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In the presentation of this supplementary material to our original letter of September 8, 1962, it must be realized that the company has not previously had the services that are being suggested and planned and that there has been an accumulation of labor-management problems relating to health, as well as of specific occupational disease claims and improper claims over a period of years. It will take considerable time to gradually evolve the resolution of these problems and lay the foundation for effective observation and control of these problems, and the environmental factors involved. The work that is to be done must be accomplished within the frame work of the company policy, objectives and production operations and in a manner that will be in accord with these factors.

It is necessary that there be an overall plan of observation and control:

I Long range development of a plan for company wide observations relative to sickness and mortality, data of other plants at different geographical locations, an evaluation of medical services in relation to employe exposure, and the resolution of potential or actual industrial health problems.

This would include over an extended period of time eventual visits to other plant locations for the study of exposures and analysis of health matters and potential or actual compensation problems.

II The evaluation of the type and scope of medical services as they relate to the employe needs, and the employes of particular departments or operations in terms of past experiences and future projections at the Cincinnati Plant. This would include:

(a) Survey and analysis of company policies relating to employe health and the medical and nursing services provided over various time periods with appropriate recommendations.

(b) Epidemiological analysis of the medical records, sickness and absenteeism data.

(c) The development of adequate records and medical control systems where they do not exist.

(d) Review of sickness and medical data for recognition and identification of potential or actual disability and aggravation of problems, and recommendations where possible, relative to the ways and means of preventing or correcting the various situations.

III Survey of the plant facilities in Cincinnati to ascertain and appriase actual or harmful environmental factors relating to dust, fumes, mists, gases, etc., which may cause occupational disease or disability. This would include:

(a) Visual inspection of all departments and operations at various locations and estimation of size of problem and employe population exposed.

(b) Detemination of the most reasonable approach and arrangements for an engineering ventilation survey of departmental processes and analysis of various occupational exposures of dusts, fumes, etc., in terms of concentrations and engineering recommendations for control.

IV Medical consultation as a basis of mutual understanding and agreement between management and labor for the resolution of problems and the development of accord on industrial health matters. This would include:

(a) Regular conferences with the Plant Manager, Director of Industrial Relations and Director of Personnel, to develop an understanding and appreciation on the part of the medical consultant, of the past and current problems, which impinge directly or indirectly on industrial health matters and related production and compensation costs.

(b) Preparation of scientific reviews of published data and abstracts of reference sources on particular chemicals, the physiological or toxic effects and recommended control measures.

(c) Participation in conference discussions with management and labor on specific questions relating to industrial health.

(d) Evaluations of data submitted at conference discussions or statement claims relative to specific health effects or specific chemicals, dusts, etc., or particular operations or departments.

V Medical consultation in the evaluation of difficult or special occupational disease claims and disability pertaining to Ohio and coordination with actuarial services. This would include:

(a) Study of clinical and medical data of cases involved.

(b) Study of present and past employment data and departmental exposures and correlation with medical findings.

(c) Study of scientific literature for information pertaining to particular problems.

(d) Preparation of material for proper evaluation of case by compensation authorities or courts.

VI Statistical study and analysis of life insurance and sickness insurance records for the detection and identification of patterns of sickness and specific cause of death for the total plant population and for specific departmental and operational process population comparisons, over the period of insurance coverage. This would include:

(a) Study of employment records of individuals or groups exhibiting sickness or mortality patterns for correlation analysis.

(b) Development wherever possible, estimating risks for specific disability or cause of death for various departments and age groups.

(c) Study of retired employes and the mortality pattern, with correlations with previous employment, departmental exposures and duration of employment.