

Safety Lines

Heat stress: take easy precautions, look for symptoms

By Diane Amell, MNOSHA Training Officer

Despite its reputation as a frozen wasteland, Minnesota is no stranger to hot, humid summer weather. Heat is recognized under the state Employee Right-to-Know standard as a harmful physical agent. Federal OSHA is on the second year of its “Campaign to prevent heat illness in outdoor workers,” with its slogan: “Water. Rest. Shade. The work can’t get done without them.” The two key heat-related illnesses are heat stroke and heat exhaustion.

Heat stroke

Heat stroke is an **immediately life-threatening** condition that requires emergency medical attention. Its symptoms include: red, hot, dry skin, sometimes mottled; extremely high body temperature, in excess of 104°F; cessation of sweating; confusion; inability to think clearly; fainting or loss of consciousness; collapse; convulsions or seizures; and death.

Heat exhaustion

Symptoms of heat exhaustion include: thirst; dizziness; headache; wet, sweaty skin; fast heartbeat; nausea or vomiting; weakness; irritability or confusion; fainting; body temperature above 100.4°F; and cramps.

Other heat-related disorders

Other heat-related disorders include heat cramps, heat rash (or “prickly heat”) and transient heat fatigue. Risk factors for the development of heat-related illnesses are: high temperature and humidity; direct sun exposure; no wind or breeze; low liquid intake; heavy physical labor; heavy, impermeable or waterproof protective clothing; lack of acclimitization to hot environments; overall poor health; some medications; and pregnancy.

Prevention

Steps employers should take to prevent heat-related disorders include: providing drinking water and encouraging employees to drink small amounts every 15 minutes; scheduling frequent breaks in shaded or air-conditioned areas; checking workers for signs of heat stress; and training workers about the symptoms of heat-related illness and measures they can take to protect themselves.

Not just a summer threat

While one normally associates heat stress with the summer months, in workplaces such as foundries and commercial bakeries, kitchens and laundries, heat is a year-round hazard. Minnesota Rules 5205.0110, subp. 2a, is the Minnesota OSHA standard for heat stress. While it applies to indoor workrooms in general industry only, all employers whose employees are at risk for heat-related illness are strongly encouraged to take precautions.

More information

Minnesota OSHA has developed a booklet about heat stress, covering heat disorders and workplace evaluation and control. It is online at www.dli.mn.gov/OSHA/PDF/heat_stress_guide.pdf. The federal heat illness campaign is online at www.osha.gov/SLTC/heatillness.



New system standardizes chemical classification, labeling information

By Alden Hoffman, P.E., CIH, Industrial Hygiene Manager

On March 26, the Globally Harmonized System of Classification and Labeling of chemicals, or GHS, was adopted by federal OSHA in conjunction with amendments to the federal Hazard Communication standard, 29 CFR Part 1910.1200. The intent of GHS is to standardize, on a world-wide basis, how chemicals are classified and labeled and, thus, communicated to users.

On May 21, Minnesota OSHA (MNOSHA) informed federal OSHA of its intent to adopt revised Part 1910.1200 with some exceptions. When fully implemented, it will end more than 30 years of enforcement of the Minnesota Employee Right-to-Know Act (Minnesota ERTK) for hazardous chemicals. Part 1910.1200 contains language indicating that ionizing and nonionizing radiation and biological agents are not covered. MNOSHA concurs, but to avoid confusion will not adopt the federal exceptions because they are covered under Minnesota ERTK. In addition, while the new 1910.1200 will require retraining, MNOSHA will retain its annual training requirements under Minnesota ERTK for all chemicals, physical agents and infectious agents.

Until all effective dates of the standard are reached, Minnesota employers may comply with the revised Part 1910.1200 or the current Minnesota ERTK. The first effective date for all employers is to provide training about the new data sheet format and the new pictograms for labels. This must be done by Dec. 1, 2013, and could be included in the company's next scheduled annual training. Labels and safety data sheets must conform to the changes by June 1, 2015 (Dec. 1, 2015 for distributors). Finally, written programs and signs must be in compliance by June 1, 2016.

By 2016, material safety data sheets will be known as safety data sheets, their content will be set out in a unified manner, the descriptions and hazard warnings will be standardized and employees will need to be retrained about these changes and the new labeling pictograms.

Additional information is available online.

- The full text of GHS:
www.unece.org/trans/danger/publi/ghs/ghs_rev00/00files_e.html.
- The full text of federal OSHA's rule:
www.osha.gov/dsg/hazcom/ghs-final-rule.html.
- A side-by-side comparison of old versus new:
www.osha.gov/dsg/hazcom/side-by-side.html.

MNOSHA standards update

By Shelly Techar, MNOSHA Management Analyst

Federal adoptions by reference

Hazard communication standard: On March 26, federal OSHA published in the *Federal Register*, the final rule for hazard communication, to conform with the United Nations' Globally Harmonized System of Classification and Labeling of Chemicals (GHS). Minnesota OSHA will publish a notice in the *State Register* proposing to adopt these revisions, with a minor exception (see story at left).

Revising standards referenced in the acetylene standard 1) direct final rule; request for comments; and 2) final rule; confirmation of effective date: Federal OSHA published the direct final rule and request for comments Dec. 5. In the direct final rule, federal OSHA revised its acetylene standard for general industry by updating a reference to a standard published by a standards-developing organization. Federal OSHA subsequently withdrew the companion proposed rule and confirmed the effective date of the direct final rule March 8, because no significant adverse comments were received. Minnesota OSHA will publish a notice in the *State Register*, proposing to adopt these revisions.

The proposal notice and adoption notice (when available) can be accessed at www.comm.media.state.mn.us/bookstore/mnbookstore.asp?page=register.

Window-washing regulations:

Clear answers to frequently asked questions

Q. If there are permanently dedicated systems that also include anchorages on the building, what standard applies to window washing?

A. Window washing is covered by 1910.66 when there are permanently dedicated systems on the buildings.

Q. Who may perform the certification for anchorages that meet the requirements of 1910.66 App. C (c) (10)?

A. Paragraph 1910.66 App. C, (I) (c) (10), states:
Anchorages to which personal fall arrest equipment is attached shall be capable of supporting at least 5,000 pounds per employee attached, or shall be designed, installed and used as part of a complete personal fall arrest system which maintains a safety factor of at least two, under the supervision of a qualified person. A qualified person under 1910.66 App. C means one with a recognized degree or professional certificate and extensive knowledge and experience in the subject field who is capable of design, analysis, evaluation and specifications in the subject work, project or product.

Q. After an anchorage is identified and certified and meets the requirements of 1910.66 App. C (c) (10), does the anchorage need to be identified and certified annually?

A. 1910.66 (g) (2) (i) states related building supporting structures shall undergo periodic inspections by a competent person not to exceed 12 months.

Q. If a construction company built a facility and had anchorages installed that were capable of supporting 5,000 pounds and the building owner has a certificate that verifies it, do they still need to be identified and certified by a qualified individual?

A. 1910.66 states that the building owner is responsible for assuring the employer that his building and equipment conform to specified requirements of the 1910.66 standard. Certification attests to total compliance with provisions of 1910.66(e), (f), (g) and (h). This provision requires certification that the installation meets the critical design criteria and that it is designed and installed under the supervisor of a registered engineer (e)(1)(i) and (f)(1)(i).



Window-washing regulations continues ...

Window-washing regulations continued ...

- Q.** Do parapet walls, air handling units and other similar items that are not originally designed as anchorages but are sometimes used *as* anchorages need to be certified under Minnesota Rules 5205.0730?
- A.** Yes, according to Minnesota Rules 5205.0730, subp. 5, a qualified individual shall determine that there are identified and certified anchorages for independent safety lines; tiebacks for outriggers, parapet clamps and cornice hooks; and for powered and manual boatswains' chairs; rope descent systems; and lifelines.
- Q.** Who may perform the certification for anchorages that meet the requirements of Minnesota Rules 5205.0730, subp. 5?
- A.** As stated in 5205.0730, subp. 5, qualified individual shall determine that there are identified and certified anchorages. A qualified individual means an individual who, by possession of a recognized degree, certificate or professional standing, and who by extensive knowledge, training and experience has successfully demonstrated the ability to solve or resolve problems relating to the equipment and systems pertaining to the work or project, and the development of plans for the work or project.
- Q.** Under Minnesota Rules 5205.0730, subp. 4, a competent person is required to perform inspections on all related building supporting structures and equipment. Is this required on an annual basis?
- A.** Minnesota Rules 5205.0730, subp. 4, states prior to using any equipment, the building exterior shall be visually inspected by a competent person. The rule does not limit this visual inspection to annually.
- Q.** Do I need to maintain training records on my current employees if I haven't hired any new employees since March 1, 2012, when Minnesota Rules 5205.0730 for window cleaning and building maintenance took effect?
- A.** Minnesota Rules 5205.0730, subp. 8, states that the employer shall provide training for each employee who uses personal fall-protection equipment. This became effective March 1, 2012. Therefore, in accordance with 5205.0730, subp. 8 (G), an employer shall maintain training records, which shall include:
1. the dates training was conducted;
 2. the name, title and qualifications of the person who conducted the training;
 3. the names and job titles of the employees who completed the training; and
 4. a brief summary or outline of the information that was included in the training.

More information

Questions about the window cleaning and building maintenance regulations – or other safety and health concerns – can be directed to Minnesota OSHA at osha.compliance@state.mn.us or (651) 284-5050.

Follow-up inspections show need for continued oversight

By Alden Hoffman, P.E., CIH, Industrial Hygiene Manager

Prior to enactment of Minnesota's abatement verification rule in 1998 – which requires employers to submit progress reports – there was no requirement for employers to inform Minnesota OSHA (MNOSHA) of the corrective actions taken on hazards identified in citations issued. MNOSHA tracked abatement of hazards and conducted follow-up inspections, but the number of inspections was inconsistent.



Currently, MNOSHA continues to track abatement and review the results of follow-up inspections and these efforts show a need for continued oversight. For example, in federal fiscal year 2011, 41 percent of the employers revisited had not fully abated the hazards cited, while three employers had not corrected any of the items. In terms of all items, 22 percent had not been corrected. From 2007 through 2011, 49 percent of the employers revisited had not fully abated the hazards, while 28 percent of the cited items had not been corrected. Some of these employers had submitted reports indicating they had corrected the violations when, in fact, they had not. This practice seems to be continuing in federal fiscal year 2012.

Penalties for failing to abate a violation rise significantly. Minnesota Statutes §182.666 allows for fines up to \$7,000 for each day that a violations continues. Generally, the base penalty begins with the gross amount from the original inspection and increases from there. Credit will be given for partial completion or delays beyond the control of the employer. For this reason, MNOSHA inspectors try to work with employers to receive

accurate and timely information and make an effort to schedule inspections promptly. Employers may apply for an extension, providing a good faith effort has been made to comply and the request is timely.

Abatement of safety and health hazards remains a priority for Minnesota OSHA. Follow-up inspections will continue to be done. When a MNOSHA inspector is on site, the employer should ask for any clarification needed or call the MNOSHA office for assistance later. Corrective efforts should be started as soon as possible, and MNOSHA needs to be informed of the progress.

How to report an *accident*

Employers are required by law to report occupational accidents – in which an employee is killed or three or more are hospitalized – to OSHA **within eight hours**.

During business hours – 8 a.m. to 4:30 p.m., Monday through Friday – call your local area Minnesota OSHA office: Duluth (218) 733-7830; Mankato (507) 389-6507; St. Paul (651) 284-5050 or 1-877-470-6742.

After business hours call the federal OSHA 24-hour toll-free phone number: 1-800-321-6742.

For more information about Minnesota OSHA, visit www.dli.mn.gov/MnOsha.asp.

Concrete and masonry personnel:

It's not just dust, it's silica

By Diane Amell, MNOSHA Training Officer

Employees who work with cement, bricks and concrete blocks can be exposed to high levels of crystalline silica. Workers who cut bricks and concrete are at special risk, because of the high level of dust created by sawing concrete and brick, especially dry sawing.

Crystalline silica can cause a scarring of the lungs known as silicosis. This scarring is permanent and can continue to get worse even after silica exposure has ended. Silicosis in and of itself can be disabling or even fatal. Chronic bronchitis and emphysema have been associated with silica exposure. And it can also make a person more susceptible to developing active tuberculosis and, possibly, kidney disease and autoimmune disorders. Crystalline silica is a *known* carcinogen that causes lung cancer.

Wet methods are the primary way of controlling employee exposure. A joint study by federal OSHA and the National Institute for Occupational Safety and Health (NIOSH) demonstrated that the exposure resulting from stationary masonry saws was reduced from a high of 2.0 mg/m³ using dry saws to 0.04-0.05 mg/m³ by wet cutting as an eight-hour time-weighted average (TWA). Similarly, employee exposure from using a handheld masonry saw outdoors decreased from 1.5 mg/m³ to 0.06 mg/m³ as an eight-hour TWA.

A wet-cutting system requires routine maintenance; pumps, hoses, nozzles and water filters must be replaced or adjusted regularly. Water heaters should be used in cold weather. The use of ground fault circuit interrupters (GFCIs) and electrical equipment rated for use in wet or damp locations is essential.

Vacuum dust collection is sometimes used, but isn't always reliable. Even so, short-term exposures were reduced by 80 to 95 percent for stationary masonry saws and 75 percent for handheld saws.

Federal OSHA has issued a booklet describing various engineering controls and work practices to reduce the risk of crystalline silica exposure to construction workers. *Controlling Silica Exposures in Construction* can be found online at www.osha.gov/Publications/3362silica-exposures.pdf.

Masons and concrete workers can also receive significant exposure to silica during sandblasting, jack hammering, concrete mixing, tuck pointing, rock drilling and tunneling operations. The highest exposures are associated with sandblasting.



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 Which agency protects employees who drill water wells and what regulations apply?

A Minnesota OSHA is the agency that protects employees who drill water well. Well drilling, whether for water or oil, is covered under the general industry standards, 29 CFR 1910 and Minnesota Rules Chapter 5205. The NAICS code for water well drilling is currently subject to the A Workplace Accident and Injury Reduction (AWAIR) Act (Minnesota Statutes 182.653 subd. 8), as well as Employee Right-to-Know (Minnesota Rules Chapter 5206).

Q Are businesses obligated to create emergency plans and is there a place where they can be reviewed?

A Only employers that fall under specific OSHA standards that require an emergency action plan *must* develop such a plan. These standards include:

- 1910.119 Process safety management of highly hazardous chemicals;
- 1910.120 Hazardous waste operations and emergency response (HAZWOPER);
- 1910.157 Portable fire extinguishers;
- 1910.160 Fixed extinguishing systems, general requirements;
- 1910.164 Fire detection systems;
- 1910.272 Grain handling facilities;
- 1910.1047 Ethylene oxide;
- 1910.1050 Methylendianiline; and
- 1910.1051 1,3-Butadiene.

Those facilities that fall under one or more of these standards must develop a plan that meets the requirements of 1910.38 Emergency action plans. The plan must be in writing, kept in the workplace and available for employee review. Employers with 10 or fewer employees do not need a written program and may just communicate the plan verbally to workers. Employers that are not subject to the above standards are strongly encouraged to create plans as well.

Employers are not required to submit such plans to Minnesota OSHA, although the plans must be available for review by Minnesota OSHA investigators in the course of an inspection.

Federal OSHA has developed several resources to assist in the development of these programs, including fact sheets, booklets, a website section and an online tool. The resources are online at www.osha.gov/SLTC/emergencypreparedness. Local fire departments or other emergency responders are also good resources for guidance in developing these plans as well.

Other governmental agencies, such as the Minnesota Pollution Control Agency (MPCA), require similar plans as well.

Q An employer rents and delivers cranes to jobsites. When this employer rents a crane for use on a construction site and one of its employees is required to move the equipment on or from the transportation trailer, must that employee be a certified operator?

A No, an employee only delivering equipment to a construction site would not be engaged in a construction activity when, for example, the employee merely moves the equipment on and off the transportation trailer at access roads or areas adjacent to the construction site. Under the General Industry standard at 29 CFR 1910.180(b)(3), the employee designated to move the crane on and off the trailer must be qualified to operate the crane.

In general, when the operator certification requirement of 29 CFR 1926.1427 becomes effective Nov. 10, 2014, or as required by a state or local license, a rental company employee must meet the requirements of section 1926.1427 when the employee performs activities specified in subpart CC, such as assembly and disassembly, hoisting loads or traveling from place to place on the worksite.

Q I deliver materials to a construction site using a flatbed truck equipped with an articulating crane. At the site, I use the crane to move the materials from the flatbed onto the ground. Must I comply with the crane standard?

A In accordance with 1926.1400(c)(17)(i), subpart CC does not apply when construction materials are delivered from the flatbed to the ground at a construction site and the crane is not used to arrange those materials in a particular sequence for hoisting. This is considered a general industry activity covered by applicable requirements of 29 CFR Part 1910.

To review more questions and answers about the cranes in construction standards, visit www.osha.gov/cranes-derricks/faq.html#rents.

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

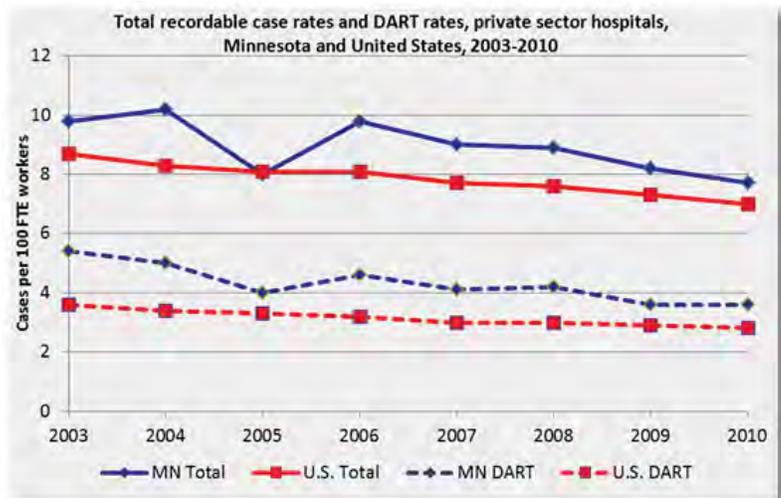
Roslyn Robertson named Workplace Safety Consultation director

Roslyn Robertson has been named director of Minnesota OSHA's Workplace Safety Consultation unit. She is a longtime state and Department of Labor and Industry employee, previously serving as the department's assistant commissioner where she managed both the Minnesota OSHA Compliance and Workplace Safety Consultation programs. She is known and respected throughout Minnesota's business community, in state service and at the Legislature.

Safe-patient-handling update from Workplace Safety Consultation

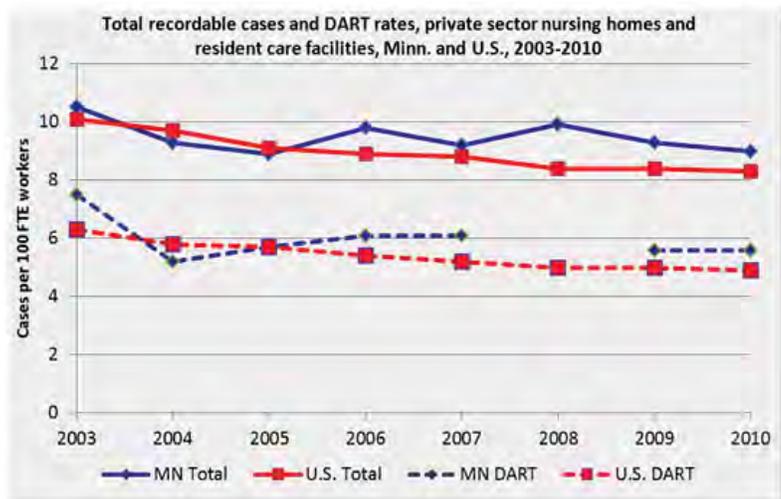
Hospitals

- Indemnity claims involving patient handling accounted for 35 percent of all indemnity claim closed in 2011 and 41 percent of the costs of those claims. Average benefits for patient-handling injury claims closed in 2011 were \$28,000 for a total cost of \$13.2 million.
- Analysis of OSHA logs from 2007 to 2011 for a sample of 24 hospitals shows:
 - decreasing rates for total recordable cases, days-away-from-work (DAFW) cases, DAFW days, back DAWF cases and back DAFW days;
 - decreasing rates for back cases among registered nurses (RNs), licensed practical nurses (LPNs) and certified nursing assistants (CNAs); and
 - back injuries were 73 percent of cases in 2007, 60 percent of cases in 2011.
- A survey of patient-handling equipment and program implementation shows:
 - rate changes were not related to the amount of equipment or to resistance to the use of equipment from the staff or patients; and
 - rate decreases were not related to support and participation from administrators, staff members and the safe-patient-handling committee.



Nursing homes

- Indemnity claims involving patient-handling accounted for 47 percent of all indemnity claims closed in 2011 and 43 percent of the costs of those claims. Average benefits for patient-handling injury claims closed in 2011 were \$21,600 for a total cost of \$9.5 million.
- Analysis of OSHA logs from 2007 to 2011 for a sample of 82 nursing homes shows:
 - decreasing rates for total recordable cases, DAFW cases, DAWF days, back DAFW cases and back DAFW days;
 - decreasing rates for total cases and back cases among nursing assistants; and
 - back injuries were 67 percent of cases in 2007, 64 percent of cases in 2011.
- A survey of patient-handling equipment and program implementation shows:
 - rate decreases were not related to the amount of equipment;



(Minnesota and U.S. case rates used in figures are from the annual Survey of Occupational Injuries and Illnesses, U.S. Bureau of Labor Statistics.)

- rate increases were related to reported resistance to equipment use by nursing assistants; and
- rate decreases were related to support and participation from the staff and the safe-patient-handling committee.

Tools for effective safe-patient-handling programs

- Network with other facilities and learn from each other – compare progress and programs, review training sessions, discuss how to improve safe-patient-handling committees and how to gain support from administrators. You are not in this alone.
- Train yourself or seek a safe-patient-handling champion in your facility, someone responsible to make sure the safe-patient-handling plan is implemented, ensures everything gets done and does not accept excuses.
- There is a growing body of literature about successful programs to reduce injuries among health care workers. One or more people in your facility need to learn about the effective methods and transfer the research into practice. Your safe-patient-handling committee can learn about the latest research together.
- Bring in a professional safety consultant, ergonomist or safe-patient-handling specialist.
- Improve your OSHA recordkeeping skills. An effective, high-quality measurement program is essential to evaluate your safe-patient-handling progress. Learn about your facility's safe-patient-handling injuries and track the changes.
- Your OSHA log injury descriptions should distinguish between injuries due to patient/resident handling, injuries as a result of patient/resident falls and injuries due to patient/resident violence.

Contact Workplace Safety Consultation

Workplace Safety Consultation
Minnesota Department of Labor and Industry
443 Lafayette Road N., St. Paul, MN 55155-4311

Phone: (651) 284-5060
Toll-free: 1-800-657-3776
TTY: (651) 297-4198
Email: osha.consultation@state.mn.us
Web: www.dli.mn.gov/Wsc.asp

Tips for improving your OSHA recordkeeping

Accurate injury and illness records help you assess your safety and health needs. The log is a tool to help you monitor and improve workplace safety.

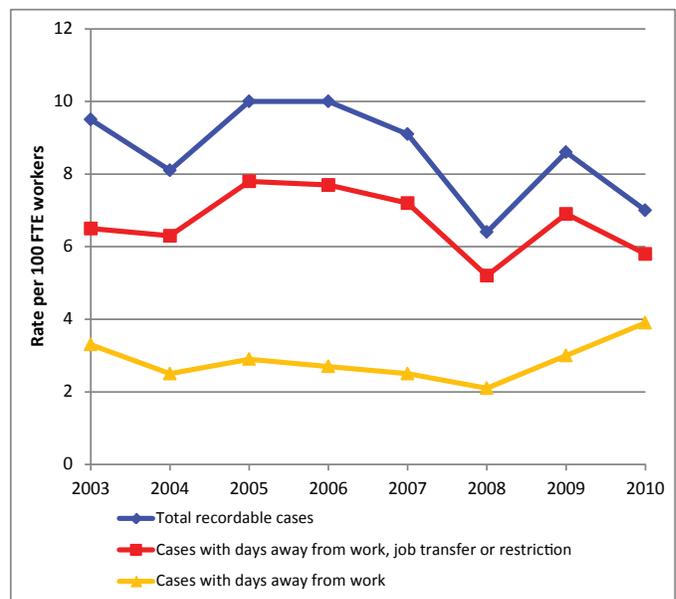
- Describe the injury location, the event, the source, the equipment used, the exact nature of the injury and the precise part of the body affected in enough detail that someone else can understand what happened. *Use more than one line on the log form.*
- Injuries treated only by first aid are not recordable if the injured worker does not lose time from work or require work restrictions.
- Each case is recordable in only one case classification, the most serious outcome (days away or restricted duty) for that case.
- Each case is recordable only in the year the injury event occurred or the illness was first detected. Update the count of days to the log for the initial year.
- Use calendar days, not scheduled work days, when counting days away from work and days of job restriction or job transfer.
- Write legibly and use all the space you need to accurately describe the injury. Update the information as needed to provide an accurate record of injuries and illnesses.
- Share the log information with your establishment's safety committee, safe-patient-handling committee and management. Your log information is useful only if it makes sense to your coworkers. Show that the log results are important.
- OSHA recordkeeping can be complicated. Make sure the person responsible for your establishment's OSHA log is trained and knows where to get questions answered. The Department of Labor and Industry has resources available to help you keep an accurate log. Read the Recordkeeping 101 and 201 series about basic and more advanced recordkeeping topics at www.dli.mn.gov/OSHA/Recordkeeping.asp.
- Email your recordkeeping questions to dli.research@state.mn.us.

The air transportation industry often appears on the list of Minnesota industries with the highest total case incidence rates and the highest rate of cases with days away from work. The air transportation industry includes scheduled passenger air transportation, scheduled freight air transportation and nonscheduled air transportation. Although the Survey of Occupational Injuries and Illnesses (SOII) data for Minnesota does not include publishable data for these industry subsectors, the national SOII tables provide incidence rates to help understand whether the high incidence rates are common to all three types of air transportation or to only a particular subsector.

The national average total case incidence rate for air transportation from 2008 through 2010 was 8.4 cases per 100 full-time-equivalent (FTE) workers. Scheduled passenger air transportation accounted for 88 percent of the air transportation employment and had an average total case incidence rate of 9.3 cases per 100 FTE workers. Scheduled freight air transportation included 2 percent of industry employment and had a total case incidence rate of 3.3 cases per 100 FTE workers. Nonscheduled air transportation accounted for 9 percent of the employment and had an average rate of 2.8 cases per 100 FTE workers. The rate for scheduled passenger air transportation was significantly higher than the rates for the rest of the industry.

As shown in the figure below, Minnesota's air transportation total case incidence rate varied between 6.4 and 10.0 cases per 100 FTE workers from 2003 to 2010, with about two-thirds of the injured workers experiencing days away from work, job restrictions or job transfer. The average incidence rate for the 2008 through 2010 period was 7.3 cases per 100 FTE workers.

Air transportation injury, illness incidence rates per 100 full-time-equivalent workers, Minnesota, 2003-2010



Among cases with one or more days away from work during the 2003 through 2010 period:

- men accounted for 53 percent of the cases;
- workers from 45 to 54 years old accounted for 37 percent of the cases, followed by 35 to 44 year olds with 27 percent;
- three-fourths of the workers had their jobs for five years or longer;
- service workers accounted for 38 percent of the cases and transportation and material moving workers accounted for 31 percent;
- the most common injury was a sprain or strain, with 71 percent of the cases; and
- the most common injury events were worker overexertion, often in lifting, and contact with objects or equipment.

Next season of free Construction Seminars to offer MNOSHA review of standard, plus compliance practices shown by construction stakeholder

By Gary Robertson, MNOSHA Training Officer

Minnesota OSHA wrapped up another successful Construction Seminar season May 15, but looks forward to changes to the program for the 2012/2013 season that will make the seminars even more beneficial for attendees.

In addition to staff members from Minnesota OSHA Compliance discussing and clarifying construction-related regulations, each seminar will feature someone from the construction industry who will show the compliance practices used in the field and teach attendees real-world examples of how to comply.

There has been a noted steady increase in attendance, a positive indicator this free program continues to fill a need for safety in the state's construction industry. The two-hour sessions are a great time for attendees to join the discussion, give their perspective, ask questions and connect with Minnesota OSHA Compliance on neutral ground. Besides the topic of the day, MNOSHA also explains current issues being found in workplaces throughout the state and where it is focusing its attention for special emphasis programs.



Mark your calendars now for:

- Sept. 24, 2012 – Safety training for construction, a panel discussion;
- Nov. 20, 2012 – Residential fall-protection, focusing on roofs and trusses;
- Jan. 15, 2013 – Globally Harmonized System of Classification and Labeling (GHS) of chemicals;
- March 12, 2013 – The new crane standard; and
- May 14, 2013 – Electrical worksite safety

Stay tuned to *Safety Lines* and MNOSHA's Web page – at www.dli.mn.gov/OSHA/ConstructionBreakfast.asp – for more complete descriptions about the topics and the presenting speakers. See you in September.

Information, restrictions for working teens

Each year, thousands of working teens find value in employment far beyond financial necessity. Although employment of teens provides many benefits, the potential for serious injury and death must not be denied.

Employers, teens and parents can increase their awareness of the laws governing child labor and take a proactive approach to ensure all teens are afforded the right to work safely by visiting the Department of Labor and Industry's "Teen workers" Web pages at www.dli.mn.gov/LS/TeenWorkers.asp.

Don't miss the new *Youth rules for kids at work* handout that details where Minnesota teens work, what hours they can work, what jobs are prohibited, the current minimum wage and how to get more information about labor laws or safety and health concerns.



New federal OSHA respiratory protection training resources

By Diane Amell, MNOSHA Training Officer



In January, federal OSHA published a series of nine videos on its website addressing different aspects of the use of respiratory protection in the workplace, nearly all with accompanying Spanish versions.

One video addresses general industry concerns specifically, while another discusses construction issues. Six of the remaining seven discuss specific aspects of the respiratory protection standard, including medical evaluations and training.

The final video, which is the only one without a Spanish version, covers counterfeit and altered respirators and certification from the National Institute for Occupational Safety and Health (NIOSH), an issue that has drawn a great deal of attention in recent months.

All have a running time of 15 minutes or fewer. The videos can be viewed on the federal OSHA website at www.osha.gov/SLTC/respiratoryprotection/training_videos.html#video.



PLAN PROVIDE TRAIN

Three simple steps to preventing falls.

Federal OSHA kicks off fall-protection program

By Diane Amell, MNOSHA Training Officer

On April 26, the U.S. Department of Labor, in cooperation with the National Institute of Occupational Safety and Health (NIOSH), launched a new emphasis program to reduce the number of serious injuries and deaths from falls in the construction industry. Nationwide, falls are the leading cause of death in construction. The campaign focuses on three steps to prevent falls: plan, provide and train.

Plan ahead to get the job done safely. **Provide** the right equipment. **Train** everyone to use the equipment safely.

The campaign specifically highlights falls from ladders, scaffolds and roofs.

Federal OSHA and NIOSH have developed a poster and fact sheet for the campaign. These materials can be accessed through the OSHA website at www.osha.gov/stopfalls.

Burski wins Arthur E. McCauley, Jr. Award



Minnesota Department of Labor and Industry Commissioner Ken Peterson (left) presents Harvey Burski with the Arthur E. McCauley, Jr. Award, May 10, at the Minnesota Safety Council's 78th Annual Minnesota Safety and Health Conference.

Considered by some Minnesotans to be the "Godfather of Safety," Burski was an instructor at the inception of the Master of Industrial Health and Safety program at the University of Minnesota – Duluth (UMD) in 1975. He left full-time teaching in 1986 and retired as a safety director in 1999, but continues to be an adjunct professor at UMD today. He was a member of the Occupational Safety and Health Advisory Council from 1999 to 2011.

The annual award honors a safety or health professional who is an example of safety excellence. It is named for former Minnesota Safety Council Member Arthur E. McCauley, Jr., who is recognized for his dedication and tireless efforts to improve safety and health in Minnesota's workplaces.