. There was a kick-off ceremony in 10 different sites around the country, one in each region. General Electric convinced NBC to have their regional affiliates do live broadcasts in those regions. Mr. Foulke said that teens do not always receive safety training when they come to a job. Statistics show that they get injured and killed in far higher numbers proportionately than the proportion that they represent in the workforce. In the construction industry, they represent about 5 percent of the construction workforce, yet they account for between 20 and 25 percent of the fatalities. Mr. Foulke stressed that this is an important area and he appreciated NBC and Secretary Chao for their involvement.

Mr. Foulke discussed the managers meeting he held in April 2008. There were about 220 managers and the theme was "OSHA 2020 – One OSHA One Mission." The conference focused on ensuring that OSHA will continue its mission to reduce injuries, illnesses and fatalities. He said the three values for OSHA are respect, integrity and commitment. He identified the vision as having an effective safety and health management system in every workplace in America.

#### NIOSH UPDATE

Dr. Howard thanked everyone for their participation. He said that the NIOSH program portfolio contains 32 programs topped with eight industrial sector programs in the National Occupational Research Agenda (NORA). He highlighted two of the sectors which were highlighted recently in the Workers' Memorial Day publication of the Morbidity and Mortality Weekly. The first article focused on commercial fishing fatalities. Commercial fishing is one of the

most dangerous occupations in the U.S. with an annual fatality rate of about 115 deaths per 100,000 during 2000 to 2006. The number contrasts with the average annual fatality rate of four deaths per 100,000 workers in the U.S. During the nineties the Alaska Pacific office (located in Anchorage) initiated a lot of safety interventions in Alaskan fisheries, and as a consequence those fisheries' fatality rates have declined.

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The article noted that from 2000 to 2006 three other Pacific states – California, Oregon and Washington – had a combined average annual commercial fishing fatality rate of 238 deaths per 100,000 fishermen which is double the nationwide fatality rate during the same period. He also mentioned that we should be thinking about the biorefinery industry. He said that the price of oil is spurring a lot of oil and gas exploration as well as interest in carbon neutral renewable resources for the production of energy. He said that the advances in agricultural genetics, biotechnology, process chemistry, and engineering are leading to this new manufacturing concept for taking biomass and converting it into fuel. There is more world discussion about diversion of corn from food to fuel, known as biorefinery. It is something that the occupational safety and health community has not given much thought. He encouraged the committee to think about it because many more workers will be involved in this new industry.

The second article analyzed fatal injuries in oil and gas extraction as part of their new oil and gas sector program under its mining program and found that the industry had an average annual fatality rate of 30.5 per 100,000 workers which is about 404 fatalities during 2003 to 2006. Nearly 50 percent of the fatalities were due to motor vehicle accidents. NIOSH will use this survey to develop interventions to reduce fatal and nonfatal injuries in oil and gas exploration and will collaborate with OSHA.

Dr. Howard reported that NIOSH has received four completed National Academy of Sciences reviews – the opinions from the academy and the hearing loss prevention program, the mining program, the agriculture program, and the respiratory disease program. NIOSH presents the reports to their board of scientific counselors for their review. The board makes their own recommendations and then NIOSH will finalize the implementation plan.

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He also mentioned a technical report entitled, "Qualitative Risk Characterization and Management of Occupational Hazards (Control Banding): A Review of the Literatures and Critical Analysis" which was posted on the NIOSH website on May 14. Control banding is an alternative to quantitative risk assessment as the basis for taking some action in terms of controlling a hazard.

NIOSH is conducting a review of its draft document which is an alert preventing chronic beryllium disease and beryllium sensitization. The comment period ended on May 12 and the agency is currently reviewing the comments.

Dr. Howard mentioned their "Prevention through Design Initiative" conference held in July 2007. He said that the April issue of the National Safety Council's Journal of Safety Research contains all the papers that were presented at the conference and encouraged the group to go to <u>www.sciencedirect.com</u> to review the papers. NIOSH hopes to develop its full strategic plan which arose from that meeting in the fall of 2008.

He announced the Direct Reading and Alternative Methods workshop, also known as DREAM, to be held on November 13 and 14 in Crystal City. He said that direct reading exposure methods is an area that we want to direct people's attention to, into improving and developing new direct reading analytical methods as a way to support real time occupational changes in the workplace. In the home healthcare area, NIOSH has developed a hazard review on home healthcare which is another growing industry. It is in the final stages of clearance in the Office of the Director and he hopes to have it in the fall. He mentioned that the Bureau of Labor Statistics has said that the home healthcare industry is projected to be the fastest growing occupation during the next decade. He said it will have a huge effect on those in the area of occupational safety and health to figure out how to protect individuals working in these unique environments.

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He said the food flavorings or diacetyl is still an important issue. NIOSH is doing some work to refine its analytical method for the measurement of diacetyl which is extremely important if there is going to be any kind of exposure assessment. He said they have found that high levels of humidity affect that analytical method. NIOSH is working with the OSHA Salt Lake City Laboratory to refine their analytical method to put a correction factor there for areas of manufacturing plants or kitchens that have high humidity that are using diacetyl.

Dr. Howard cited a Seattle Post Intelligencer article about cooks and other kitchen workers being exposed to diacetyl through release from butter flavored oils which are very popular in commercial kitchens. NIOSH is conducting several health hazard evaluations (HHEs) to investigate the exposure of cooks to diacetyl. Three of those HHEs have been filed by labor unions representing grill chefs and he hopes to have those done soon.

NIOSH is updating its strategic plan in the area of nanotechnology. There is a current intelligence bulletin on titanium dioxide and medical screening for workers potentially exposed to engineered nanoparticles. He hopes to complete

the review on the medical screening draft by the end of the year. Dr. Howard said that there was an article published in Nature and Nanotechnology on May 20 which caused a stir from the United Kingdom. The authors dosed the peritoneum of mice with carbon nanotubes and showed a similar pathological effect to that which is caused by asbestos fibers The article continues to feed concerns about the implications of nanotechnology.

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Dr. Howard discussed the Genetic Information Nondiscrimination Act (GINA) that President Bush signed on May 21. The act prohibits employers and insurers from using genetic information to discriminate against individuals in hiring and firing, paid promotion, health insurance, etc. He called it a critical step in preventing discrimination. It is also an issue for those in the occupational safety and health area to examine because, in the case of beryllium, researchers have demonstrated in a number of studies over the years that there is increased susceptibility due to genetics. He called the idea of genetic factors contributing to the sort of variability of response of workers to hazards an important one.

In the social media, the NIOSH science blog has gone from monthly to bi-weekly to weekly. He said that people are reading the blog, sending in comments, and visitor demand is up. All NIOSH videos are available on YouTube. The videos are being downloaded in significant numbers so there is a subpopulation of folks who will go to YouTube that will not come to the OSHA site or the NIOSH site. NIOSH is also supplying information for Wikipedia.

Dr. Howard announced that the European Union has passed the REACH (Registration, Evaluation, Authorization and Restriction of Chemicals (REACH) program. He mentioned that NIOSH had reached out to the Director of ECHA and had a meeting in Helsinki because the database that the European Chemicals

Agency will develop will be important for all in safety and health in terms of knowing the toxicity issues in all sorts of different venues.

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### WORKLIFE INITIATIVE PRESENTATION

Dr. Greg Wagner presented information on NIOSH's Worklife Initiative. He said that there has been a decrease in acute traumatic injuries from work and an increase in chronic conditions among workers. As an example, he cited GM's analysis of their healthcare cost and found that among technical and clerical women, depression was the major cost center and they were interested in knowing what to do about it. He said that there has been an erosion in the distinction between non-occupational and occupational injuries and illnesses. Similarly, chronic obstructive pulmonary disease among the workforce tends to come from a wide range of exposures. Arthritis, cardiac disease and other chronic conditions that are affecting people as they age have an occupational component, but we have moved away from this uniquely caused-at-work concern. Other concerns involve presenteeism, showing up at work but not fully efficient and effective on the job because of a chronic or acute condition.

He concluded by saying that healthy workers are good for themselves, their families, their employers. A colleague said that healthy workers are good for business.

#### AGING WORKFORCE PRESENTATION

Dr. Jim Grosch discussed some of the things that NIOSH is doing in the area of the aging workforce. He said that data shows that the workforce is aging and people are living longer and they are healthier and are able to work. In workers 35 to 44, there is negative growth. In the future, we are going to have increasing pressure on workers to work until an older age because of changes that will have to occur in things like Social Security and Medicare. He discussed reasons why we should be concerned about an aging workforce:

- health and safety needs of older workers may be different from those of younger workers;
- older workers may be an increased risk for a variety of adverse safety and health outcomes; and
- little is known about how to prevent or better manage these risks for older workers.

He also shared that:

- older workers take longer to recover following an injury or illness;
- different finding for changes in physical health and mental health; and
- older workers are more likely to work in non-traditional employment settings.

In 2004 NIOSH commissioned a 350-page report by the National Academy of Sciences entitled, "Health and Safety Needs of Older Workers." It brought together experts from a variety of different disciplines to study the issue of safety and health. Three of its main recommendations are:

- better surveillance of older workers;
  -longitudinal studies are especially needed to better understand factors affecting older worker safety and health;
- focus on "at-risk" older workers, (i.e., physically demanding occupations, low income, women "job lock" workers); and
- development of "best practices" and interventions for older workers.

Dr. Grosch emphasized that NIOSH has tried to improve some of the data that they collect. In 2002 and 2006, NIOSH implemented its Quality of Worklife module that was given as part of the general social survey. The module collected

information on workplace health and wellbeing, job arrangements, job characteristics and work organization. They have analyzed the data and have been able to learn a lot more about some of the issues associated with aging.

NIOSH has also worked with people at the University of Michigan on their Health and Retirement Study (2008). He said this is probably the most ambitious and impressive study NIOSH has of older workers in the U.S. It is a cohort of approximately 20,000 older workers that are followed over time. In 2008, for the first time, NIOSH was able to add an occupational health module to that survey. The data is currently being collected and NIOSH will be able to look at some of the issues of aging and occupational health that haven't been look at in the health and retirement study before.

Some of the questions from the members focused on occupational health, job stress, and workability. Others focused on the definition of "older workers". Dr. Grosch noted that various agencies define it differently. He explained that there was no absolute level; however, traditionally in the U.S. it has been 55 and older because the Census Bureau uses that age in collecting data.

There was also some discussion about the best ways to train older workers. Dr. Grosch said that older workers tend to be more hands on and more self-paced than younger workers.

## MOTOR VEHICLE SAFETY PRESENTATION

Stephanie Pratt discussed occupational road safety. Motor vehicle crashes on public highways are the leading cause of occupational fatalities in the U.S. They have been the leading cause every year since statistics were first compiled in 1980. Fourteen hundred workers die in crashes on public highways each year and accounts for 25 percent of all occupational fatalities. Eighty percent of those who die are vehicle occupants, drivers or passengers and 40 percent are truck drivers.

Highway crashes were the number one or number two cause of every major industry division. This doesn't include the 700 additional fatalities that occur each year in vehicle crashes either off public highways or in vehicle pedestrian incidents.

NIOSH has two databases to look at occupational crashes in the U.S. – the U.S. Labor Department's Census of Fatal Occupational Injuries (CFOI) and the U.S. Department of Transportation's Fatality Analysis Reporting System (FARS). Ms. Pratt said that CFOI does a better job of capturing all types of crashes, whereas FARS does a better job of flagging the truck-related crashes. FARS has better data on crash circumstances because it is a system that is designed to collect data on traffic crashes whereas CFOI is a one-size-fits-all database that covers all kinds of occupational injuries. CFOI does not collect things like seat belt use, for example, that would be important for prevention.

There was a question about work zone motor vehicle crashes and fatalities. Ms. Pratt said there was some improvement. There is still about a 50/50 split between traffic vehicles hitting workers and construction equipment hitting workers.

Ms. Pratt's presentation also focused on workplace motor vehicle safety initiatives. By implementing road programs for workers, employers are showing they are good corporate citizens. They are putting safer drivers out there to interact with motorists. There is also the argument that if you manage risk effectively, then operating cots decrease.

NIOSH is conducting a mortality study of independent owner operator truck drivers to see if their deaths from disease mortality are elevated in certain categories. There is another field project related to driver anthropometry and work space. This involves updating anthropometry data for truck drivers which hasn't been done since the early '80s. NISOH will be measuring the driver's body dimensions to capture changes in demographics and also changes in the health status of the population. There is more obesity. They will measure cab work space to make sure the anthropometry measurement matches the existing work space.

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She said there were research grants specifically for truck driver safety and health awarded in 2007. One involved developing methods to screen for sleep apnea and engineering guidelines for large truck ingress and egress. There is also a project to look at health injury and MSD outcomes. This is a project that is using a number of biometric kinds of measurements, clinical data in addition to selfreported data.

Ms. Pratt also reported several other projects for different populations. NIOSH is looking at the relationship between prescription medications and fatal crashes in active duty and military personnel. This is an interagency agreement with the Uniform Services University.

Her presentation also included information in the global arena. They also contribute substantially to the road fatality burden in other high-income nations. Like the U.S., most of the victims are occupants of motorized vehicles. It is different in low and middle income nations because the traffic safety risks are different in those areas. There is very limited data available on occupational crashes in low and middle income nations.

## **GLOBAL HARMONIZATION PRESENTATION**

Ms. Maureen Ruskin gave the presentation on global harmonization. The hazard communication standard (HAZCOM) has one of the largest coverage of OSHA standards. It covers over 7 million workplaces, more than 10 million workers, and almost one million chemical products.

The standard was initially promulgated in 1983 with a limited scope. Throughout the years HAZCOM has been updated twice – in 1987 to expand the scope to the current coverage and in 1994 for some technical amendments. These updates did not address global systems; however, OSHA did not lose sight of its goal. During this period, OSHA representatives became involved with undertaking in trade negotiations on an international level and that led to the 1992 United Nations mandate where the United States recognized the importance of the international agreed systems for the classification and labeling of hazards as an important facet of responsible chemical management. During this time, they provided objectives for this system and devoted resources.

The U.S. maintained a presence over the next 10 years during the negotiations for adopting GHS. They both supported and actively participated in the effort. The State Department, Department of Transportation, Consumer Product Safety Commission, OSHA, EPA all participated in this. GHS is currently on its second revision. It is available online on OSHA's website through the hazard communication page.

Ms. Ruskin described GHS as a system to standardize and harmonize the classification and labeling for chemicals. It is through a logical and comprehensive approach for identifying the health, physical and environmental

hazards for creating a classification process that uses available data and compares it to defined hazard criteria.

She noted that GHS is not a model regulation or standard. Each agency and nation will need to take the GHS recommendations and then adapt them into regulatory language for their country and agency. She said that it is easier said than done.

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She said that GHS has a lot of benefits. One, it will increase both the comprehension of the hazards and protections for employees. This is through a consistent and specified hazard classification and that would mean that a chemical would have the same classification no matter where it is manufactured and this information will then be transmitted in the same way no matter where it went. This is done through labelings, pictograms, signal words and hazard statements. These elements will be derived from the classifications of the chemicals. The safety data sheets will be harmonized so they all have the same format. These elements will facilitate training through common label elements and easy recognition of the information on the safety data sheets. It will also reduce trade barriers because manufacturers will no longer maintain individual labels and safety data sheets for various countries.

Ms. Ruskin talked about the impact on OSHA. The framework will remain the same. GHS addresses the classification of hazards, the label elements and the format of the safety data sheet. It does not provide provisions for written communication programs, employee training or trade secrets. She said that OSHA is committed to maintaining all of these and they believe they are critical for ensuring the effective communication hazards. OSHA will also only be adopting the portions of GHS that fall within their current jurisdiction.

She said it changes the HAZCOM from a performance-oriented standard to one of specifications. Most people will see the changes with the labeling that prove the classification. They will now have specific pictograms that will be a quick identification of the hazard. Then you will have signal words and hazard statements that will describe the severity of the hazard. The hazard statements will then provide additional information such as fatal swallow.

She said the safety data sheets (SDSs), formerly material safety data sheets, will provide the detailed information on the chemical. A standardized format will make it easier for people to find the information. A template is already being used in the U.S. through the ANSI consensus standards and the GHS is consistent with that.

Ms. Ruskin said that GHS may impact other OSHA standards such as the substance specific standards. Through the regulatory process, OSHA will be reviewing all the standards to make sure they are aligned. She said the agency will be reviewing the safety standards as well to ensure that OSHA is not inadvertently changing the scope and whether there are alignments of other hazard definitions that need to be addressed.

She said that for the seven million workplaces and 100 million employees, they will notice a change in the labels. For the employees, she anticipates initial employee training on the pictograms, the signal words and the hazard statements. There may be some minimal training on the new safety data sheet format. Employers will still need to maintain new SDSs as they are required to do so through HAZCOM.

Manufacturers have a higher burden to reclassify their chemicals through the DHS. There will be some initial start-up costs associated with producing new labels, SDSs and initial training.

She asked the question, "Where are we now?" On September 12, 2006, OSHA published an ANPR and received over 160 comments. She said that a majority of the comments were favorable: enhanced protection; streamline training; reduced cost and facilitate trade. She said that some of the concerns were: cost of implementation, phase-in timing, impact on other standards and outreach.

Ms. Ruskin concluded by saying that OSHA peer reviewed the preliminary economic analysis which was completed in November 2007. She said that the current regulatory agenda has OSHA publishing the notice of proposed rulemaking in October 2008. Once it is published, OSHA will follow the rulemaking process.

## PUBLIC SECTOR WORKER SAFETY AND HEALTH PRESENTATION

Dr. Keith Goddard said safety and health in the public sector was an area that the the Committee requested more information on. Dr. Goddard showed slides which show the scope of OSHA's coverage 7.5 million establishments, 116 million private sector workers in 56 states and territories.

He mentioned a couple of Congressional bills: 1) HR 2049 and S1244, "Protecting America's Workers Act of 2007, which has been referred to as the PAW Act. He also referred to HR1517 which talks about the Fairness for State and Local Workers Act.

Dr. Goddard presented the following charts: 1)"Employment and Injury and Illness Rates for State and Local Governments"; 2) Employment in State and Local Governments, State Plan State States; 3) Employment in State and Local Governments, Federal Jurisdiction States; 4) Distribution of State Government Employment in Sample States (California, Iowa and Virginia); 5) Distribution of Local Government Employment in Sample States (California, Iowa and Virginia); 6) Injury and Illness Rates for State and Local Governments in 2006; 7) Injury and Illness Rates for State Governments in 2006; and 8) Injury and Illness Rates for Local Governments in 2006.

He said that the Bureau of Labor Statistics plans to publish rates for all state and local governments in 2009 which will reflect CY 2008 data. BLS currently publishes state and local government jurisdictions (Maine, Illinois, Wisconsin, Oklahoma and Guam). Of the 7,189 FY 2007 inspections conducted in state and local government facilities, 2,296 (47%) were conducted in NJ and NY.

#### NEXT STEPS

The Committee discussed sending a list of high-priority items to Dr. Howard and Mr. Foulke. Emory Knowles suggested having a day and a half or a two-day meeting in order to break into working groups and to delve into topics in more depth. He felt the meeting was very productive and able to come forward with some new initiatives. Several members agreed with his assessment. Mr. Swartz suggested having subject matter experts as part as any working group presentations. Dr. Blessman suggested that OSHA Assistant Secretary and NIOSH Director make a statement about some direction on areas where the agencies are being challenged then the Committee can focus its thinking about ways to help the agencies. Dr. Blessman also requested a list of prior NACOSH recommendations.

Dr. Garrett asked if workgroups could be formed at the next meeting based on the priority list. Dr. Goddard, Ms. McCabe and Ms. Crawford noted that the terms of five members would expire in June. Ms. Crawford noted that approximately 75 people had responded to the call for nominations.

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Chairman Kalinowski suggested that we select dates in December 2008 to hold the next meeting. There was some discussion about having the meeting in Atlanta. Mr. Swartz offered to work with the Centers for Disease Control staff to look at an Atlanta meeting. Mr. McMillan reminded the group that there would be an election in November and things could change. Dr. Goddard mentioned possible budget restrictions.

Mr. McMillan wanted to know if the Committee could request input from another body outside of OSHA and NIOSH. He was interested in inviting the National Highway Transportation Safety Administration (NHTSA) to discuss what they are doing on the issue of motor vehicle safety to coordinate with OSHA, NIOSH and others in the workplace arena. He also had a question about what is happening with the Network of Employers for Traffic Safety (NETS). He said it was created under the NHTSA umbrella years ago to get employers together to discuss traffic safety initiatives. He said that they did a lot of work early on around seat belts for employer use and rules, voluntary rules that employers could put in place for their employees. If you talk about worker safety for motor vehicles, that could be one of the key pieces.

Ms. Pratt said it would be appropriate to pose a question to NHTSA about NETS as they are a primary funder of that group. She said that the executive director of NETS has resigned and they are still in a transition phase.

The Committee agreed to look at the issues list again and rank them to come up with possible workgroups.

# **CLOSING REMARKS**

Mr. Foulke again thanked the Committee for their commitment and hard work.

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Approximately 45 people attended the meeting.

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Douglas Kalinowski, Chairman

7.15.09

Date