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Current Report

Lead

DEADLINES FOR COMPLIANCE PLAN SUBMISSION SET BY OSHA; COOPERATIVE PROGRAMS NOTED

Companies in the primary and secondary smelting and battery manufacturing industries must have lead standard compliance plans available in two stages by July 1 and Aug. 1, the Occupational Safety and Health Administration announced June 5, adding however that a company will not be cited for missing the final deadline if it is engaged in the development of long-range engineering controls in cooperation with OSHA and organized labor (49 FR 23175).

An administrative stay of the compliance plan provisions of the lead standard — 29 CFR 1910.1025(e)(3)(ii)(B) and (E) — was granted to the smelting and battery manufacturing industries in December 1982. At the time, the lead standard was under general reconsideration by OSHA, and the agency said the stay was intended to relieve the industries from costly compliance with requirements that might later be changed (Current Report, Dec. 9, 1982, p. 563).

The United Steelworkers of America filed suit against the stay, and in April OSHA lifted the stay pursuant to an order from the U.S. Court of Appeals for the District of Columbia Circuit. The stay was lifted effective June 1, and OSHA proposed that companies be required to complete the development of compliance plans by July 1, based on information in their possession at that time, and then have updated plans available by Aug. 1 (Current Report, April 26, p. 1267).

OSHA adhered to that schedule in its final action June 5, saying that a request for comment on the proposal elicited "no new evidence" from industry on why the July 1 and Aug. 1 deadlines could not be met. In complying with other provisions of the lead standard, affected companies "should already have prepared fairly detailed written compliance plans," the agency maintained.

Companies and industry groups commenting on the proposal had urged that OSHA provide flexibility for employers currently engaged in cooperative assessment programs aimed at identifying long-range control options for lead exposure (Current Report, May 31, p. 1357). In its comments to the agency, the Lead Industries Association suggested that OSHA, in its final rule, take care to "eliminate the possibility of enforcement citations being issued against an employer" participating in an assessment program.

'Sufficient Flexibility'

OSHA's June 5 notice reflected this concern, remarking that the affected parties "have raised the necessity for sufficient flexibility to accommodate engineering studies currently in progress."

To the extent that the Aug. 1 final deadline "may not be sufficiently flexible in this regard," the best way to accommodate employers engaged in engineering studies "is to issue a field directive in order to provide guidance regarding the agency's policy for enforcing paragraph (e)(3) as of August 1, 1984," the notice stated.

Therefore, "in the event that an employer has by August 1, 1984, initiated a study of long-term engineering control

options, either on its own or through active participation in a cooperative assessment with OSHA and employee representatives (where applicable), a citation for failure to meet the August 1 date will not be issued with respect to that control option, provided that the employer's compliance plan meets the guidelines described in the field directive," the notice said. OSHA indicated that the directive will be issued to agency field staff "in the very near future."

Industry and union representatives declined to comment June 5 on specifics in the OSHA notice, saying that they had not had the opportunity yet to study the document. However, William E. Whitaker, vice president and general manager for AMAX Lead Company of Missouri, noted that his company currently is engaged in a cooperative program with OSHA and the United Steelworkers of America, and said it was "good to know" that such efforts will be taken into account when the final Aug. 1 deadline is enforced.

Michael Wright, industrial hygienist for the Steelworkers, said the terms of the forthcoming directive may be a "critical issue." Unless strict guidelines are set forth, OSHA's policy could lead to "a lot of surface participation" in cooperative programs, Wright contended.

The text of the OSHA notice on the effective dates for the compliance plan provisions appears in the Full Text section of this issue. The action will be reflected in a future Reference File supplement.

Asbestos

ADOPTION OF TWO-LEVEL ASBESTOS STANDARD WITH EXPOSURE, AMBIENT LIMITS URGED BY ORC

Organization Resources Counselors, Inc., urged the Occupational Safety and Health Administration May 25 to adopt two permissible concentrations of asbestos fibers in its final asbestos standard, one as a permissible airborne concentration and the other as a permissible limit for actual employee exposure.

In comments addressed to OSHA, ORC recommended a permissible airborne concentration (PAC) of 0.5 fibers per cubic centimeter of air. This is intended to regulate ambient concentrations of airborne asbestos at the worksite. Further, the organization suggested a permissible exposure limit (PEL) of 0.2 f/cc. This PEL is intended to regulate actual employee exposures to asbestos fibers.

Under ORC's recommended limits, if circumstances require that an employee work in ambient airborne concentrations of asbestos fibers above 0.5 f/cc, and it has been established and documented that engineering controls cannot bring the PAC down to 0.5 f/cc or below, employers would be required to equip all employees with supplied air or positive pressure self-contained breathing apparatus (SCBA).

This level, 0.5 f/cc, would require that the workforce be protected by the use of respirators with a minimum protection factor of five. From 0.5 f/cc down, the use of negative pressure respirators would be acceptable if they were capable of being fit-tested, either quantitatively or qualitatively, and used high efficiency particulate (HEPA) filters, according to ORC. Above 0.5 f/cc, employees must be equipped with air-line respirators, or positive pressure SCBA.

The organization also maintained that the eight-hour time-weighted average airborne concentration of asbestos fibers to which any employee may be exposed should not exceed 0.2 fibers per cubic centimeter of air, inhaled into the lungs. This is the airborne concentration of asbestos fibers at or below which employees need not wear respirators, and above which all employees must be equipped with appropriate respiratory protective equipment.

ORC explained that the practical distinction between the two levels depends upon the definition of "exposure" as being that which is actually inhaled into the lungs. The organization maintained that at 0.5 f/cc the use of a fit-testable respirator equipped with HEPA filters and a protection factor of at least five, would bring actual employee exposure down to 0.1 f/cc. In addition, a protection factor of 10 would yield an actual exposure of 0.05 f/cc, according to the ORC.

"It is ORC's judgment that the PAC/PEL approach discussed above would be a practical solution to the necessity to both work with asbestos and protect employees from the proven hazard it represents," the organization stated in its position paper.

Recommendations for Respirators

Among the respirator requirements recommended by ORC are these: respirators should be used only where engineering controls are not practical and only as part of a complete respirator program; only HEPA filters should be used; all respirators must be fit-tested; a minimum protection factor of five must be provided; supplied air or SCBA must be used above 0.5 f/cc; and respirators must be worn during asbestos removal operations.

In addition, the group asserted that, with the use of proper work practices as part of an integrated health and safety program, the actual ambient airborne concentrations of asbestos in stripping and removal operations should not often reach a time-weighted average of 0.5 f/cc. The basic elements of an effective program for safely handling asbestos materials include:

- The existence of an integrated health and safety program within the company.
- A written program for handling materials containing asbestos.
- Training of potentially exposed employees in the use of the standardized techniques.
- Training in the use of appropriate personal protective equipment including respirators.
- Validation of standardized techniques through the monitoring of operations and the maintenance of records that establish an "historical" standard for ambient levels generated by such techniques.
- Strict enforcement of all general and specific health and safety program techniques within the company.
- Identification of materials containing asbestos.
- Isolation of the removal area where feasible and/or appropriate.
- Thorough, continuous wetting of the material to be removed with surfactant-containing water.
- Careful removal of asbestos insulation to avoid unnecessary disruption of the material.
- Prompt disposal of removed asbestos-containing material packaged to prevent the release of fibers.
- Proper use of appropriate protective clothing and equipment.
- Qualitative or quantitative fit-testing of all respirators used.

► Appropriate change facilities to remove contaminated protective clothing and appropriate cleaning/disposal of contaminated clothing and respirators.

► Prompt and thorough washing of all exposed parts of the body.

► Insistence that all contractors establish and follow safe, effective techniques for all asbestos removal operations, including monitoring.

In addition, ORC recommended that a standardized asbestos removal technique, whose details are enforced by management as part of a comprehensive health and safety program, be established. The requirement for the monitoring of every asbestos removal operation then could be eliminated, the group stated.

While stressing that actual exposure to asbestos fibers should be kept as low as possible for all workers, ORC recommended that estimates of risk be based on exposures that are relevant to 1984 workplace conditions. "It is important to know as accurately as possible what the actual risk is at today's exposure levels, but this is not possible unless we recognize the factors in the risk equation that have changed from 1944 to 1984."

In conclusion, ORC urged OSHA to encourage the National Institute for Occupational Safety and Health to proceed with an extensive testing and certification program for respirators that are used to protect against asbestos fibers.

Risk Assessment

INTERAGENCY TASK FORCE COULD FILL ROLE OF ANALYZING RISK ASSESSMENT PROJECTS

The Interagency Risk Management Council, a federal multi-agency group which in part attempts to identify and resolve differences among agencies using risk assessment procedures, could probably fill the role of a risk assessment agency called for in a pending bill by Rep. Don Ritter (R-Pa) on risk assessment, a House subcommittee was told June 5.

Several agency officials, including Leonard Vance, director of health standards for the Occupational Safety and Health Administration, indicated that the council could meet Ritter's criteria for a central agency that would be responsible for assessing the risks of health, environmental, and other hazards.

The testimony came at a hearing by the House Science and Technology Subcommittee on Natural Resources, Agriculture Research, and Environment on Ritter's bill, HR 4192, "The Risk Assessment Research and Demonstration Act of 1983."

Title 1 of Ritter's bill would require eight federal agencies, including OSHA, the Food and Drug Administration, and the Environmental Protection Agency, to prepare studies assessing the risks of environmental, health, and other types of hazards. Further action or research on these studies would be coordinated by an already-existing agency named by the President (Current Report, May 24, p. 1344).

In response to questions by the committee on using IRMC, whose members come from each of the major health regulatory agencies, as the central coordinating agency, Vance said, "OSHA has no problem with the council carrying out that type of role."

Much of the controversy at the subcommittee hearing centered on the bill's use of the terms risk assessment vs. risk management, as well as the coordinating agency's role in working with risk assessment and risk management tech-

Display Terminals

NO MEDICAL EVIDENCE OF HARMFUL EFFECTS FROM VDT USE, HOUSE SUBCOMMITTEE IS TOLD

In testimony June 5 before a House subcommittee on safety and health, Howard R. Brown, medical director of *The New York Times*, stated that he was "aware of no medical evidence which demonstrates serious health effects from video display terminal usage."

Brown, who appeared as a representative of the American Newspaper Publishers Association, stated that as medical director of *The Times* for the past nine years, he has had responsibility for the health of its 4,400 employees. He told the House Education and Labor Subcommittee on Health and Safety that his conclusions were based on a careful review of the scientific literature developed on VDTs.

In addition, Brown took issue with a scientific study of VDT operators in the newspaper industry which was presented to the subcommittee in October 1983 by Arthur Frank. Results of the questionnaire study indicated that employees using video display terminals showed significantly more headaches, eyestrain, deteriorated vision, low back pain, and shoulder pain than employees doing office work without VDTs (Current Report, Oct. 20, 1983, p. 545).

Among Brown's objections to the study was the fact that "the scientific nature of this study is open to serious question since it was based on anecdotal evidence derived from a questionnaire." He further stated that he was unaware of any peer review of the study and suggested that Frank might submit it to the National Research Council for review. Finally, Brown asserted that Frank himself acknowledged that there were "methodological problems" with the study and aspects of it which were "open to valid critique." For these reasons, Brown deemed the study to be of "limited use."

Noting that the Medical Society of New York recently passed a resolution opposing VDT legislation pending in the New York legislature, Brown stressed that education, not legislation, is needed. He emphasized that manufacturers should increase the training and educational materials provided to VDT employers and employees. In addition, he urged that employers be made aware of the beneficial effects on morale and productivity of incorporating ergonomic principles into the design of the work station.

George Cashau, director of technical research for the American Newspaper Publishers Association, also emphasized the importance of ergonomics in VDT use and stated that employers should purchase VDTs with a full range of operator controls. "The natural forces of the workplace will penalize a manufacturer selling ergonomically inferior VDTs and furniture, and reward the manufacturer who produces a quality product," he asserted in testimony submitted to the subcommittee.

Further study is not necessary in the area of possible radiation effects of VDT use, he said, but further study in the area of ergonomics could be useful.

Asbestos

NEW YORK SHOULD ADOPT EXPOSURE STANDARD MORE STRINGENT THAN OSHA'S, UNION STATES

ALBANY, N.Y. — (By a BNA Staff Correspondent) — New York State should develop a comprehensive program for controlling and identifying asbestos in public buildings,

and adopt an exposure standard more stringent than the Occupational Safety and Health Administration's current regulation, according to Rand Condell, chairman of the health and safety committee of the state's Public Employees Federation (PEF).

Condell, in testimony May 22 before the state Senate Minority Task Force on Occupational Safety and Health, said the state should adopt a standard of 0.1 fiber per cubic centimeter of air for occupational exposure, rather than OSHA's current two fiber per cubic centimeter standard. The 0.1 limit also would be more stringent than a revised standard proposed in April by OSHA, which would set a limit of either 0.5 or 0.2 fiber (Current Report, April 12, p. 1195).

Condell, whose union represents about 50,000 white collar state workers, told the task force that standards should be adopted which protect both non-industrial and industrial employees.

"We do not deny or dispute the fact that airborne asbestos levels measured indoors are lower by a factor of almost 1,000 than those historic asbestos workplace levels where the incidence of asbestos is well established," Condell stated. "However, we cannot tolerate nor permit dismissal of public employees' concerns with asbestos exposure simply because such exposure occurs at relatively low levels, as compared to the industrial setting."

A control program with five major components should be established by the state, Condell recommended. Under the program, the state should locate asbestos materials; characterize the materials in terms of physical condition; determine the concentration of airborne fibers; conduct a worker exposure assessment; and adopt procedures to prevent further release, including removal of the materials.

In addition, the state should adopt a standard which establishes protective work practices, employee training, medical monitoring, air sampling methodology, engineering controls, administrative controls, and employee education.

PEF also is recommending that the statute of limitations for personal injury legal actions be changed from the time of exposure to the time of discovery. Legislation, which is supported by Gov. Mario Cuomo, is being considered in the state legislature which would change the statute.

'Dragging Its Feet'

The senate task force held the hearing to consider what role the state should play in asbestos safety standards and regulation. State Sen. Martin Connor, chairman of the task force, said that "for too long, the state has been dragging its feet, waiting for the federal government to enact legislation that properly protects our workers from toxic substances."

In other testimony, Samuel Syrotynski of the state Health Department recommended the state establish an asbestos safety council to administer a control program.

"Too little is being done to reduce unnecessary environmental exposure within indoor settings," Syrotynski asserted. "Technical solutions are available," he continued, but "what is lacking is a centralized administrative approach."

Syrotynski recommended that a temporary task force be established to develop an inventory of public buildings containing asbestos materials, and to administer funding for remedial work. The task force, under the proposal, would adopt interim measures such as building procedures for controlling exposure and training workers.