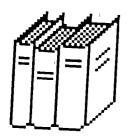


# and Preventive Medicine

### Occupational Safety and Health Administration Regulatory Update



- ♦ Industrial Hygiene/Safety Headquarters
- ◆ Implications
- Summary of Change

#### BACKGROUND

The Occupational Safety and Health Administration (OSHA) is making every effort to bring safety and health issues to the forefront. In addition to increased enforcement of its standards, OSHA plans to develop 20 proposed safety and health standards and 24 final rule standards within the next 2 years. New standards already passed include Bloodborne Pathogens, Confined Space, and Lockout/ Tagout, and OSHA recently updated the Protective Equipment Standard. Sections on Hazard Assessment and Training became effective 5 October 1994.

Proposed rulemaking for standards in 1994 [Title 29, Code of Federal Regulations (CFR), part 1910, Occupational Safety and Health Standards include Indoor Air Quality, Ergonomics, Respiratory Protection, and Recordkeeping. Proposed rulemaking for standards in 1995 include Tuberculosis, Health and Safety Programs, Medical Surveillance and Exposure Monitoring. OSHA is also considering a procedural proposal that would require (at the discretion of the OSHA area director) employers to submit an "abatement certificate" with documentation that an OSHA-cited deficiency has been corrected.

#### THE OSHA REFORM ACT

The OSHA Reform Act (House of Representatives 1280), introduced 10 March 1993 and last acted upon

26 May 1994, requires employers to develop safety and health programs to reduce illness and injury. Companion legislation (Senate 575), which adopts the OSHA Reform Act requirements, is directed specifically to Federal and U.S. Postal Service workplaces. Although the Department of Defense (DOD) and Department of the Army (DA) have existing safety and health programs, the OSHA Reform Act (if adopted as proposed) will impact significantly on these programs and on supporting personnel.

### HIGHLIGHTS OF THE OSHA REFORM ACT

Listed below are 10 specific requirements of the OSHA Reform Act that will impact on existing DOD and DA programs. As proposed, the OSHA Reform Act:

- ◆ Requires the employer to establish written occupational safety and health programs, to include specific methods and procedures, and carry out these programs.
- ◆ Requires the employer to extend his duties to include <u>all</u> employees working at the place of employment, including contractors.
- ◆ Requires emergency temporary standards to be based on <u>best available evidence</u> and to remain in effect for no more than 18 months (currently 6 months).

U.S. Army Center for Health Promotion and Preventive Medicine
Industrial Hygiene Division
Aberdeen Proving Ground, MD 21010-5422

DSN 584-2559 or Commercial 410-671-2559 email: mchbmiw@aehal.apgea.army.mil

- ♦ Revises OSHA provisions for restraining imminent dangers and grants employees the right to refuse to perform a duty identified as the source of an imminent danger.
- ♦ Revises criminal penalties to include officers, management officials and supervisors. Increases fines and length of prison terms (for specific violations). Establishes criminal penalties for willful violations that cause bodily injury (currently for death only). Prohibits payment from the employer's assets of a penalty or fine imposed on a director, officer, or agent of the employer. Provides no immunity from state or local criminal prosecutions.
- ◆ Requires inspections be targeted with priority to high potential for death, serious injury, or exposure to toxic materials or harmful physical agents.
- ◆ Provides for the vacating (e.g., canceling or reducing) of specific citations if the employer demonstrates that he has met certain conditions involving adequate employee training and work rule enforcement.
- ♦ Requires employee training and education, and the establishment of safety and health committees.
- ◆ Revises employer recordkeeping to include reports of work-related illnesses reported by an employee or an employee's physician, unless the employer determines the illness is not work related.
- ◆ Establishes an Office of Construction, Safety, Health and Education within OSHA.

## IMPLICATIONS TO EXISTING PROGRAMS AND PERSONNEL RESOURCES

### ♦ Increased Management Commitment

- ♦ More managers will want more information, training and assistance to ensure their participation is without fault. There may be a high "fear factor" for managers who are found criminally (or financially) liable for violation of a safety- or health-related OSHA standard
- ◆ More headquarters reporting, trends analysis and review of proposed OSHA regulations for potential impact on DOD and DA.

# ♦ Increased Manpower and Funding to Safety and Health Programs

◆ With new and revised regulations come new requirements. Implications to the work force include:

- Increased training for employees and employee representatives. This may impart a stigma of "less productive time and more administrative time."
  - · Increased recordkeeping.
- A shift in supervisory time from production management to personnel management.
- ◆ If corrective actions must be documented, management will spend time tracking the actions and documenting the procedure. Documentation of the adequacy of corrective actions includes workplace and employee monitoring and training.
- ◆ Monitoring includes analysis of samples and an outlay of funds for monitoring equipment. Increased monitoring means increased laboratory analysis and sampling equipment costs.
- ◆ New or expanded program requirements means expanding the staff and budget to support these efforts. Even if contracting is a viable option for supplementing manpower, someone must monitor the contractor's efforts and coordinate the input.

# ◆ Increased Responsibilities and Duties for Safety and Health Personnel

- ◆ Safety and health personnel will experience an increase in the demand for services resulting from:
  - More complex work-site assessments.
- The need to assist in documenting the adequacy of corrective actions, including workplace and employee monitoring and training.
- An increase in training necessary for employees, managers and supervisors.
- The need to increase support to contracting efforts. Since the liability for overseeing contractor operations and activities falls on the site or installation employer, these "employees" cannot be ignored by the Government.
  - An increase in questions from all customers.
- An increase in the time required to review current and proposed OSHA rules and consider the implications for existing programs and installations.

#### FOR ADDITIONAL INFORMATION

For more information, please contact Mr. Stephan C. Graham, CIH, Technical Program Manager, Industrial Hygiene Field Services Program, at DSN 584-2559 or commercial (410) 671-2559.