

RFCI - endorsed

Martonic - claim opp. or "radical" but noted

except for asb. std., this concept addressed
in other stds. e.g. Lead

main problem is merit, med. surveil triggering level
is part 0

industry wants an action level of 2 for crust. industry

Hollett - concern for low level exp. of asbestos.

sees need for surveillance of workers - due to uncertainties
of stds. dealing w/ asbestos.

Carban - does not support Martonic's contention
on 1st instance citation



ASBESTOS INFORMATION ASSOCIATION

1745 Jefferson Davis Highway, Crystal Square 4, Suite 509
Arlington, Virginia 22202 • (703) 979-1150

7 February 1980

Eula Bingham, Ph.D.
Assistant Secretary of Labor
for Occupational Safety and Health
United States Department of Labor
200 Constitution Avenue, N.W.
Room S2315
Washington, D.C. 20210

JOINT LETTER

Dear Dr. Bingham:

The Asbestos Information Association of North America (AIA/NA) and the Association of Asbestos-Cement Pipe Producers (AACPP) have consistently sought to cooperate with OSHA in the development of workable standards which provide good protection against health hazards in the workplace. One important aspect of our efforts has been the development of a regulatory strategy to solve the difficult problems of standard-setting in the construction industry. More specifically, we have presented testimony before the Special Subgroup on Health Standards of the Advisory Committee on Construction Safety and Health, which you requested on July 18, 1979 to evaluate the adequacy of the existing OSHA regulatory program. In that testimony, we made a commitment to develop a specific proposal to protect the health of workers without resorting to cumbersome and unnecessary measures more applicable to fixed-site employment than to construction.

Transmitted herewith is a copy of a Recommended Standard for Occupational Asbestos Exposure in Construction and Other Non-Fixed Work Operations, which we are today submitting to the Subgroup and the Construction Advisory Committee. As detailed in the paper itself and summarized in our cover letter to Dr. Fred Ottoboni, Chairman of the Subgroup, our proposal would create strong incentives for the development and use of products and simple work practices which present little or no threat from asbestos exposures above permissible limits. Our proposal would be far easier to enforce in construction workplaces than the current standard.

As the most recent semiannual regulatory agenda indicates, OSHA is actively considering a separate asbestos standard for construction (Federal Register, Vol. 44, No. 22 of November

CAPCO JEN 0002669

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13, 1979). Thus, we hope that you and your staff will examine closely our proposal. We commend it for adoption as an effective occupational health strategy for construction and other non-fixed work operations.

Please feel free to contact us if you or your staff have any questions or would like to discuss the proposal.

Sincerely,

ASBESTOS INFORMATION ASSOCIATION/
NORTH AMERICA

A/C PIPE PRODUCERS ASSOCIATION
1600 Wilson Blvd., Suite 1308
Arlington, VA 22209



T. A. Dougherty
President

Joseph C. Jackson
President

Enclosure

cc: Bruce A. Hollett
Chairman, OSHA Advisory Committee on Construction Safety & Health

Fred L. Ottoboni, Ph.D.
Chairman, Subgroup on Health Standards, OSHA Advisory Committee
on Construction Safety and Health

Stephen Cooper, OSHA Construction Liaison

CAPCO JEN 0002670



ASBESTOS INFORMATION ASSOCIATION

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7 February 1980

JOINT LETTER

Fred L. Ottoboni, Ph.D.
Chairman, Subgroup on Health Standards
Advisory Committee on Construction Safety & Health
Occupational Safety and Health Administration
United States Department of Labor
3rd Street and Constitution Avenue, N.W.
Washington, D.C. 20210

Dear Dr. Ottoboni:

As you know, the Asbestos Information Association of North America (AIA/NA)* / and the Association of Asbestos Cement Pipe Producers (AACPP)** / strongly support the efforts of the Construction Advisory Committee to develop a workable program for protecting the health of workers in the construction industry. The Advisory Committee and OSHA have both expressed concern that customary requirements for routine monitoring, medical surveillance, "regulated areas" and other measures designed for fixed-worksite jobs in manufacturing industries are simply not workable in construction. The unique characteristics of employment in the construction industry -- particularly the diversity of the work operations, high turnover among both employers and employees, and the predominance of small firms -- call for a new approach which relies on work practices as the most effective means of protecting worker health.

The enclosed industry position paper fulfills our commitment to show, using asbestos as an example, that a workable program for protecting worker health in the construction

* / AIA/NA is an incorporated, non-profit organization representing firms in the United States and Canada involved in the mining and milling of asbestos ore, the sale of asbestos fiber, and the manufacture or processing of asbestos-containing products.

** / AACPP represents corporations in the United States, Canada, Mexico, France, Switzerland, Australia, Greece, India and Finland engaged in the manufacture and sale of asbestos-cement pipe products.

Part 2

industry can be built around the work practices concept. In brief, our Recommended Standard provides a mechanism for classifying products based on their capacity for causing exposures in excess of permissible limits, and creates strong incentives for the development and use of products and work practices which present little or no threat of exposures over the allowable limits. Product classifications would be based on careful testing by qualified laboratories and could be empirically verified by OSHA. In contrast to the monitoring approach now required, the Recommended Standard could be enforced simply by ensuring that the proper products and work practices are being used.

We have included proposed regulatory language which we believe could easily be adapted to apply to other toxic substances used in construction work. In addition, the appendix discusses how the Recommended Standard could be implemented, including detailed laboratory data showing the effectiveness of specific work practices for two asbestos-containing products.

We hope that the Recommended Standard will prove useful to the Subgroup on Health Standards and the Advisory Committee in developing a workable regulatory strategy for the construction industry. Should you or any other member of the Subgroup or the Advisory Committee have any questions or observations after Guy Gabrielson's testimony today, please feel free to contact us.

Sincerely,

ASBESTOS INFORMATION ASSOCIATION/
NORTH AMERICA

A/C PIPE PRODUCERS ASSOCIATION
1600 Wilson Blvd., Suite 1308
Arlington, VA 22209

T. A. Dougherty
T. A. Dougherty
President

Joseph C. Jackson
President

Enclosure

cc: Dr. Eula Bingham
Assistant Secretary of Labor for Occupational Safety & Health
Members of the Advisory Committee on Construction Safety & Health

RECEIVED FEB 08 1980

STATEMENT OF ROBERT D. MAURER
MANAGING DIRECTOR OF THE
RESILIENT FLOOR COVERING INSTITUTE
BEFORE THE
SUBGROUP ON HEALTH STANDARDS
ADVISORY COMMITTEE ON CONSTRUCTION SAFETY
OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION

February 7, 1980

CAPCO JEN 0002673

My name is Robert D. Maurer. I am the Managing Director of the Resilient Floor Covering Institute.

The Resilient Floor Covering Institute represents eight major manufacturers of resilient floor covering. Seven of these companies manufacture resilient floor covering which contains asbestos.

The principal products made by this industry are vinyl asbestos floor tile and sheet vinyl flooring. These products are widely used in residential, commercial, institutional and industrial buildings.

The asbestos fiber used in resilient floor covering is "locked-in" a mix of other ingredients during the manufacturing process. Accordingly, when these products are installed or removed in accordance with proper procedures they do not pose a significant risk of fiber release.

The Resilient Floor Covering Institute supports the efforts of this Subgroup to develop a workable program for protecting the health of workers in the construction industry. We agree with others in industry that customary safeguards such as routine monitoring and medical surveillance are impractical in this context. Accordingly, we join with the Asbestos Information Association in proposing a new approach which relies on work practices for protecting the health of workers at the construction site.

Should this proposal ultimately be adopted, we would, of course, seek certification for our products.

Because asbestos is firmly encapsulated in resilient floor covering, certification testing should disclose minimal risk of fiber release.

Several years ago we began independently to develop recommended work practices for resilient floor covering. This effort was undertaken to provide further assurance against fiber release from resilient floor covering. Regardless of whether such practices would be required under the recommended standard being proposed today, (and we are inclined to think they would not be), we intend to circulate them widely among those who purchase and install our products once they are adopted in final form.

Thank you.