

NATIONAL ADVISORY COMMITTEE  
OCCUPATIONAL SAFETY AND HEALTH

Minutes of Wednesday, December 10, 2014  
Meeting

U.S. Department of Labor  
200 Constitution Avenue, N.W.  
Room C-5521, Room 4  
Washington, D.C. 20210

**MEMBERS PRESENT:**

Jacqueline Agnew, Ph.D.	Health Representative
Lisa M. Brosseau, ScD	Public Representative
William B. Bunn, III, M.D.	Health Representative
Lamont Byrd	Labor Representative
Mark Carleson	Public Representative
James Johnson	Management Representative
Rixio Medina	Safety Representative
Margaret Seminario, M.S.	Labor Representative
Anne Soiza	Chair, Public Representative
Joseph Van Houten, Ph.D.	Management Representative

## EXHIBITS

Number	Description
1	Agenda, 12/10/14 NACOSH Meeting
2	NACOSH Work Group for Emergency Response and Preparedness Paper
3	PELs PowerPoint Presentation by Bill Perry
4	"Ebola Outbreak Preparedness Response," PowerPoint presentation by Chris Brown
5	"OSHA PPE Selection Matrix for Occupational Exposure to Ebola Virus"
6	OSHA Fact Sheet: "PPE Selection Matrix for Occupational Exposure to Ebola Virus"
7	OSHA Temporary Worker Initiative Draft TWI Bulletin on PPE
8	"Recommended Practices on Protecting Temporary Workers," by OSHA and NIOSH
9	Approved ACCSH Temporary Worker Work Group Report from the 12/3/14 meeting
10	Dr. Michaels's charge to NACOSH regarding the Temporary Workers Work Group
11	Approved report from the NACOSH Temporary Worker Work Group meeting on 7/28/14

## **Introductory Remarks**

Introductions are made for everyone in the room. Special mention is made of the new regulation requiring notification of OSHA by employers when there has been a severe injury: notification of a fatality must be made within 8 hours, and notification of hospitalization must be made within 24 hours.

## **OSHA Update, Dr. Michaels:**

### Introductory Remarks

Dr. Michaels makes introductory remarks. He thanks the OSHA staff and, in particular, extends thanks to Anne Soiza for taking on the responsibilities of the Committee Chair.

### Regulation Requiring Notification by Employers of Severe Injury

Going into effect January 1st is a regulation for all federal states to notify OSHA within 8 hours in the event of a worker fatality, and within 24 hours in the event of a hospitalization, amputation, or loss of an eye. Reports can now be made online. It is hoped that this will provide a closer relationship between employers and OSHA, and allow for more opportunities for safety education.

### Collaboration with National Safety Council

The National Safety Council has produced materials which are offered without cost online which can help employers determine causes of injuries and aid them in discovering ways to prevent the same injuries from happening again.

### More Online Resources

The National Association of Homebuilders has a toolkit online to help their members manage injuries and navigate through the notification procedure. OSHA is recommending that other trade associations and employer groups do the same.

### Proposed Regulation Regarding Recordkeeping

New regulation will be proposed and comments will be collected regarding employers' injury and illness logs, which OSHA has long maintained should be kept for five years.

### Changes in OSHA Staff Structuring

In Atlanta, Chicago, and Dallas, the new position of a second Deputy Regional Administrator has been added. Also, there is a search for a permanent Director of the Whistleblower Protection Program.

### Alliance with STEPS Network

A new national alliance has been formed, the STEPS Network, which is an alliance between OSHA and oil and gas drilling companies. Rick Ingram is very involved with this, and will appear at the next meeting.

### President's Executive Order on Plant Safety and Security

OSHA, EPA, and the Department of Homeland Security have been collaborating on this effort. A joint hearing of the Energy and Public Works Committee and the Health Committee of the Senate will be convened to discuss the group's progress on 12/11/14. Some jurisdictional issues are among those still to be ironed out, particularly in light of the recent DuPont tragedy.

### Request for Assistance on Drafting Language

Advice from NACOSH is requested in the drafting of recommendations OSHA can give to all employers, particularly host employers, in developing injury prevention programs in situations where there are several employers involved in a situation. Very often there is not enough communication among the groups in question about workplace safety health responsibilities, training and other information sharing.

Exhibit No. 1 Marked for ID

Exhibit No. 1 is marked for identification and summarized on page 3.

### **NIOSH UPDATE, Dr. John Howard:**

#### Ebola Virus

At this time the disease is localized in West Africa: Guinea, Liberia, and Sierra Leone. About 300 CDC employees are deployed in West Africa. Time Magazine has named the Ebola fighters as persons of the year for 2014.

There are many guidance documents and fact sheets being developed and already on the website available to assist and answer questions. Work is being done with the National Personal Protective Technology Laboratory, to develop surgical gowns that better protect the people who use them. Consideration now is being given to how we handle the return to this country of those who are now working with patients in West Africa.

#### Hazardous Drug List

NIOSH has just issued an updated Hazardous Drug List for pharmacies and hospitals interested in hazardous drugs. It is the current intention to update this list every two years.

#### Antineoplastics

In the Journal of Occupational Environmental Hygiene a study was published that found that the recommended safe handling practices for workers who administer antineoplastics in health care settings are not followed. NIOSH intends to begin additional research into this, and hopes the article generates interest among others on this topic.

#### Green Tobacco Illness

NIOSH has updated the information on their website on this issue, as a result of a New York Times article.

#### Sixth National Occupational Injury Research Symposium

This symposium will occur May 19 through 21, 2014.

## **OSHA Chemicals RFI Update:**

### Emergency Response Work Group

In response to a Request for Information, stakeholder meetings were held on this subject, and it was determined that expert assistance was needed in order to move further. NACOSH has been requested to set up a work group to assist in updating standards that cover workers who routinely engage in emergency response efforts: municipal and industrial fire fighters, rescuers, emergency medical service providers, in addition to skilled support workers from construction trades or towing companies that may be pulled in to assist in fire and rescue operations. A one-page description of this proposal should be found in member packets.

### Request for Information Regarding PELs

Members are encouraged to provide written comments in response to the RFI. In particular, guidance is being sought with respect to how to conduct risk assessment faster and better; making legal findings; how to better conduct technologic feasibility analyses. Particular assistance is also sought in regard to alternatives to setting single-substance OELs. A toolkit was provided online in 2013 to help employers with their assessments, and a course curriculum is now being developed.

### Occupational Exposure Banding

NIOSH is working on a system similar to control banding called occupational exposure banding.

Exhibits Numbered 2 and 3 Marked for ID

Exhibits Numbered 2 and 3 are marked for identification and summarized on page 3.

## **Ebola Update:**

There are currently no confirmed cases of Ebola in the United States. Ebola is a contact-transmissible disease, with an approximate 2 to 21-day incubation period. The first symptoms are flu-like in nature, and present in about 8 to 10 days, and up to 3 weeks after exposure. Up to 49 days after exposure is usually the longest period at which you would see death or ultimate recovery from the disease.

### Applicable OSHA Standards

A number of OSHA standards apply to occupational exposure to Ebola. Chief among those is OSHA's Bloodborne Pathogens Standard. PPE requirements of great importance include eye, face, hand, and respiratory protection. Information is available to the public on [www.osha.gov/ebola](http://www.osha.gov/ebola).

### Additional Work on Ebola Guidelines and Standards

Work is being done in conjunction with CDC, NIOSH, Department of Transportation, the Department of Homeland Security, and White House National Security staff, to be sure agency jurisdictions and responsibilities are clarified, and to be sure that all guidance is consistent. Work is also underway with NIOSH and EPA to develop a fact sheet on safe waste-handling practices.

Collaboration is underway with NIOSH to develop a worker fatigue document. While this is meant to cover domestic workers, it is also applicable to workers abroad. Also, a PPE Selection Matrix has been developed so that workers can make appropriate choices regarding what types of PPE are necessary in a given situation.

#### Concern and Motion Regarding Surgical Masks Being Listed as PPE

There was a good bit of discussion regarding the PPE matrix and the appropriateness of surgical masks being listed therein as a suitable form of PPE. It was decided that further discussion was necessary by NACOSH, and a motion was later made expressing the Committee's concerns, including that "surgical masks" should be stricken from the list of PPE. The motion was carried.

#### Exhibits Numbered 4 through 6 Marked for ID

Exhibits Numbered 4 through 6 are marked for identification and summarized on page 3.

#### **Protecting Temporary Workers, OSHA Update, Mary Lynn:**

##### Guidance Development

Work is being done with the American Staffing Association and others to develop guidelines and materials for agencies who hire temporary employees. It is necessary to underscore the responsibility that these agencies and the host employers share. OSHA continues to stress that temporary workers should be afforded the same levels of safety that permanent workers are given.

##### Temporary Worker Initiative

Work is being done to ensure that site inspections are done where temporary workers are present, to ensure they're subject to the same standards of safety as a host employer's permanent employees.

##### Bulletins

Bulletins have been published on recordkeeping and PPE, and NACOSH comments have been appreciated. Currently in development are bulletins on whistleblower protections, training, hearing conservation, lockout/tagout, and injury and illness prevention programs. Comments from NACOSH on these are encouraged.

A train-the-trainer course was held this past summer for field staff on temporary worker issues. Also recently issued is a notification to the field that when there are citations dealing with hazards that temporary workers are exposed to at a host work site, the temporary staffing agency should also be provided with a copy of the citations issued to the host employer, so that the temporary staffing agency can be aware of potential hazards that the temporary workers may be exposed to.

##### Recommended Practices

Co-branded with NIOSH is a list of recommended practices. First, that the staffing agency should evaluate the host employer's work site, and have staff trained to recognize safety and health hazards. Second, agency staff should be trained to recognize safety and health hazards.

Third, employers should meet or exceed the standards of the other employers involved, and all should share their injury and illness prevention programs. Fourth, all employers should assign occupational safety and health responsibilities, and define the scope of work in the contract.

#### Outreach Activities

Webinars have been held in conjunction with the American Staffing Association, and Dr. Michaels spoke at ASA's conference held last May.

Exhibits Numbered 7 through 9 Marked for ID

Exhibits Numbered 7 through 9 are marked for identification and summarized on page 3.

#### **Committee Discussion and Wrap-Up:**

Meeting is summarized by the Chair, with input from members.

#### Further Motions

Discussion regarding current guidelines on biosafety levels in the treatment of Ebola resulted in a motion passing requiring that all Ebola-confirmed or suspected clinical samples be handled at biosafety level 2, with BSL-3 practices. The motion was carried.

Discussion resulted in a further motion that NACOSH recommend OSHA and NIOSH consider the level of risk associated with occupational exposure to Ebola, and provide the guidance and reasoning for selecting PPE for the different levels of risk. The motion was carried.

#### Format for Next Meeting

It was agreed that the format for the next meeting would return to the former way of doing things over two days, allowing for more in-person work group interaction.

Chairman Souza adjourned the meeting at 4:25 p.m.