TO: Distribution

TGG: JCL: FGJ: AC: AJO: RF
XF: Desk

FROM: T. G. Grumbles
DATE: June 17, 1991

VISTA

Interoffice Communication

SUBJ: **DRAFT RESPONSIBLE CARE EMPLOYEE HEALTH AND SAFETY CODE: EMPLOYEE REVIEW**

Attached is a request from CMA to consider obtaining "employee" review of the draft Safety and Health Code. The cover letter is self-explanatory, but CMA is asking for companies to consider having this Code reviewed at the hourly level.

I encourage some of the plants to consider doing this. Particularly if you have an employee advisory group or other focus group type activity that is in-place this could be used as an activity for one of those meetings. Please let me know if you would consider doing this activity. If helpful, I could participate. The comments we generate are due back to CMA by August 14.

Once again, please call me if you'd consider doing what CMA is requesting.

T. G. Grumbles

dlj

Attachment

Distribution: **PLANT MANAGERS**

R. W. Seymour-Aber, L. R. Bauer-Balt, G. D. Williams-Blane, J. Pavao-Hmd, J. Friend-LCCP, J. W. Ware-LCLAB, P. Carrico-LCVCM, H. D. Garrison-Okc, P. L. Foote-Prem, V. W. Weiss-Austin

cc: **SAFETY DIRECTORS**

Bruce Trego-Aber, Brent White-Balt, George Williams-Blane, Matt Tonkovich-Hmd, K. L. Fogg-LCCP, R. V. Gantz-LCLAB, G. M. Shirley-LCVCM, Mike Lunsford-Okc, Greg Lipps-Premiere, R. B. Martin-Austin, J. R. Drumwright, Rick Quy

T. H. Huffman, R. D. Gamblin, M. S. Reynolds

CHEMICAL MANUFACTURERS ASSOCIATION

June 10, 1991

TO RESPONSIBLE CARE® COORDINATORS

Subject: Employee Review of Draft Employee Health and Safety Code of Management Practices

Dear Responsible Care® Coordinator:

The Employee Health and Safety (EHS) Code is in the final stages of development. In February, we asked for your written comments on the draft code and held an open meeting on March 7 to solicit further feedback. All the comments have been reviewed by the drafting group in revising the code and the latest revision of the Code is enclosed. We now request your assistance with another level of review.

Previous codes all have been reviewed by groups affected by the code. For example, the Distribution Code was reviewed by truck and rail carriers. Consistent with this approach, CMA's Responsible Care® Public Advisory Panel and the Responsible Care® Coordinating Group have recommended and **encourage member companies to review the draft EHS Code with their employees.**

Each member company should develop a method for obtaining meaningful feedback from employees appropriate for your organization. It is not necessary that every employee participate in this review; rather, a representative sample could be selected, reflecting the breadth of the company's operations, including a balance of union/non-union employees, where applicable. Your company's Human Resources or Labor Relations staff may be able to assist in this effort. A form for summarizing and reporting this feedback to the code drafting group is attached. Additional materials describing Responsible Care® and the Employee Health and Safety Code are also enclosed.

CMA appreciates the effort this review will require in such a short time period, but firmly believes it will yield valuable comments. Comments received from this review will be compiled and returned to you for your information in September 1991.

VVV 000006501

2501 M Street, NW. Washington, DC 20037 202-887-1100 Panafax 202-887-1237 Telex 89617 (CMA WSH)

If you have any questions concerning this review, please contact Sandra L. Tirey, Associate Director, Health Programs (202) 887-1274. **Feedback from the employee review should be sent to Ms. Tirey by Wednesday, August 14, 1991**.

Very truly yours,

Lori M. Ramonas, Ph.D.
Director
Responsible Care®

Enclosures

cc: Health and Safety Contacts
Responsible Care® Communications Contacts
Responsible Care® Coordinating Group

Responsible Care®
Employee Health & Safety Code of Management Practices
Employee Review

Response Form

1. Briefly describe how you solicited feedback from employees at your company.

2. Please list four or five of the most important positive comments and four or five of the most frequent negative comments received from your employees. Please provide suggestions for alternative Code language where appropriate.

Comments submitted by:

Name: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

FAX: _____

Please mail or FAX by August 14, 1991, to:

Sandra L. Tirey
Associate Director, Health Programs
Chemical Manufacturers Association
2501 M Street, NW
Washington, DC 20037

FAX: 202/887-1237

DRAFT
June 6, 1991

RESPONSIBLE CARE®

EMPLOYEE HEALTH AND SAFETY CODE OF MANAGEMENT PRACTICES

PURPOSE

The goal of the Employee Health and Safety Code of Management Practices is to protect and promote the health and safety of people working at or visiting member company work sites.

To achieve this goal, the code provides management with practices designed to continuously improve work site health and safety. These practices provide a multidisciplinary means to identify and assess hazards, prevent unsafe acts and conditions, maintain and improve employee health, and foster communication on health and safety issues.

Implementation of the Employee Health and Safety Code, together with other codes of management practices, can enable member companies to operate in a manner that further protects and promotes the health and safety of employees, contractors, and the public, and protects the environment.

RELATIONSHIP TO GUIDING PRINCIPLES

Implementation of the Code helps achieve several of the Responsible Care Guiding Principles:

- To recognize and respond to community concerns about chemicals and our operations.
- To make health, safety, and environmental considerations a priority in our planning for all existing and new products and processes.
- To operate our plants and facilities in a manner that protects the environment and the health and safety of our employees and the public.
- To extend knowledge by conducting or supporting research on the health, safety, and environmental effects of our products, processes, and waste materials.

MANAGEMENT PRACTICES

Each member company shall have an ongoing employee health and safety program that includes:

Program Management

1. Commitment by all levels of management to protecting and promoting employee health and safety through published policies; assignment of accountability for policy implementation; and provision of sufficient resources, including qualified health and safety personnel.

2. Opportunities for employees to participate in developing, implementing and reviewing health and safety programs.

3. Provisions, including selection criteria, to confirm that on-site contractors' programs are consistent with applicable management practices of this code.

4. Written, up-to-date programs and procedures for occupational health and safety practices, appropriate to the facility.

5. A means to verify that occupational health and safety practices are consistent with written programs and procedures and are working effectively.

6. Systems for maintaining records and analyzing data to determine trends and identify areas for improvement.

Identification and Evaluation

7. Methods to identify and evaluate potential occupational health and safety hazards in planned or existing facilities, including facilities to be modified.

8. Exposure assessments and job safety analyses to evaluate health and safety risks to employees from processes; equipment; potentially hazardous chemical, physical or biological agents; or other work site conditions.

9. Health assessments to determine employee medical fitness for specific job tasks.

10. Employee occupational medical surveillance programs tailored to work site hazards.

Prevention and Control

11. Mechanisms for reviewing the design and modification of facilities and job tasks, taking into account the following hierarchy of controls: inherent safe design, material substitution, engineering controls, administrative controls, and personal protective equipment.

12. Systems to verify that health and safety equipment is properly selected, maintained and used.

13. Preventive maintenance and housekeeping programs to maintain the safety of facilities, tools and equipment.

14. Timely investigation of work site illnesses, injuries and incidents; corrective action plans to prevent recurrence; and methods to evaluate the effectiveness of corrective actions taken.

15. Security procedures and systems to control unauthorized entry of personnel and materials into work sites.

16. Provisions for emergency medical assistance for people at work sites.

Training and Communications

17. Communication of occupational health and safety information that is relevant to specific job tasks and the work site.

18. Health and safety training programs, including documentation of these programs, and methods to evaluate the effectiveness of both training and communications activities.

INDUSTRY TREND DATA

To develop and maintain statistical industry trends, CMA will collect currently available data. Each company shall report annually to CMA, or its designated agent, occupational injury and illness rates for each facility, as defined and reported in CMA's Occupational Injury and Illness Reporting Program.

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RELATIONSHIP TO OTHER CODES OF MANAGEMENT PRACTICES

This code complements, and should be implemented in conjunction with, current and future codes of management practices, especially those elements of the CAER Code involving emergency response and the Process Safety Code involving training of employees in their job functions.

MEMBER SELF-EVALUATION

The implementation stages are:

Stage I - No action
Stage II - Evaluating company practices against Code practice.
Stage III - Developing action plan to implement Code practice.
Stage IV - Implementing action plan.
Stage V - Code management practice in place.
Stage VI - Implementation reviewed and reaffirmed this year.

RESPONSIBLE CARE®
EMPLOYEE HEALTH AND SAFETY CODE OF MANAGEMENT PRACTICES

Background Information for Employee Review

Responsible Care® Initiative

To be able to provide meaningful feedback on the Employee Health and Safety Code of Management Practices, employees should understand the Responsible Care® initiative. The following enclosed materials may be useful in describing Responsible Care® and its program elements to employees:

- Responsible Care® Guiding Principles
- Summary Description - Responsible Care® Program Elements
- Questions and Answers About Responsible Care®

For additional assistance in describing the Responsible Care® initiative to your employees, please contact your company's Responsible Care® Communications Contact or Bonnie Gillott, Manager, Responsible Care®, at 202/887-1285.

Employee Health and Safety Code of Management Practices

As the Responsible Care® initiative was taking shape, CMA's Board of Directors and the Responsible Care® Public Advisory Panel recognized that the health and safety of employees, contractors, and visitors at member company facilities was a key area to address. A code drafting group composed of member company occupational health and safety professionals was established in early 1990. The Employee Health and Safety Code of Management Practices is one of six codes within Responsible Care®.

The Employee Health and Safety Code of Management Practices has been regularly reviewed throughout its development by CMA's Health and Safety Committee, Engineering and Operations Committee, and the Responsible Care® Coordinating Group as well as the Responsible Care® Public Advisory Panel. Recently, all member companies had an opportunity to review the Code and provide written comments to the code drafting group. The code drafting group also received feedback from member companies at an open meeting in March 1991.

The Employee Health and Safety Code will be previewed by CMA's Board of Directors in late October 1991 and approval is expected in January 1992. When the Code is approved, it will be distributed to member companies for implementation, accompanied by a resource guide that will provide examples of activities for each management practice.

If you have any questions about the Responsible Care® Employee Health and Safety Code of Management Practices, please contact Sandra L. Tirey, Associate Director, Health Programs, at 202/887-1274.

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RESPONSIBLE CARE®

EMPLOYEE HEALTH AND SAFETY CODE OF MANAGEMENT PRACTICES

Suggested Questions for Soliciting Employee Input

Listed below are suggested questions that may assist you in obtaining meaningful feedback from employees. These questions are offered only as a guide, and you may wish to tailor them to your organization or facility. The code drafting group is especially interested in knowing if the goal of the Employee Health and Safety Code of Management Practices is clear to employees. That is, do employees believe the Code will be effective in protecting and promoting their health in the workplace?

Please use the enclosed response form to summarize your employees' responses.

A. Suggested Lead-in Remarks

Briefly describe the goals of Responsible Care® and how the Employee Health and Safety Code is part of the Responsible Care® effort.

"Please read the entire code carefully. Your input is very important. We need your thoughts and comments. Please try to be specific and give examples when answering the questions. Thank you for your participation."

B. Suggested Questions

- Do you understand the purpose of this code? Do you understand how this code relates to the overall Responsible Care® initiative?
- Does this code adequately address management and employee involvement?
- Can you suggest ways to enlist employee participation in implementing this code?
- Do you feel employees will ultimately benefit from implementation of this code? Why?
- How do you see this code affecting your workplace? Can you give examples?
- Which practices are most important for assuring health and safety in your workplace? Which practices are least important?

- Are additional practices needed to meet the goal of protecting the health and safety of all persons working or visiting the worksite?

- Are there any aspects of personnel safety programs included in your facility program(s) which are not included in this code?

- Are there any aspects of occupational health programs included in your facility program(s) which are not included in this code?

- What practices would you remove? Do any of the practices contain duplications that can be eliminated?

- Do you feel the communications and training management practices are adequate to assure that employees are informed of relevant health and safety information?

- What improvements can be made to the format of the code?

- Is the meaning of any of the practices unclear to you? What improvements can be made to the wording? Why?

- How else would you change the code to make it more effective?

June 10, 1991

Responsible Care:®
A Public Commitment

SUMMARY DESCRIPTION

RESPONSIBLE CARE PROGRAM ELEMENTS

The statement of **Guiding Principles** for Responsible Care is a commitment by each member company to fully support a continuous effort to improve the industry's responsible management of chemicals. Each member company has pledged to operate according to the Guiding Principles and has signed to that effect. This signed statement is considered an obligation of membership in the Chemical Manufacturers' Association (CMA). The Guiding Principles are based on CMA's 1983 policy statement on health, safety and the environment and on the Canadian Responsible Care principles. They also incorporate guidance received from member company executive contacts.

Following association adoption of the Guiding Principles, various CMA committees began developing **Codes of Management Practices** in January 1989. Each Code of Management Practices addresses several public concerns. Impetus for developing a specific code comes from either a substantial public concern(s) identified by the Public Advisory Panel or the industry, a substantive need to take voluntary action, or both. Codes address community awareness and emergency response, distribution, pollution prevention, process safety, employee health and safety, and product stewardship. The Codes of Management Practices identify expected management practices as objectives rather than prescribing absolute or quantitative standards. Since the codes are intended to serve as objectives, they complement existing member company programs or practices that achieve the same goals. Responsible Care, therefore, becomes an integral part of existing company programs and will cause each company to stretch to continually improve performance.

Another important element in the Responsible Care initiative is the **Public Advisory Panel**, which is composed of a group of environmental, health and safety thought leaders. The panel is an industry (CMA) effort, not a company responsibility. It was assembled and is moderated by an experienced facilitator working at the association's direction. It serves to assist the industry in identifying and developing programs and actions that are responsive, and are viewed as responsive, to public concerns. Meeting several times a year, the panel reviews issues on which CMA requires comment and advice. Panel members also identify areas they believe require industry response, critique all proposed Codes of Management Practices and provide early definition of public concerns involving the chemical industry. Community Advisory Panels at the local or regional level can serve companies and the industry in a similar manner. CMA has developed guidance to facilitate companies' formation and operation of local panels.

Effective performance evaluation is a critical element of Responsible Care. Therefore, each Code of Management Practices includes a **Self-Evaluation Form** that measures a company's improved use of the management practices that the code defines. Member companies will conduct self-evaluations for each code annually. CMA will compile the results and periodically report industry's collective implementation progress to the public.

To document progress in ways that are meaningful to the public, CMA also will monitor statistical trend data, where available, on industry performance. For example, Superfund Section 313 emissions reporting and Department of Transportation hazardous materials incident statistics will be a component of public reporting for the Waste and Release Reduction and Management Code and the Distribution Code.

Due to their varying size and operations, member companies will not be expected to be at the same level of performance for each Code of Management Practices at the same time. However, it is expected that each member company report continued progress.

To facilitate and support each member company's continual improvement in the responsible management of chemicals, **Executive Leadership Groups** (ELGs) have formed. ELGs provide an opportunity for corporate leaders to discuss progress and share experiences with implementing elements of Responsible Care. These regional groups of ten to twenty executive contacts will meet at least once a year to review Codes of Management Practices under development, discuss members' progress with implementing existing codes, identify areas where individual companies need assistance from CMA or other companies, and to address other priority industry issues.

Endorsement of the Responsible Care initiative is an **Obligation of Membership** in the association. A member company's obligation to Responsible Care applies to all of its chemical businesses. Each member company is expected to make a commitment to Responsible Care by:

a) signing the Guiding Principles of Responsible Care;

b) communicating the commitment to Responsible Care to employees;

c) making good-faith efforts to implement the Codes of Management Practices, participate in the self-evaluation process, and meet the expectations of the Responsible Care Program; and

d) use the Responsible Care name and logo according to CMA's guidelines.

Member companies are also expected to participate in the developing of the codes and programs.

In an extreme case, where a member company has consistently not conducted its operations in accordance with the Guiding Principles and program elements of Responsible Care, association representatives will meet with the member company's executive contact to seek the company's positive involvement in the program. If this fails to produce a commitment to pursue the objectives of Responsible Care, appropriate actions will be taken including the disassociation of the company from membership.

Responsible Care:®
A Public Commitment

GUIDING PRINCIPLES

Member companies of the Chemical Manufacturers Association are committed to support a continuing effort to improve the industry's responsible management of chemicals. They pledge to manage their businesses according to these principles:

- To recognize and respond to community concerns about chemicals and our operations.
- To develop and produce chemicals that can be manufactured, transported, used and disposed of safely.
- To make health, safety and environmental considerations a priority in our planning for all existing and new products and processes.
- To report promptly to officials, employees, customers and the public, information on chemical-related health or environmental hazards and to recommend protective measures.
- To counsel customers on the safe use, transportation and disposal of chemical products.
- To operate our plants and facilities in a manner that protects the environment and the health and safety of our employees and the public.
- To extend knowledge by conducting or supporting research on the health, safety and environmental effects of our products, processes and waste materials.
- To work with others to resolve problems created by past handling and disposal of hazardous substances.
- To participate with government and others in creating responsible laws, regulations and standards to safeguard the community, workplace and environment.
- To promote the principles and practices of Responsible Care by sharing experiences and offering assistance to others who produce, handle, use, transport or dispose of chemicals.

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Responsible Care:® A Public Commitment

QUESTIONS AND ANSWERS
ABOUT RESPONSIBLE CARE

Q. Who had the idea for the Responsible Care initiative?

A. Executives of the Canadian Chemical Producers Association (CCPA) began developing the concept in 1984. Executives of Chemical Manufacturers Association (CMA) member companies that have Canadian operations brought Responsible Care to CMA's attention. CMA considered a variety of options and adopted the performance-based Responsible Care initiative in 1988.

Q. How is Responsible Care different from what the chemical industry has been doing?

A. Many chemical companies have programs that are designed to improve performance. However, Responsible Care is a broad chemical industry commitment to improve performance through a process that ensures responsiveness to the public's concerns. Two aspects make Responsible Care unique. First, bylaws obligate CMA member companies, representing 90% of basic industrial production capacity in the United States, to participate in the initiative. And second, through a Public Advisory Panel, the public is directly involved in developing program elements.

Current CMA programs such as Community Awareness and Emergency Response (CAER), Air Quality, Waste Minimization, and National Chemical Response and Information Center (NCRIC) are vital parts of the initiative. Through Responsible Care's self-evaluation process and Public Advisory Panel, CMA will identify areas where additional resources need to be developed to help member companies achieve the goals of the initiative. Responsible Care also encourages member companies to help each other improve performance by sharing experiences and resources in specific areas of chemical operations.

Q. Why does the chemical industry need to do anything?

A. Because in spite of past efforts there still are too many incidents involving chemical operations. Politicians and government regulators will respond to the public's concerns about chemicals and our industry if the chemical industry does not respond first. Therefore, it is important for the industry to take continuing positive action to address public concerns.

Q. Isn't there some other way? The chemical industry is already doing a lot; can't it just communicate this?

A. The CMA membership concluded that the chemical industry doesn't just have a public relations problem; it has a performance problem. The chemical industry has to respond effectively to public concerns through improved performance. It is clear that the public's expectations are not being met on a performance basis. Until the chemical industry truly understands public concerns and addresses them from a performance standpoint, CMA member companies can't possibly improve the public perception of their industry.

Q. Who prepared the Guiding Principles and what are they based on?

A. The Guiding Principles are based on CMA's 1983 board-approved policy on "Health, Safety and the Environment" and the Canadian Responsible Care principles. They are consistent with both. They were prepared by representatives of CMA member companies and approved by the CMA Board of Directors.

Q. Why does CMA's Board think Responsible Care will work?

A. Since Responsible Care is based on concepts proven in both the Canadian experience and CMA's voluntary programs such as CAER, the CMA membership has confidence that it can achieve improved industry performance. Most important, by signing the Guiding Principles, CMA member companies have demonstrated their commitment to make Responsible Care work.

Q. How much will Responsible Care cost CMA member companies to implement?

A. Significant resources are needed from member companies, both in terms of the "sweat equity" of participants in the development and support of the program, and in the people and dollars necessary to make the initiative "live" in each company.

These costs have not been quantified because they will be different for each company. However, overall industry costs for Responsible Care implementation will undoubtedly add to the billions of dollars already being spent by industry to manage health, safety, and environmental issues.

Q. Why should a commitment to Responsible Care be an obligation of membership?

A. Public concerns about chemicals and the industry are the result of collective experience with the entire industry. If the chemical industry is to respond to public concerns effectively, it must act as a total industry. Responsible Care must be visibly working throughout the industry and, therefore, must be both a commitment and a membership obligation of every company in the association. It is critical to achieve the cultural change needed for the industry to improve performance in a responsive manner. The public must be convinced that the chemical industry is living up to its commitment.

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Q. Why have a Public Advisory Panel?

A. Responding to public concerns is what Responsible Care is all about. Therefore, a key component of the initiative is the Public Advisory Panel. The panel helps the industry identify and develop programs and actions that are responsive to public concerns about specific performance problems.

CMA has also developed a guidebook for companies which wish to establish community advisory panels at operating locations.

Q. Who is on the Public Advisory Panel? Who sets it up? Can panel members be replaced?

A. The Public Advisory Panel acts as a sounding board for public concerns and as a specially qualified focus group that directly impacts industry policies and programs under Responsible Care. Meeting five times a year, panel members help CMA identify public concerns and suggest ways to respond to those concerns. Panel members also review proposed Codes of Management Practices and evaluate other features of the initiative. Each meeting is managed by an outside facilitator experienced with panel management. Industry representation is kept to a minimum to encourage an open exchange of views and ideas.

Currently, the panel is a 15-member group composed of individuals from both public and private sectors. To ensure that a wide range of public opinion is expressed, the composition of the panel is diverse. Occupations and interests of members range from business and local government officials to environmental, academic, and consumer activists, a farmer, and an expert in business ethics.

Panel members were selected by the facilitator.
Panel membership will periodically change in response to panel members' availability and/or the changing needs of panel expertise. The facilitator will handle such changes.

Q. Who will develop the Codes of Management Practices? Will the public have input?

A. The development of Codes of Management Practices begins with the identification of public concerns by a number of sources, including the Public Advisory Panel and CMA's Board of Directors. CMA reviews these concerns and recommends priorities for code development. If a public concern cuts across a range of company operations or activities, it may be addressed by more than one code.

CMA member company experts develop each code. Every member company has opportunities to comment of the codes through open meetings and workshops. Public input to the codes is achieved through the Public Advisory Panel. All codes, once approved by CMA's Board of Directors, are made available to others. Use of the Responsible Care service mark, however, must follow CMA's guidelines and can be used only with CMA approval.

Q. Will Responsible Care Codes of Management Practices become the basis for future legislation and regulation?

A. A very positive result of Responsible Care should be for its meaningful and workable practices to be reflected in legislation or regulation that the public endorses through government action.

Q. How will performance against the practice codes be measured? Who does the measuring and how are the results reported?

A. Individual company management will evaluate their own performance against the Codes of Management Practices annually by filling out a self-evaluation form for each code. Companies will feed this information back to CMA. Primary use of such feedback would be to direct the association's support work to areas of the greatest need and highest potential. Over the longer term, these aggregate reports should establish a record of improvement that will enable CMA to communicate industry's performance progress to the public.

Q. What will CMA do to help companies address the Codes of Management Practices?

A. CMA will develop support programs to help companies implement the practices defined in the codes. In general, programs and aids (videotapes, guide-books, educational meetings, etc.) will be similar to the support provided for Title III and CAER. A unique element of Responsible Care is that member companies will help each other by sharing resources and methods they develop to implement the Codes of Management Practices.

Q. Given the kind of data we are reporting under Title III, will the public accept the Responsible Care initiative now?

A. Disclosures under Title III raise the level of public concern significantly in some cases. But the only effective response is to deal with the concerns through company and industry-wide improvements. This is the essence of Responsible Care. The experience in Canada and in the United States suggests it can work.

Q. Will chemical companies apply the initiative outside the United States?

A. CMA represents North American manufacturers and can best assist its members in implementing Responsible Care here. However, the initiative is already international in scope. CMA learned from a two-year old Canadian effort. Other countries that have officially adopted Responsible Care initiatives include Australia, New Zealand, England, Germany, The Netherlands, and France.

CMA's experience with CAER suggests that good iniatives spread rapidly. The United Nations, with U.S. chemical industry assistance, has already developed an international emergency response program modeled on CAER.

CMA has shared Responsible Care materials with counterpart organizations in Europe, Japan, Australia, and Taiwan.

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