

Safety Lines

Penalty, standards updates

By Kelly Taylor, MNOSHA Program Analyst, and Alden Hoffman, OSHA Management Team Director, Health

Penalty update: 2010 revisions

MNOSHA is required to adopt policies that are “at least as effective” as the federal OSHA policies. Historically, penalties issued by MNOSHA have been significantly below the national average and some revisions are in response to this discrepancy. The 2010 revisions include the following.

- The maximum amount increased to its statutory limit of \$7,000 and the remaining values were amended to avoid duplication or overlap.
- There was an increase in penalties for violations contributing to a “serious injury.”
- “A workplace accident and injury reduction (AWAIR) program” citations are now issued with a \$1,000 unadjusted penalty.
- A history credit is now determined by looking at the past five years, rather than three years.



Standards update: hexavalent chromium

Federal OSHA published a final rule in the *Federal Register* on May 14, “Revising the notification requirements in the exposure determination provisions of the hexavalent chromium standards,” that confirms the June 15 effective date of the direct final rule about hexavalent chromium.

The direct final rule was published March 17; it requires employers in general industry, construction and shipyards to notify workers of *all* hexavalent chromium exposure level monitoring results, not just exposures that exceed the permissible exposure levels (PEL). The direct final rule provided it would become effective at the federal level June 15, unless federal OSHA received significant adverse comments by April 16. Federal OSHA received no significant adverse comments; the confirmation of effective date was published in the *Federal Register*. Minnesota OSHA will adopt the revision.

In Minnesota, employers are already required under the Employee Right-to-Know Act to conduct annual training whenever there is routine exposure, regardless of whether the PEL is exceeded.

In other hexavalent chromium standard news: The four-year implementation period to install engineering controls to achieve compliance with the permissible exposure limit expired May 31. Feasible engineering controls are now required.

National emphasis program focuses on recordkeeping

By Rob Balsavich
Senior Safety Investigator

In October 2009, federal OSHA initiated a national emphasis program designed to ensure the accuracy of injury and illness data. The “Injury and illness recordkeeping national emphasis program” (RK NEP), was established after several studies indicated there was under-recording of workplace injuries and illnesses on the OSHA Form 300. Minnesota OSHA has developed a similar emphasis program that includes a review of the injury and illness records during a comprehensive safety inspection.

RK NEP looks at establishments that have a low injury rate, that are in an industry category that typically has a high injury and illness rate, using data compiled from the OSHA Data Initiative. The focus of RK NEP will be to identify and correct under-recorded and incorrectly recorded cases and enforce regulatory requirements.

For RK NEP information, visit www.osha.gov/OshDoc/Directive_pdf/CPL_02_10-02.pdf.



PICK YOUR POISON:

a workplace fatality story

By Alden Hoffman, OSHA Management Team Director, Health

Most *Safety Lines* stories aren't written in first-person, but I could not think of another way to introduce the story I heard while attending the 2010 American Industrial Hygiene Conference in May. During the Glen Williamson Forum presentations of interesting and significant federal OSHA cases, the audience was told of a tragic workplace fatality. This accident seemed *so* preventable and the practices that led up to it *so* common that I immediately felt the story needed to be shared.

In August 2006, a two-person crew working for an ornamental iron working company was assigned a repair project 40 miles from the office, in a remote area of Colorado. A spiral staircase in the back patio area needed to be repainted.

The prep work involved the use of solvents, rust removing chemicals and abrasive tools. During a break, the victim

went back to the truck to get a drink. Picking up a sports-drink bottle located near a cooler that contained their lunches, he took a drink. He immediately knew something was not right and spit out about half the contents, swallowing the remainder. He told his coworker he thought he had drunk mineral spirits.

Cell phone service was difficult to find, but eventually the victim's coworker contacted the office and was instructed to return and report to the hospital in the shop's town. It was several hours before the exact identity of what the victim swallowed was known and about five hours before a material safety data sheet was provided to the treating physician. The victim died two days later. The solution in the bottle was not mineral spirits, but a very toxic and strong acid.

It was common practice for employees of this company to re-use household containers for work materials; however, this six-week employee of the company was unaware of this practice. It didn't help that the original sports drink label was still on the bottle and the acid solution was light blue.

My appeal to readers and employers is this: If you are re-using consumer product containers at work, think again, especially if the containers have previously been used for food or beverages. If you must re-use consumer food and beverage containers, be sure the labeling is in compliance with the Minnesota Employee-Right-to-Know rules regarding immediate use and other containers (see Minnesota Rules 5206.1000, subp. 7 and 8 at www.revisor.mn.gov/rules/?id=5206.1000).

Remove any original labels, if possible. Inform current and temporary employees. Store food and work items separately. Review your emergency plans, with attention to communication and medical surveillance.

Further incident details are available on the federal OSHA Web site at: www.osha.gov/pls/imis/accidentsearch.accident_detail?id=201573128.



Minnesota safety report: *Research highlights*

By Brian Zaidman, Senior Research Analyst; Policy Development, Research and Statistics



Minnesota's workplaces continued their steady progression to ever-lower injury and illness rates during 2008. The latest occupational injury and illness figures show that during 2008, there were an estimated 87,900 recordable injury and illness cases; about 22,590 cases involved one or more days away from work. The comparable figures for 2007 were 94,200 total cases and 26,100 days-away-from-work cases. There were 65 work-related fatalities in 2008, a decrease from 72 fatalities in 2007 and 78 fatalities in 2006.

Later this summer, the Department of Labor and Industry will release its annual *Minnesota Workplace Safety Report* detailing injury and illness rates and workplace fatalities for 2008. The report is based on the U.S. Bureau of Labor Statistics' Survey of Occupational Injuries and Illnesses and Census of Fatal Occupational Injuries (CFOI). The report will be available at www.dli.mn.gov/RS/WorkplaceSafety.asp. The following are major highlights from the new report.

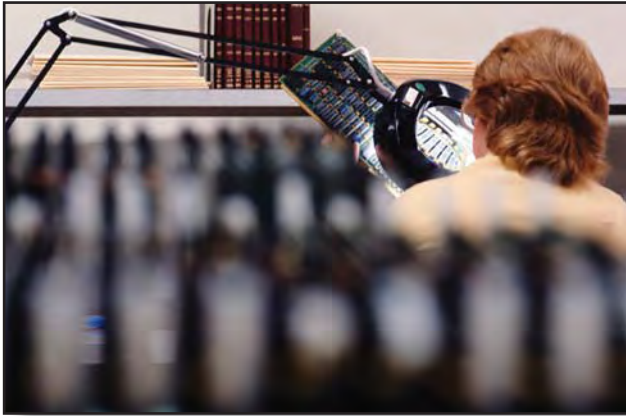
Nonfatal occupational injuries and illnesses

- Minnesota's total rate of workplace injuries and illnesses was 4.2 cases per 100 full-time-equivalent (FTE) workers in 2008, dropping from a rate of 4.6 cases in 2007. This represents a 38 percent decrease from the 2000 rate of 6.8 cases per 100 FTE workers. The national total case rate for private and public workplaces was also 4.2 cases per 100 FTE.
- The rate of cases with days away from work (DAFW) was 1.1 per 100 FTE workers in 2008, dropping from the 1.3 rate recorded in the previous three years. The national rate for DAFW cases from private and public workplaces was 1.2 cases per 100 FTE.
- Minnesota's industry sectors with the highest total injury and illness rates per 100 FTE workers were: 1) education and health services (5.7); 2) natural resources and mining (5.7); and 3) construction (5.6).

Additional statistics about the characteristics of the injured workers, the characteristics of their injuries and the amount of time away from work are available for cases with days away from work.

- The percentage of injured workers 55 and older increased from 9 percent in 2000 to 18 percent in 2008.
- Sprains and strains accounted for 40 percent of the cases with days away from work. The second-highest category was bruises and contusions, with 7 percent of the cases.
- The back was the most commonly injured body part, with 25 percent of the cases, followed by injuries to multiple body parts, with 14 percent of the cases.
- The most common injury events were falls on the same level, overexertion when lifting and getting struck by objects.
- The floors and ground surfaces category was the most frequent source of injury category, followed by containers.
- Among privately owned establishments, the median number of days away from work increased to six days; the median had been at five days from 2000 to 2007. During 2008, 29 percent of the cases involved

Minnesota Safety Report, continues ...



only one or two days away from work and 27 percent of the cases involved more than 20 days away from work. This was a slight shift from the previous year, when 30 percent of the cases had one or two days away from work and 24 percent had 20 days or more days away from work.

Fatal occupational injuries

The CFOI covers all fatal work injuries in the private and public sectors, regardless of program coverage; thus, it includes federal workers and self-employed workers. However, fatal *illnesses* (such as asbestosis) are excluded.

- In 2008, 65 Minnesotans were fatally injured on the job. For 2005 through 2008, Minnesota had an average of 76 fatal work injuries a year, consisting of approximately 55 wage-and-salary workers and 21 self-employed people.
- Among industries, agriculture, forestry, fishing and hunting recorded the highest number of worker fatalities, with 25. Construction had the second-highest number of fatalities, with 13 cases.
- The most frequent causes of Minnesota’s fatal work injuries for 2008 were: highway transportation accidents (43 percent); and contact with objects and equipment (40 percent).

SOII sauce Interesting findings from the Survey of Occupational Injuries and Illnesses

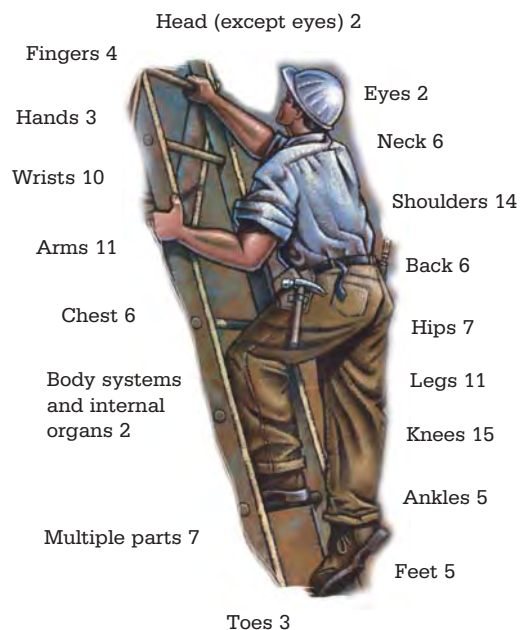
The most recent results from the annual Survey of Occupational Injuries and Illnesses showed that the median number of days away from work, for cases with at least one day away from work, increased from five days in 2007 to six days in 2008.

The median number of days is the value at which half the cases have smaller values and half the cases have larger values.

The diagram at right shows that the median varied widely by the body part injured, ranging from a low of two days for head, eye and body system injuries to a high of 15 days for knee injuries.

**Median days away from work, 2008
Private industry**

Part of body



Minnesota's newest **MNSTAR** worksite



Minnesota Department of Labor and Industry officials recognized **Gray Construction** and **PCL Construction Services** on April 13, for their achievement as a Minnesota Star (MNSTAR) worksite at the United States Postal Services expansion project in Eagan, Minn. The project was a 594,000 square-foot expansion to the existing bulk mail facility that serves Minnesota, North Dakota and parts of Michigan and Wisconsin.

MNSTAR is a Minnesota OSHA program that recognizes worksites where managers and employees work together to develop safety and health management systems that go beyond basic compliance with all applicable OSHA standards and result in immediate and long-term prevention of job-related injuries and illnesses. For more information about the MNSTAR program, visit www.dli.mn.gov/WSC/Mnstar.asp.



Extra caution: Practice safety in road construction work zones

By Gary Robertson, MNOSHA Training Officer

Every Minnesota driver has, unfortunately, experienced the frustration of being caught in one of the many road construction projects around the state. Summertime in Minnesota is also, of course, the road construction season: KEEP RIGHT, SINGLE LANE AHEAD, DETOUR: ROAD WORK AHEAD ... and on and on.

Road construction safe-driving tips

- Before leaving, visit www.dot.state.mn.us/roadwork/current.html for up-to-date information about road construction on your route.
- Wear seatbelts (passengers should too).
- Obey all traffic signs and flaggers.
- Allow ample distance between you and the car in front of you, watch for sudden stops.
- Obey posted speed limits, do not speed.
- Avoid distracted driving such as using a cell phone, eating, drinking or adjusting the radio.
- Be patient and allow for extra time to reach your destination.



Although drivers may be frustrated, every passing vehicle – as well as those vehicles moving within the road construction barriers – can be deadly for the workers on the crew. In April, the Minnesota Department of Transportation honored the 44 workers who have died while working on Minnesota highways since 1960. Drivers' work-zone attention is mandatory and will save lives.

There's a lot to be alert to as a driver. Work zones operate day and night. They can be moving or stationary. They can be marked with orange cones or barrels, concrete barriers, traffic control devices, vehicles with flashers or all of the above. And there may be flaggers, surveyors and road crew members in bright yellow-green or orange vests.

Drivers are required to pay close attention and observe all traffic signs near road construction work-safety zones. Enter and exit these zones with special caution. And remember: Pay attention or pay the price – fines increase in road construction work-safety zones.

Nursing home ergonomics services evaluation now available

By Brian Zaidman, Senior Research Analyst; Policy Development, Research and Statistics



A recently released Department of Labor and Industry (DLI) report, *Evaluation of the Workplace Safety Consultation Nursing Home Ergonomics Services Program*, presents the outcomes of the Minnesota OSHA Workplace Safety Consultation (WSC) unit's provision of ergonomics consultation services to nursing homes. The report describes the ergonomics assistance program, in which services were provided during 2004 and 2005, and compares the results of the nursing homes participating in the program (intervention homes) with a group of similar nursing homes that did not receive services from WSC (control homes). The report is available on the DLI Web site at www.dli.mn.gov/RS/PDF/nursinghome_ergo.pdf.

The report documents the changes in the injury and illness rates of the nursing homes, their workers' compensation outcomes and a symptom survey given to the nursing staff. Some of the highlights of the results are listed below.

- Management commitment to safety improvements and advice from the WSC ergonomics consultants resulted in a significant increase in the number of electric lifts for safe patient-handling for the intervention homes. The number of electric lifts was not significantly different between the intervention and control groups in 2004, but by 2007 there were significant differences in the number of electric lifts. The intervention homes averaged more than double the number of electric lifts as the control homes.
- The intervention homes reported a mean decrease of 2.1 OSHA-recordable back injury cases per 100 full-time equivalent (FTE) workers (a 27 percent decrease) from 2003 to 2007, compared with a decrease of 1.4 OSHA-recordable back injury cases per 100 FTE workers (a 12 percent decrease) for the control homes.
- The intervention nursing homes had a mean decrease of 6.0 OSHA-recordable nursing staff cases per 100 FTE workers (a 39 percent decrease), compared with a decrease of 2.9 OSHA-recordable nursing staff cases per 100 FTE workers (a 10 percent decrease) for the control homes.
- The decrease in the OSHA-recordable case rate among all nursing home workers for the intervention homes was

Nursing homes, continues ...

Safe patient handling: model program available

For the past three years, articles have appeared in *Safety Lines* describing the requirements of Minnesota Statutes §182.6551 through 182.6553 (hospital, outpatient surgical centers and nursing homes) and, later, M.S. §182.6554 (clinical settings). This may be the last reminder to facilities covered by M.S. §182.6554 because those facilities had until July 1, 2010, to establish a written safe patient handling plan.

Facilities covered by M.S. §182.6553 have until Jan. 1, 2011, to achieve their goal of minimizing manual lifting.

While six other states have similar legislation, and other states are considering legislation, the requirements may not be the same. Vendors offering programs may not provide material in compliance with the Minnesota standard. To help those facilities and to ensure their programs meet all the requirements of the Minnesota standard, a model program has been developed by Minnesota OSHA Workplace Safety Consultation's Certified Professional Ergonomist Breca Tschida.

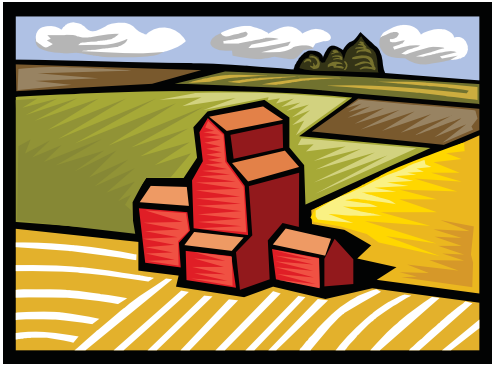
A copy of the model program and other resources are available online at www.dli.mn.gov/WSC/SPHlegislation.asp.

8.3 cases per 100 FTE workers (a 42 percent decrease) compared with a drop of 3.2 cases for the control homes (an 11 percent decrease).

- Comparisons of measures related to workers' compensation claims for musculoskeletal disorders (MSDs) among the nursing staff showed mixed results.
 - Decreases in the workers' compensation indemnity claims rate were similar for both groups of homes, although, when expressed as percentages, the intervention homes' mean percentage decrease was nearly twice the amount of the control homes' decrease.
 - The mean decrease in weeks of temporary total disability was slightly more than 11 weeks per 100 FTE workers for the control homes, compared with a mean decrease of three weeks per 100 FTE workers for intervention homes.
 - There was no consistent pattern in the trends for indemnity costs. The control homes had a larger mean decrease and a greater percentage decrease, while the intervention homes showed much less variability in the mean rate.
- The intervention homes' mean indemnity claims rates were higher than the control homes' mean rates in 2002 and were below the control homes' mean rates in 2007, showing a 36 percent mean decrease compared with a 10 percent mean decrease among the control homes.
- The workers' compensation benefit costs in 2007 were compared with the estimated 2007 costs if the homes in each group had the same claims rates as in 2003. The costs per 100 FTE workers in the intervention homes were 42 percent lower than the estimated costs, compared with a 25 percent cost difference for the control homes. If the intervention homes had the same percentage cost difference as the control homes, the cost rate decrease would have been \$13,800 less per 100 FTE workers than the decrease computed with the intervention home percentage.
- At the time of the initial symptom survey (2004 or 2005), 63 percent of the nursing staff in the intervention homes reported having pain or discomfort on a weekly or daily basis in at least one body part. Forty-five percent reported frequent lower back pain and 34 percent reported frequent neck and shoulder pain. While 26 percent reported that their pain interfered with their work on a weekly or daily basis, among those with frequent pain, the percentage was 41 percent.
- In the follow-up symptom survey (2007 through 2009), the percentages of nursing staff workers in the intervention homes reporting pain for the various body regions were generally equal to or a few percentage points lower than the corresponding percentages in the initial survey. Across all body parts, 61 percent of the workers surveyed reported frequent pain. Pain interfered with work for 23 percent of the respondents and for 38 percent of those with frequent pain.
- Regardless of job tenure, approximately six of every 10 nursing assistants experienced pain on a weekly or daily basis. The percentage of nursing assistants with less than one year of job tenure reporting frequent upper or lower back pain is very similar to the percentage among nursing assistants with more than 20 years of job experience.
- Frequent pain is associated with the frequency of patient lifting, and nursing staff members who were more likely to perform frequent lifts without using mechanical lifting devices were more likely to report frequent pain.

Preparing for fall harvest: *grain bin safety*

By Linda Brown, Principal Safety Investigator



As grain farmers and their families begin emptying grain bins in preparation for fall harvest, it is important to be aware of grain bin hazards. The moisture of last year's wet autumn often caused grain to cake or crust grain at the surface (known as bridging).

Bridged grain is extremely hazardous because it prevents grain flow and hides underlying pockets of air in the grain. Farm workers walking on the bridged surface or attempting to break up the bridged material have fallen through and become engulfed in grain. Farm workers may also be buried by stored grain while the grain

is being emptied from the bottom of the bin. Much like quicksand, the flowing grain can pull the worker completely into the bin. The risk of suffocation increases if the grain has spoiled, because it then emits carbon dioxide, which may displace the oxygen in the bin.

A farm worker must take the following precautions.

- If at all possible, **do not enter storage bins**. Use tools and mechanical equipment to eliminate grain that is caked on the walls of the bin, without entering the bin.
- If you must enter a bin, **before entering**: Stop the flow of grain. Shut down and lockout the loading/unloading equipment that is in operation. Follow the guidelines in the grain standards (1910.272 (g) and (h)) that deal with proper confined-space entry procedures to include atmospheric testing, ventilation, use of a body harness and lifeline by the entrant, designation of an observer or standby person, rescue equipment and communication.

Farm workers need to be trained about the general safety precautions of the facility and specific procedures and safety practices applicable to their job tasks (1910.272(e)).

For further information, visit:

- Minnesota OSHA at www.dli.mn.gov/MnOsha.asp;
- National Institute for Occupational Safety and Health (NIOSH) at www.cdc.gov/niosh; or
- federal OSHA at www.osha.gov.

Former OSHA Management Team member Paul Siciliano dies

Paul Siciliano, 68, died June 21 in St. Luke's Hospital, Duluth, Minn. He was born in Duluth on Nov. 26, 1941. Paul graduated from Superior Central High School in 1959, where he was a member of the undefeated state championship hall of fame football team. Following graduation, he attended Duluth Business University after which he served in the Air Force from 1963 through 1967, which included a tour of duty in Vietnam.

Upon his return from the military, he was employed at Minnesota Power until 1973 when he began working for the state of Minnesota, retiring in 2002

as a member of the Minnesota OSHA Management Team.

Paul was a rugged outdoor type who had loved spending time at Twin Lakes at the log cabin he built from the trees on his land. He is survived by his wife of 42 years, Michele; daughter, Tiffany Siciliano (Scott) Taylor; son, Troy (Christine); sister, Philis (Dale) Heldstab of Montana; and dear cousin, Marilyn Olson of Superior, Wis.; brother-in-law and sister-in-law, Mark and Kelly Peterson; niece, Whitney Peterson.



Conference round-up: Staying connected with worksite safety

By Gary Robertson, MNOSHA Training Officer

Since 1934, the Minnesota Safety Council's annual safety and health conference has been connecting people, with the goal of improving workplace safety and health. It is the Midwest's oldest safety and health gathering.

This year's event, May 12 through 14 in Minneapolis, featured 130 exhibitors, two of which were Minnesota OSHA (MNOSHA) Compliance and MNOSHA Workplace Safety Consultation (WSC).

Each year, MNOSHA is an active conference participant. Exhibitor booths for both consultation and compliance, staffed with trained and experienced investigators, provide an opportunity for all attendees to have their questions answered by a Minnesota OSHA investigator. Each booth provides free handouts detailing requirements for worksite compliance with MNOSHA standards as well.

MNOSHA also participates in the "Lunch with the Enforcers" program, which affords investigators and attendees the opportunity to meet and socialize in a relaxed atmosphere. The lunch format opens the door to informal give and take conversations about worksite safety, and the sharing of personal experiences and views.

At the conference, MNOSHA consultation and compliance investigators also presented six different educational safety seminar sessions, designed to inform attendees about specific OSHA standards and how they are interpreted and enforced by MNOSHA. These training sessions offer MNOSHA the opportunity to highlight any new or changed standards. Additionally, these sessions allow attendees another opportunity to ask experienced MNOSHA staff members specific worksite safety questions.



Minnesota OSHA Compliance staff members Michael Johnson and Carol McLean help a conference attendee.



Representatives from Verso Paper, Sartell, Minn., which is a Minnesota OSHA MNSTAR worksite, receive the Governor's Safety Award during the Minnesota Safety Council's 76th Minnesota Safety and Health Conference, May 14 in Minneapolis. Six certified or recertified MNSTAR worksites and 13 certified or recertified MNSHARP worksites were also honored.

In 1971, the Minnesota Safety Council's executive vice president chaired the task force that assisted with the formation of Minnesota OSHA. This long-standing alliance between the two organizations provides worksite safety information and seminars, compliance and consultation assistance, as well as the Governor's Safety Awards program, to help keep Minnesota's workers safe. MNOSHA is proud and grateful to be part of this highly successful safety and health conference.

osha frequently asked questions answers

As part of its continual effort to improve customer service and provide needed information to employers and employees, Minnesota OSHA (MNOSHA) answers the most frequently asked questions from the previous quarter.

Q What work activity is most affected by the general industry asbestos standard?

A Brake and clutch repair in the general industry standard is the activity engaged in by the largest group of asbestos-exposed workers, although most of them are exposed sporadically and at low levels. The next largest group consists of custodial workers who do not perform their duties as part of construction activities, but clean surfaces, sweep, buff and vacuum floors, and wash walls and windows in manufacturing plants and a wide variety of public and commercial buildings.

Q Who is covered by the bloodborne pathogens standard?

A The bloodborne pathogens standard applies to all employees who have occupational exposure to blood or other potentially infectious materials (OPIM). Occupational exposure is defined as “reasonably anticipated skin, eye, mucous membrane or parenteral contact with blood or OPIM that may result from the performance of the employee’s duties.”

Q In recordkeeping, if an employee reports an injury or illness and receives medical treatment this year, but states the symptoms first arose at some unspecified date last year, on which year's log do I record the case?

A Ordinarily, such a case should be recorded on the log for the year in which the injury or illness occurred. When the date of injury or illness cannot be determined, the date the employee reported the symptoms or received treatment must be used. In the case in question, the injury or illness would be recorded on this year’s log, because the employee cannot specify the date when the symptoms occurred. For more information about recordkeeping, visit www.dli.mn.gov/OSHA/Recordkeeping.asp.

Q What are the fall-protection requirements for all scaffolds?

A Employers must provide fall protection for each employee on a scaffold more than 10 feet (3.1 meters) above a lower level. A competent person must determine the feasibility and safety of providing fall protection for employees erecting or dismantling supported scaffolds.

Q What type of records or documentation must I keep for powered industrial truck operator training?

FAQs, continues ...

A The OSHA standard requires that the employer certify each operator has received the powered industrial truck training and has been evaluated. The written certification record must include the name of the operator, the date of the training, the date of the evaluation and the identity of the person(s) performing the training or evaluation.

Ask MNOSHA

Do you have a question for Minnesota OSHA? To get an answer, call (651) 284-5050 or send an e-mail message to osha.compliance@state.mn.us. We may feature your question here.

New day dawns for MNOSHA Construction Breakfast program, changes in store for 2010-2011 season

For the 2010-2011 season, there are big changes in store for Minnesota OSHA's popular Construction Breakfast seminar program. What was an insightful two-hour targeted safety and health discussion five times a season with a fee for the accompanying breakfast, will now be an insightful hour-and-a-half targeted safety and health discussion five times a season with no fee ... and no accompanying breakfast.

(To avoid confusion, there *will* be a new name for the seminars; however, that is yet to be determined.)

The time and location are not changing. The seminars will still be from 7 to 9 a.m. at the Minnesota Department of Health, Snelling Office Park, 1645 Energy Park Drive, in St. Paul.

The series is coordinated by Gary Robertson, Minnesota OSHA, and a steering committee that includes:

- **Mill Carroll**, senior loss prevention
State Fund Mutual
- **Don Felton**, safety manager
Hasslen Construction Company
- **Micki Hentges**, president/owner
Scaffold Service, Inc.
- **Debra Hilmerson**, president/CEO
Hilmerson Safety Services
- **Terry Hukriede**, regional safety director
Adolphson & Peterson Construction

- **Dwight Jordan**, construction safety and health
Cobb Strecker Dunphy & Zimmermann
- **Mark Monson**, president
M2 Safety Solutions, L.L.C.
- **Scott Richert**, regional director
St. Paul Travelers

More information about the soon-to-be-renamed Construction Breakfast program is at [www.dli.mn.gov/OSHA/Construction Breakfast.asp](http://www.dli.mn.gov/OSHA/Construction%20Breakfast.asp).

2010-2011 dates and topics

- **Sept. 21, 2010**
Locating underground utilities before digging
- **Nov. 16, 2010**
New Department of Health lead standard
- **Jan. 18, 2011**
New federal crane standard
- **March 15, 2011**
Distracted driving hazards for all employees
- **May 17, 2011**
Safety by design