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March 31, 1999

Attn: Ms. Marthe Kent, Chair
Small Business Advocacy Review Panel
U.S. Dept. of Labor
200 Constitution Avenue, NW
Room N-3605
Washington, DC 20210

Re: Comments on "Working Draft of a
Proposed Ergonomics Program Standard"
As dated February 12, 1999 for the
Small Business Advocacy Review Panel process

From: Charles A. Martin
President, Treasurer, & COO
Bommer Industries, Inc.
P.O. Box 187
Landrum, SC 29356

Dear Ms. Kent:

Thank you and OSHA for the opportunity for me to provide comments on this proposed Ergonomics Program Standard. My comments may or may not effect the final outcome, but I greatly appreciate this opportunity to participate in the process on such an important issue. My opinions on safety and ergonomic issues have been impacted and formed by both my formal education and my work experiences over 26 years with various manufacturing firms. My formal education is a degree in industrial engineering and a MBA degree. My manufacturing work experience began with my cooperative education with Tennessee Eastman Company while in college, almost 5 years with Celanese Corporation, about 1 year with Rockwell International, and over 20 years with Bommer Industries, Inc.

1. Company Background

My current employer, Bommer Industries, Inc., is a privately held manufacturing company. The company has been in continuous operation for over 122 years since it was founded in 1876 in Brooklyn, New York. The company is primarily a metal fabricator in the SIC 34 series with the principal manufactured product category being builder's hardware. This consists of commercial grade door hinges, single acting and double acting spring hinges, spring door pivots, gravity gate pivots, and postal specialty products including both vertical and horizontal apartment mailboxes.

The company is responsible for numerous inventions and patents in the builder's hardware field including the original invention of the double acting spring hinge in 1880.

L 0293

This type of hinge is referred to sometimes as a "saloon door" hinge in that it swings in both directions and returns to its original position. In addition, in the 1980's we started distributing both decorative and functional furniture hardware items from other domestic and international sources to the major wood furniture manufacturers in the United States.

Bommer Industries, Inc. has approximately 200 total employees at two manufacturing sites and one distribution site located in the upstate region of South Carolina. Our manufacturing operations consist of press operations, sawing, shearing, drilling, electroplating, metal polishing and buffing, painting, hand assembly, and warehousing.

In terms of safety, my company currently has experienced over 4,500,000 employee labor hours without incurring a "Lost Time" accident. This represents over 12 years of operation since the last Lost Time accident that occurred in 1987. However, the company still has reportable safety related incidents that occur every year. While these injuries may not be severe enough to incur lost time from work, they still involve pain and suffering. The current safety focus at Bommer Industries, Inc. is to minimize these types of accidents as much as is reasonably possible.

11. Comments and Recommendations on OSHA's Proposed Ergonomics Program Standard

My twelve (12) comments and recommendations listed below are made after carefully reviewing the information that was provided to me by your agency. They are not made or listed in any order of importance or rank, but rather are presented solely as I felt the need. These comments are mine and mine alone.

These comments and recommendations are merely my opinion and not to be construed as absolute fact. However, my opinion is from the viewpoint of a knowledgeable and experienced operating officer of a small manufacturing firm that has experienced ergonomic situations that these proposed standards are intended to reduce. I strongly believe that my comments are practical in nature and not theoretical. Therefore, I believe that my comments are both valid and important to be heard and adopted in some form.

In general, I believe the proposed OSHA ergonomic regulation is fairly understandable and clear. However, I believe that some major modifications are necessary if the purpose of the standard - "to reduce the large number and severity of WMSD's employees have been experiencing" - as stated in section 1910.501, is to be achieved.

1. OSHA needs to convene a special panel of ONLY Manufacturing firms for input and comment - This proposed ergonomic standard would cover virtually every manufacturing firm in the country - small, medium, and large. Commerce Secretary William Daley has declared 1999 as "The Year of the Small Manufacturer." According to his proclamation, more than 380,000 manufacturing firms have fewer than 500 employees and together they employ 12 million Americans. He also indicated that these small manufacturing firms "are critical to the competitiveness of

the entire manufacturing sector and to the health of the U.S. economy." I believe that Secretary Daley is right. Since this proposed ergonomic standard will so significantly impact so many small businesses, a special effort should be made by OSHA to receive input from as many of these firms as possible. I speak for only one of these many small manufacturing firms. My recommendation is that a panel of only manufacturing firms be formed for input in this process. This panel could be composed of small, medium, and large manufacturing firms recognizing that the greatest impact of this proposed ergonomic standard will fall on small firms, rather than large firms due to more limited financial and personnel resources within smaller firms. Therefore, this panel should have a majority of small manufacturing firms.

2. The proposed ergonomic regulation should cover ALL industries. Three major industry groups specifically are not covered by this proposed ergonomic standard. - The agricultural, construction, and maritime industries are "exempt" from the proposed ergonomic regulation, as I understand it now. I find this difficult to fathom or understand from a logical standpoint. These are industries that would experience the type of injuries that this proposed ergonomic regulation is intended to cover. In addition, the safety of the employees within these industries should be just as important to the federal government (OSHA) as any other employees within other industries. Not only are these employers being exempted from the regulatory compliance problems, but also the employees are being exempted from the protection that this proposed ergonomic regulation is supposed to be providing them. Therefore, it does not appear to make sense to me for these industries to be excluded from this proposed ergonomic regulation. The only reason that could possibly explain this apparent discrepancy is that once this proposed ergonomic regulation is approved and enacted, it will be easier to get coverage for these industries rather than going through the formal rulemaking process again.
3. The threshold for "entry" into the proposed ergonomic standard for firms (other than the three industries exempted, manufacturing operations, and material handling operations) is too low at one reported work related musculoskeletal disorder (WMSD). - This entry point while having the advantage of being quantifiable is too low and does not in any way recognize the employment pool of the firm so effected. The "incident rate" calculation which is based on 200,000 employee work hours (i.e. 100 employees working 50 weeks per year at 40 hours per week = 100 employee work years) is a prime example of a statistic indicator that has a degree of "leveling" incorporated in order to compare firms. One occurrence could cause a small service firm employing 15 people to be covered by these regulations, while a large firm such as a bank or law firm employing 1000 employees, may not be covered for many years until a WMSD is reported.
4. The proposed ergonomic regulation will significantly complicate and burden small manufacturing firms with additional reporting and record keeping. Much of what the proposed ergonomic regulation mandates is already being done in some form or fashion within my firm and many other small manufacturing firms in compliance with existing OSHA rules and good business practice. - Under the proposed ergonomic

regulation six (6) basic elements of an ergonomics program would be needed in order to comply. Our overall safety program would have to have a "subset" of records and reporting in order to comply with this new regulation. These six elements already exist in most safety programs in one form or another and these would have to be modified or adapted in order to comply. Duplication of effort would most likely result.

5. WMSD versus MSD is at best difficult for an employer to determine or establish. - This particular type of injury is at best difficult for an employer to establish causality. This proposed ergonomic regulation would encourage these types of injuries to be reported as work related by employees for various reasons. Unfortunately, a large number of these types of injuries can occur away from the workplace and can be "carried into the workplace" in order to receive both medical and/or financial benefits and coverage. This proposed ergonomic regulation would certainly increase the reporting of these injuries and increase the burden on the employer in trying to determine if, in fact, the MSD occurred at work or by other means. An employer can expend a large amount of money with the medical providers trying to determine if an MSD is work related. If an employee has a MSD condition and this proposed ergonomic regulation is adopted, then many employees will probably conclude that they are better off to have the MSD claimed as work related. If the MSD is claimed as work related, then the employee can save money by not having to pay the health insurance deductible or any co-paying medical expenses to obtain health benefits. Certainly under existing regulations this situation is occurring with some employees and these proposed ergonomic regulations will only increase this type of occurrence.
6. The proposed ergonomic regulation needs to be more "quantifiable" in terminology. - The proposed ergonomic regulation mandates that employers, in complying, must do what is "feasible" under 1910.505 covering job hazard analysis and control. I predict that what is "feasible" will be greatly influenced by not only the cost, but who is paying the cost. In other words, OSHA will tend to view what is "feasible" much more broadly and possibly more expensively than the employer who is having to comply and also incidentally, paying the cost to comply. For example, OSHA may think that spending \$300,000 to automate a hand assembly operation involving one person might be "feasible", while the employer may think that a \$20,000 expenditure reducing the exposure to injury is a better, more "feasible" option. The employer runs the real risk of being "second guessed" as to not having done what was "feasible" on every possible job covered by this proposed ergonomic regulation.
7. The proposed ergonomic regulation will impose extra costs on employers that they may not be able to absorb. The cost of compliance will vary widely among employers. However, a disproportionate share will tend to fall on the smaller manufacturing firms. These costs will include both start up and on going costs. While the economy is strong at present, these costs will have to be incurred in both good times and bad. Please be aware that many small manufacturing firms are selling products in competition with several larger companies. Typically, these small firms

are limited in their ability to increase the price of their products to recover cost increases for almost any reason. Therefore, these compliance cost increases will reduce their ability to remain as profitable and competitive, as they would have been otherwise. This particular issue will impact all firms, but will tend to impact smaller firms, such as Bommer Industries, Inc., harder than larger firms within our industry.

8. The medical management section of the proposed ergonomic regulation significantly changes the structure and format of providing compensation for injured employees and needs to be significantly changed to reduce the cost and burden on employers. This section under 1910.507 includes "make whole" provisions that are contrary to existing workers' compensation rules within South Carolina and other states. Currently, when an employee is injured at work and has to take time away from work due to the injury, the employee receives about two thirds of the state average wage while he/she is recovering after being out for 5 days. The proposed ergonomic regulation mandates that employers make up the difference from what workers' compensation insurance provides the employee beginning the first day out from work. This is a potentially major change that could drastically impact costs for employers and also insurance carriers. While this improved benefit in the proposed ergonomic regulation is well intended to assist the injured employee, it is flawed for several reasons. First, it singles out this type of injury (WMSD's) from other types of injuries, such as burns or lacerations, for improved and different compensation while recovering. Second, while "making the employee whole" (even for the first day out due to the injury) has the advantage of being humanistic, it ignores the downside of providing no financial incentive whatsoever for the employee to return to work as soon as is medically possible. This lack of any financial incentive would tend to significantly lengthen the time away from work for the employee and thereby increase the real cost to the employer in unproductive pay and possibly in temporary replacement labor. This change substantially modifies an underlying concept and philosophy that has existed in workers' compensation since originally enacted in the early part of this century.
9. The proposed ergonomic regulation may cause undue hardship on employers versus other regulations that they have to comply with in order to operate. I recommend that prior to the final adoption of these regulations, a complete review and report be prepared addressing the various possible regulatory conflict areas with which employers may be faced - For example, the ADA regulations may be in conflict with certain parts of this proposed ergonomic regulation. In addition, for certain employers that are non unionized, issues and conflicts with respect to the National Labor Relations Act and employee participation and representatives in complying with this proposed ergonomic standard may exist.
10. The proposed ergonomic regulation could possibly deflect time and attention away from more serious and life threatening type injuries. At my firm this year, we are focusing our resources and energy on trying to improve our work environment around presses with increased guarding and safety devices in addition to other types of improvements. A safety Task Force has been formed to meet periodically to review

the results of our improvements. My firm is expending what we believe to be a significant amount of money this year in trying to make our work place safer. Obviously, this proposed ergonomic regulation will require a certain amount of time, energy, and financial resources that are already being committed to other areas. A small manufacturing company, just like a large manufacturing company, has a finite amount of resources that can be devoted to safety.

11. The proposed ergonomic regulation needs to be "practical" and not "theoretical" - In our SBREFA panel phone conference, I felt a little bit in the minority even among the other SER's since my firm actually has experienced a WMSD. This statistic was not theoretical to me, but rather real life. I actually personally know the employees that have experienced a WMSD - they are real people and not a hypothetical event. On a related note, I actually wear safety shoes to work everyday. I have a pair of safety glasses on my desk. These are "practical" real life safety tools that I believe in and, in fact, use everyday. The purpose of this point is that more people that are this directly tied to locations that have the potential to have WMSD's and other types of safety incidences (such as manufacturing locations) should have as much "practical" input as possible in this review process. Also some discussion focused on "averages" in terms of cost, injury frequency, injury severity, etc. This is yet another example of the "theoretical" view within this process. From a "practical" point of view, as my statistics college professor so ably said: "In a lake that averages only 2 inches deep you can still drown. The important issue is knowing where it is not average, rather than what the average is." A lot of information was presented about national statistics and national frequency of occurrence. In my opinion, the real statistic that matters to me as operating officer of Bommer Industries, Inc. is what is happening at my company rather than nationally. The comparison is like the local or national unemployment rate being for example, 4.0%. If you are unemployed, it is 100%. This comment is hard for me to express in words and is more of a "feeling" or "thought", rather than a specific recommendation for improvement in the proposed ergonomic regulation.

12. I recommend that a federal tax credit is authorized up to a certain dollar limit per year to assist small manufacturers or other small entities meet the initial cost incurred in order to comply with the proposed ergonomic regulation. This tax credit could have both a dollar limit per year and a time limit of maybe three years to assist in meeting the burden of compliance with this proposed regulation. This federal tax credit would be of value to profitable firms. However, if a firm was not profitable, a federal tax credit would have limited immediate value. Unfortunately, unprofitable firms would be the ones in the most need of relief from the costs incurred in complying with this proposed ergonomic regulation. A federal tax credit would not provide relief to firms in the most potential need of relief. For the same reason that the federal government would probably not be inclined to agree with this tax credit idea, small business would be inclined to ask for it and need it, i.e. - the cost.

III. Summary and Conclusions

I believe that this proposed ergonomic regulation as dated February 12, 1999 can be significantly improved with the incorporation of the above comments and recommendations. OSHA should "go slow", rather than "rush to judgement" in formulating this proposed ergonomic regulation. I fully support the safety goals of OSHA since these goals are well intended. However, please be aware that in your pursuit of ergonomic safety regulations to reduce pain and suffering for individuals, businesses may suffer increased pain and suffering as a direct result of your program. In other words, while trying to reduce and/or eliminate a "pain in the neck" for employees, OSHA may be creating and/or increasing a "pain in the neck" for employers!

Sincerely,
Bommer Industries, Inc.



Charles A. Martin
President, Treasurer, & COO

- Cc: (1) Mr. Dan Chenok
Assistant Branch Chief
Office of Management and Budget
- (2) Mr. Stuart Shapiro
Office of Management and Budget
- (3) Mr. Jere W. Glover Ann Claudia Rayford
Chief Counsel for Advocacy
U.S. Small Business Administration

L 0299

Corsey, Adrian

From: gary neil [SMTP:gneil@neb-sandhills.net]

Sent: Wednesday, March 31, 1999 2:17 PM

To: Corsey, Adrian

Subject: comments on proposed ergo standards

please find attached my comments on the proposed ergo standards. if you



gary.doc

have any questions please give me a call at 402-489-2728 gary neil

L 0300

Answers to Issues for Comment & Discussion With Small Business Advocacy Review
Panel on OSHA's Draft Proposed Ergonomics Program Standard

General Questions

1. Is the draft standard clear? Are any provisions unclear? If so, which ones are unclear?

I found the standard to be fairly clear. If I understand them, they require an education or training program for employees on what MSD is. They also require establishment of a reporting process for MSD as they occur so corrective action can be taken.

2. How could OSHA clarify the standard to eliminate any problems in understanding?

I found that figure 1, Ergonomics Program Standard Flowchart, to be very helpful in determining what to do.

3. Are there any non-regulatory approaches OSHA could take that would provide you and other small entities with ways to reduce/eliminate MSD injuring effectively? For example, would guidance on how to set up a safety and health program be an effective approach?

I think that any non-regulatory approaches OSHA offers would be helpful in implementing the standards, for example, OSHA consultations.

4. Are you aware of any regulations that duplicate the requirements of this regulation? If so, what is that regulation(s)?

I am not aware of any duplicate standards.

5. Do you foresee any difficulty in implementing the employee participation element of the proposed rule? For example, do you believe that it will raise labor/management issues? If so, why? Would implementation of the draft ergonomics standard be easier or more difficult depending on whether you have a union-shop?

I do not see any difficulty in implementation of these standards.

6. Do you have a safety and health program? If yes, does it include ergonomics? What costs or benefits, if any, would this rule add that are not already addressed by your safety and health program?

Consolidated has an established Safety Committee which meets quarterly. This standard would be implemented by that group. Our new safety manual does have a section on ergonomics and work station design.

7. What kinds of compliance assistance materials would assist you in assessing ergonomic hazards? For example, would a checklist be helpful to identify ergonomic hazards?

A check sheet would be very helpful especially for the areas that are not so obvious.

8. In your opinion, does this rule create a disincentive to hire, retain, or provide insurance to persons who might be perceived as being pre-disposed to ergonomic injuries? If so, please explain.

No, I am not sure how you would determine who is pre-disposed to ergonomic injuries.

9. If you already have an ergonomics program in place, how many hours did it take for you to set the program up usually? Have you seen measurable results? If so, what are they? To the degree your program was ineffective, do you know why it was ineffective?

We are in the process of editing our new safety manual and, at this point, have not reviewed the ergonomic section. I would expect the review and implementation to take about a week of the Safety Committee time.

10. With whom do you currently consult or obtain guidance on workplace safety issues? Safety and health professionals? Your insurance carrier? Trade associations? OSHA consultation program? Your lawyer? Others? Do you feel there will be a need for outside consulting in order to come in compliance with this proposed rule? How much do you think any necessary outside assistance will cost?

I use several sources on workplace safety issues:

- Minnesota Safety Committee for Telephone Companies
- State of Nebraska Safety Council
- State of Nebraska OSHA Consultation Program (this summer)

I feel that there is a need for outside consulting because there are so many rules and regulations to follow and it is hard to cover all the bases. Outside help provides some assurance that we are in compliance.

11. How do you currently identify work-related MSD hazards in your business and how might this change as a result of this rule?

We are currently reviewing our new safety manual and have not fully completed that process; however, I would assume it will work like other areas where there is education of the employees on MSD and establish a reporting process similar to the accident reporting process.

12. What is your experience with workers' compensation premiums in the last few years? If you have a safety and health program that includes ergonomics, have you seen any impact of the program on your premiums?

13. Do you have any questions about how OSHA will enforce this rule? If yes, what are they?

I would suggest a grace period or penalty-free period if you were working with OSHA to be compliant with these new rules.

Costs and Assumptions

1. How many hours do you estimate it will take to comply with each of the rule's program elements? What do you estimate the costs of "controlling ergonomic hazards" will be? What is the basis for this estimate?

It is very difficult to estimate time and costs of compliance. To establish training for employees and develop a reporting process, I would estimate four people weeks. The basis for this estimate includes two safety committee meetings and two employee group trainings.

2. Are you aware of your safety and health obligations with respect to ergonomics under the General Duty Clause of the OSH Act, which requires employers to provide their employees with a work-place that is free of recognized hazards that are causing or are likely to cause death or serious physical harm? If yes, how did you become aware of your General Duty clause obligations? Has this awareness led you to develop measures addressing ergonomic hazards?

Yes, and ergonomics is a part of our new safety manual.

3. Will you be able to pass on to your customers any associated costs of controlling hazards related to MSDs? Provide the basis for your answer, please.

I would assume any costs of this standard would be a cost of providing a customer service.

4. Table 1 of the Preliminary Initial Regulatory Flexibility Analysis provides a list of assumptions OSHA used to estimate regulatory costs. Do you agree or disagree that carrying out each regulatory activity indicated in the table will take about the amount of time indicated? Are the employees identified in the Table the employees who would carry out these activities in your firm? Are the costs for medical removal protection and controlling ergonomics hazards reasonable at prices, given that individual cases can vary widely in costs?

In general, the estimates seem on the low side, especially for the smaller companies that cannot dedicate a full-time person to these functions. There always seem to be a learning curve just to get up to speed on the issues

5. In this preliminary analysis, OSHA's costs and benefits analysis are dependent on several key estimates. OSHA has relied on BLS data concerning rates for MSDs; those for your industry are given in the one-pager showing impacts for your industry. OSHA has also estimated that there will typically be 1 to 2 additional jobs that will require correction when an MSD occurs because they are "similar" to the job in which the MSD occurred. OSHA also estimates that ergonomics programs can reduce the incidence of MSD's by 25% to 75%. How do these estimates compare with your experience?

Have no basis for comparison on OSHA's estimates.

6. OSHA proposes to offer some regulatory relief to entities with fewer than 10 employees, but provides no cost or benefits data for this group. Do you believe firms with fewer than 10 employees have different economics than firms with 10-19 employees, and if so, do you believe OSHA should provide a data breakdown on both of these elements of the "very small business" sector?

Not sure

7. Do you believe that OSHA should consider whether the ergonomics coverage implicitly provided by the safety and health programs regulation the Agency's are considering proposing is sufficient without also having an ergonomic program standard?

No. I believe if there are no program standards, you will see as many programs as companies, some good and some not so good.

Specific Questions

1. After reading this section, do you understand whether this standard applies to your business? Are the definitions of manual handling and work related MSDs clear? Do you think some employees in your business engage in manual handling? Could you describe the nature of the jobs that you consider manual handling?

I think they could apply to certain job functions in our company. The definition for manual handling and work-related MSD's are clear. Some parts of the jobs in our company could be considered manual handling jobs, however they are not repetitive day after day. An example would be cable reel handling.

2. Do you think that a small business within your industry will have difficulty determining if their business has a "problem job"?

I think a reasonable person can determine if there are problem jobs. I would assume this could be an activity for the company's Safety Committee to address.

3. Do you feel confident in your ability to identify whether a particular injury (an MSD) is "work related" as defined by the proposed rule?

I would feel confident in my ability to identify if an injury was work related in most cases but not all.

4. Are you required to keep OSHA 200 logs? If not, are you aware of the criteria involved in recording injuries and illnesses for the OSHA 200 log?

Yes

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5. The proposed rule used the occurrence of a recordable MSD as a trigger for further action. Instead, should the rule use signs and symptoms of MSDs that are not yet recordable as a trigger? Or should OSHA use at least 2 MSDs to trigger employer action?

Signs and symptoms of an MSD problem before it gets serious would seem to be a better approach to fixing the problem. This approach might be less expensive long term, i.e., fewer days away from work. It would also create a better employer-employee relationship.

6. Is the definition of an MSD clear?

In reading this package, I think I know what MSD is, however, I do not think it is defined in Section 1910.500

7. Should the draft standard cover all of general industry? Alternatively, should it be restricted to manufacturing operations and manual handling only?

I think it should cover general industry as well as manufacturing and material handling because I think there could be just as many ergonomic issues in a business office for example.

Purpose & Basic Obligation

1. Have there been work-related MSDs within your workplace in the last three years? Do you feel that this standard, if it had been in place prior to those injuries, would have eliminated or substantially reduced the number or severity of those WMSDs?

No

2. If you already have an ergonomics program, does it comply with OSHA's requirements under 502(e)? Do you understand what the 'purposes of each requirement' are within this standard, so that you may determine if each differs from those of your current program? Is the rule flexible enough to accommodate your program, or other effective programs?

We are currently editing our new safety manual and I think we would be very close to these requirements

3. Is a basic program necessary in any firm? Alternatively, should the basic program requirement be extended to all firms? If yes to either question, what elements should be in the basic program?

I think a basic program of employee education and a reporting process is necessary in all firms

4. Are all of the elements of a full program necessary? Are there elements that should be added? If so, what are they?

I think all of the elements are necessary if a case of MSD is reported. If a MSD case is not reported, then elements 1, 2, 3, and 4 would seem to be necessary.

5. What is your view of the draft provision that you could avoid most of the rule's requirements if there are no MSDs for 3 years? Does it provide appropriate relief for employers who have successfully controlled their ergonomic hazards?

In sections 1910.501 and 502, I couldn't find the 3 years referred to in the question. If it is referring to a 3-year grace period before implementing these standards if there are no reported cases, I suppose it provides relief, however, is it because of controlling the hazards or simply a case of being lucky.

Record Keeping

1. Do you know if your firm will be exempt from the proposed rule's record keeping requirements? If so, do you foresee keeping records anyway?

It appears that we will be keeping records since we have more than ten employees

Additional comments by Erik Monsos, Director of Safety, Minnesota Telephone Association

1. I need further clarification of section 1910.502(a) where it states "NOTE: you may set up an ergonomics program for all of the jobs in your workplace, but you only are required to set it up in manufacturing and manual material handling operations, and in other jobs where there are WMSDs." I have a problem with the portion reading "...and in other jobs where there are WMSDs." To me that could mean almost ANY job and it seems to go far beyond the scope of 1910.500(a). Perhaps this is answered in section 1910.502(d)??
2. The standard seems quite reactionary. If I'm reading it right no action is called for until an employee reports a problem. At this point it is too late, the injury has already occurred and the company will be responsible for remedying the injury. We all know that cumulative trauma disorders are extremely costly. It seems to me that a proactive approach would be far more beneficial, both from a financial and a human suffering viewpoint.
3. It appears that no program has to be in place until an injury occurs, and then, overnight a full blown program is required to be implemented.
4. In section 1910.504(a) what is meant by "periodically"? I found this partially defined in section 1910.512. The definition can still use some work.
5. How does this proposal view off the job factors which may, in fact, be the main contributing factor, of the trigger, for a CTD? In my opinion off the job factors must be considered.
6. I somewhat disagree with section 1910.505(d)(1). I read this as a call to throw money at the problem and new equipment can be extremely expensive. In my experience (hundreds of ergonomic evaluations) I have found that some simple training discussing the proper use of the equipment an employee has often times solves the problem.
7. My company has provided ergonomics training and consulting for several years and I feel that a proactive system is the only way to go. The standard as is would only muddy the waters. I feel what my organization is doing costs less for the companies I serve, prevents more injuries, is simpler and is far superior to the proposed standard which to me, seems very reactionary.

FREDON

March 30, 1999

Ms. Marthe Kent
Chair, Small Business Advocacy Review Panel
Department of Labor
Occupational Safety and Health Administration
Washington, D.C. 20210

VIA FAX: (202) 693-1641 Total Pages: 4

Dear Ms. Kent:

I am submitting comments for the record on the proposed Ergonomics Program Standard. As a panelist in the SBREFA process, these comments capture some of my concerns and questions that remain after the conference call.

My company, Fredon Corporation, is a precision machine parts manufacturer based in Mentor, Ohio. I employ approximately 50 employees. In reviewing my OSHA 200 logs I have no recordable ergonomics injuries in the last three years, but according to your proposed standard, I would have to implement the first phase of the ergonomics program simply because I am in manufacturing.

My workers are very important to me. Not only do I know these people and treat them as family, many of them are family members. I am out on my shop floor every day, exposing myself to the same conditions as all Fredon employees. Obviously, I want a safe and healthy workforce. Employees in my industry are very hard to come by and to replace. We are already experiencing a shortage of skilled labor. Why would I jeopardize my plants' productivity with an unsafe workplace? I wouldn't. I don't see why this rule needs to be another costly mandate on small firms, especially when I haven't had any problems within my company.

I think OSHA should wait for the National Academy of Science study that will be completed in another year or two. This study is more scientific than the last report released by NAS. Obviously, many in Congress agree with me. Representative Roy Blunt (R-MO) has legislation that directs OSHA to stop moving forward on the ergonomics program standard until NAS is finished with its study. To date, there are 63 bipartisan cosponsors on the bill. This speaks volumes to the fact that OSHA should wait and work with the NAS, not promulgate a rule before the results of the study are known.

L 0306

Since OSHA seems intent on moving ahead with the ergonomics program standard and you need comments more than just "Don't do it!" and "Exempt my business," here are some major concerns the proposed standard raises.

If this standard is implemented as currently drafted, many businesses will pack up and move out of the country. Foreign countries don't have ergonomic standards like this and the costs involved with implementation are extremely high. In my company, the businesses I contract with are expecting a 3-7% DECREASE in costs over the next few years. Therefore, it is obvious that I cannot pass on the costs of implementing an ergonomics program to my customers! I have to let it eat up 2-5% of my profits. With a profit margin already less than 2.2%, I might have to eliminate jobs in order to pay for a program like this.

In looking at the draft proposal, how does OSHA intend to determine where an injury comes from if, as in Fredon, people do multiple tasks every day? My employees move from machine to machine. You would not be able to figure out which machine caused the ergonomic injury. Because the jobs are similar, if the second phase of the ergonomics standard were triggered by a recordable injury in my firm, I would have to adapt ALL of my work stations thanks to the "similar job" definition.

Which brings me to my next point: Why does only one injury trigger the whole program? How will OSHA differentiate between an injury that is work-related versus something that is caused outside of the workplace but work contributes to the injury? It is wrong that an employees' personal lifestyle involving sports etc, should force an employer to spend thousands of dollars to implement a company-wide program. I think if the injury is sustained outside of the workplace, an employer can certainly make adaptations to work stations to help the employee, but it should NOT trigger the program for the remaining employees with the same or similar jobs.

If you are sticking with the number of recordable injuries as a trigger, I think the number should be higher. One injury can be an isolated incident. OSHA should consider setting the trigger number higher (maybe 3 employees) or to a percentage of the workforce (5-10%) or to a number that has to do with the frequency and severity of ergonomic problems within the workplace. Or you could use the number of days lost to an ergonomic injury.

An even better option came up during our conference call on Friday, March 26. Similar to how insurance companies set rates, a business should review the last 3-5 years of employment and injury logs. If over a three-year period there are several incidents of ergonomic injuries, then the program should be implemented. If there are only a couple of isolated injuries, no program.

The government keeps heaping the regulations onto small firms. I have just spent close to \$75,000 to fix the Y2K problem. On top of that cost, OSHA wants me to implement an ergonomics program, and not far behind it will be the safety and health program. When the BLS data shows a steady decline in ergonomic injuries, OSHA needs to stop mandating programs and give us voluntary options. For example, I know that OSHA already has several compliance assistance programs. Why can't these programs do more outreach to help small firms without creating a costly mandate?

L 0307

I am also concerned that OSHA is not looking at the state regulations that are already on the books. What happens if the regulations are not compatible? OSHA should be working with each state and finding a solution to fit what already exists.

How will OSHA enforce this standard? If I'm not mistaken, the General Duty Clause already covers the practice of doing everything to keep your workers safe and healthy. If the Health & Safety Program Rule is implemented that will ALSO cover ergonomic injuries ... Does this mean if all three are in effect, a business is subject to triple jeopardy when an OSHA inspector arrives? Or does this mean this ergonomics rule is UNNECESSARY? If other regulations already cover this, why are we spending money to write and implement a new regulation? More costs, no difference in workplace safety.

OSHA will need to tighten up a couple of definitions for this draft proposal. Throughout the draft rule, the term "feasible" is used. Who is going to determine the definition of feasible? Obviously, that is a very vague term, and an OSHA inspector could have a different definition from the small business owner. The term "similar job" should be tightened so it is clear what that means. Under "work-related injuries" an employer must see if the hazard is "a significant part" of the employees' regular job duties. What is OSHA's definition of "significant?" That, again, is a vague term that could cause problems between an employer and an OSHA inspector.

There were several of us on the conference call that were concerned with the aging workforce. As we get older, we are all going to experience more aches and pains. Has this been taken into consideration? An employer can't fire someone just because they're getting older and might develop a problem that will trigger the ergonomics program. Also a man, more often than not, can lift more weight than a woman. And a larger man can lift more weight than a smaller man. How is OSHA going to handle the differences between people and their sizes?

There is also a lot of concern over the medical removal section of the proposed standard. To allow an employee to stay out for six months with 100% of pay is asking too much of small firms. The costs estimated for the section do not take into consideration the costs for a replacement worker, training for that replacement worker or lost productivity if you can't replace the employee. This might also encourage some unscrupulous employees to make fraudulent claims to get full pay while taking six months off. The pay during time off should be the same as it would be under workers compensation for a non-ergonomic injury.

OSHA is also encouraging discrimination with this rule. I may not hire an older worker, a handicapped worker, or someone I know plays tennis every evening for fear they will trigger the ergonomics rule for my shop. Employers will have the additional expense of putting a potential employee through a rigorous medical checkup, including a full medical history. I think the ADA and EEOC will have problems with this standard.

I think you have a long way to go to make this standard workable for small firms. I am all for a safe and healthy workplace. However, I am afraid that the ergonomics program standard could weaken this country's economy by forcing small companies overseas or, worse yet, out of business.

One side note, I was appalled to see that 2 inches of paperwork came to me (and presumably the other Small Entity Representatives) in a Federal Express envelope. I initially assumed that the cost was astronomical to the taxpayers. While I now understand the government gets a special deal with Federal Express, I'd like to know how I can work such a deal. That is just one more example of how the government doesn't understand the costs they place on small businesses and how unfairly treated we are.

I look forward to seeing how this draft proposal changes over the next few months. I am pleased to be a part of the process.

Sincerely,


Roger Sustar
Owner

L 0309

PRIOR

Aviation Service Inc.

716-633-100
FAX 716-633-154

BUFFALO NIAGARA INTERNATIONAL AIR
80 NORTH AIRPORT DRIVE
BUFFALO, NEW YORK 14229-1480

March 30, 1999

MARINE KENT
Chair, Small Business Advocacy Review Panel
U S Department of Labor
Occupational Safety and Health Administration
Washington, DC 20210

POST-IT FAX NOTE	7671	Date	5/30/99	12	7
To	MARINE KENT	From	D MITCHELL		
Company	OSHA	Company	PRIOR AVIATION		
Phone #		Phone #	716-633-100		
Fax #	202-699-1641	Fax #	716-633-154		

Re Proposed Ergonomics Program Standard

Dear Ms Kent

The following are our responses to your general questions:

1. Is the final standard clear? Are any provisions unclear? If so, which ones are unclear?

The intentions and goals are clear. The enforcement standards are not only unclear but written in a way that many interpretations and assumptions could be made by OSHA, a firm, employee, or a lawyer in a highly discretionary manner.

2. How could OSHA clarify the standard to eliminate any problems in understanding?

OSHA should offer the entire program as a voluntary guide and customize it over time for industry specific application. OSHA should also accept currently required insurance, state and other programs so that redundancy is avoided.

3. Are there any non-regulatory approaches OSHA could take that would provide you and other small entities with ways to reduce/eliminate MSD injuries/diseases? For example, would guidance on how to set up a safety and health program be an effective approach?

Yes, absolutely! Educate first! OSHA should study and analyze the results of a voluntary education and implementation program first and formulate industry specific guidelines and monitoring procedures before official programs are considered.

4. Are you aware of any regulations that duplicate the requirements of this regulation? If so, what is that regulation(s)?

Yes, our insurance providers require safety, health and ergonomic programs and the State of New York Department of Labor, Division of Safety and Health has certificated safety and health inspectors and consultants that are guided by a comprehensive Workplace Safety and Loss Prevention Program requirement.

L 0310

5. Do you foresee any difficulty in implementing the employer participation element of the proposed rule? For example, do you believe that it will raise labor/management issues? If so, why? Would implementation of the draft ergonomics standard be easier or more difficult depending on whether you have a union-shop?

Yes, we believe several significant issues would arise in both union and non-union shops. For example, issues would arise when rotation is imposed as a "fix," especially where the job function is a bid position or pay and skill differentials exist.

6. Do you have a safety and health program? If yes, does it include ergonomics? What costs or benefits, if any, would this rule add that are not already addressed by your safety and health program?

We have safety, health and ergonomic programs in place that were adopted from our customers. We see measurable benefits to safety and health, however, we have no statistics that reveal benefits to our ergonomic training efforts which area is riddled with fraudulent claims due to an inability to adequately determine cause and effect.

7. What kinds of compliance assistance materials would assist you in assessing ergonomic hazards? For example, would a checklist be helpful to identify ergonomic hazards?

A government produced handbook or pocket guide that could be produced generically and sold at a price that would encourage its purchase and distribution to the entire workforce. Again, education before enforcement.

8. In your opinion, does this rule create a disincentive to hire, retain, or provide insurance to persons who might be perceived as being pre-disposed to ergonomic injuries? If so, please explain.

Yes, there would be a significant disincentive since we have already identified a potential cause of one WMSD which we cannot feasibly fix. The cargo hold areas within aircraft are designed and sized with minimal influence from our service industry. The configuration of the cargo areas are highly dependent upon aircraft design characteristics other than vendor back injury ergonomics. Our industry continues to provide training and personal protection devices for this activity in order to avoid potential MSDs.

9. If you already have an ergonomics program in place, how many hours did it take for you to set the program up initially? Have you seen measurable results? If so, what are they? To the degree your program was ineffective, do you know why it was ineffective?

Our service industry typically adopts the ergonomic programs developed by our airline customers via a direct operating agreement or contract. Limited startup costs and startup labor hours are incurred. However, initial and recurring training on proper lifting techniques supplied by our customers still costs us in excess of \$150 per employee for labor alone. We have been training on proper lifting techniques for several years and at this point in time, the only way we could determine its effectiveness would be to stop the training and measure the change in claims. Fraudulent back related injury claims are so prevalent in our industry that many firms regularly retain investigators to specifically pursue these types of occurrences. Any differential monetary incentive or ease of access to benefits relating to WMSD claims will undoubtedly result in a continuously increasing plague in both frequency and costs to our industry which would also be associated with a like increase in fraudulent claims.

10. With whom do you currently consult or obtain guidance on workplace safety issues? Safety and health professionals? Your insurance carrier? Trade associations? OSHA consultation program? Your lawyer? Others? Do you feel there will be a need for outside consulting in order to come in compliance with this proposed rule? How much do you think any necessary outside assistance will cost?

We currently consult with both our customers and our landlord via regularly scheduled safety meetings. Accident/incident reporting is shared daily throughout the industry. Safety issues are also scheduled and communicated daily via conference calls, faxes, and modems. Additionally, our industry depends heavily on shared information and communication via several trade associations; i.e., NBAA, NATA, AOPA and also government sources; i.e., FAA and State.

11. How do you currently identify work-related MSD hazards in your business and how much this change as a result of this rule?

Routine investigation of all C-2 filings and accident/incident reports. It will not change the results of our analysis, however, it will adversely affect our expenses and ability to prosper.

12. What is your experience with workers' compensation premiums in the last few years? If you have a safety and health program that includes ergonomics, have you seen any impact of the program on your premiums?

Workers' compensation premiums in general have been increasing. Results have been obtained in lowering incident frequency, however, no quantifiable results in the area of ergonomics have been seen except in the area of fraudulent claims as these types become harder to determine cause and effect.

13. Do you have any questions about how OSHA will enforce this rule? If yes, what are they?

1. Yes, to what level does OSHA intend to hold the firm responsible to "feasibly fix" a WMSD job or function? Does feasible relate to financial or technical?
2. How does OSHA intend to address the existing NY State mandated safety/health programs?
3. Can OSHA define "manufacturing operations?" Is this by SIC Code, principle industry, or process? i.e., Does the "rework" of aircraft fall into this category?
4. How does an employer isolate an employee's activities to confirm that workplace activity caused the WMSD?
5. Doesn't anecdotal information about an industry or operation trigger the "reasonable person should have known" argument?
6. Do extremes in "Job Factors" trigger the need for a Job Hazard Analysis? i.e., Heat or Cold?
7. Is a reported WMSD a strong enough reason to prompt a Job Hazard Analysis? What is a "significant" part of the employee's workday? Does it mean 2-4-6-8 hours?

COSTS AND ASSUMPTIONS.

1. How many hours do you estimate it will take to comply with each of the rule's program elements? What do you estimate the costs of "controlling ergonomic hazards" will be? What is the basis for this estimate?

It will take approximately 1000 hours to identify the redundancy issues referencing our insurance carrier, state and landlord programs. Controlling costs are estimated at \$250,000 annually. Our labor intensive industry utilizes aircraft ground support equipment that would have to be re-engineered and customized on a recurring basis due to the uniqueness of each application.

L 0312

2. Are you aware of your safety and health obligations with respect to ergonomics under the General Duty Clause of the OSH Act, which requires employers to provide their employees with a work-place that is free of recognized hazards that are existing or are likely to cause death or serious physical harm? If yes, how did you become aware of your General Duty clause obligations? Has this awareness led you to develop measures addressing ergonomic hazards?

Yes, via our insurance carriers, state, landlord and trade associations.

3. Will you be able to pass on to your customers any associated costs of controlling hazards related to MSDs? Provide the basis for your answer, please.

We have no chance for economic recovery from our customers. Our customers already have appropriate programs in place and would not pay for redundancy.

4. Table 1 of the Preliminary Initial Regulatory Flexibility Analysis provides a list of assumptions OSHA used to estimate regulatory costs. Do you agree or disagree that carrying out each regulatory activity indicated in the table will take about the amount of time indicated? Are the employees identified in the Table the employees who would carry out these activities in your firm? Are the costs for medical removal protection and controlling ergonomics hazards reasonable averages, given that individual cases can vary widely in cost?

We disagree with hazard control at \$800. Conservatively, we estimate the average cost at \$20,161 per employee per WMSD report with a 70% standard deviation.

5. In this preliminary analysis, OSHA's cost and benefit analysis are dependent on several key estimates. OSHA has relied on BLS data concerning rates for MSDs, those for your industry are given in the one-pager showing impacts for your industry. OSHA has also estimated that there will typically be 1 to 2 additional jobs that will require correction when an MSD occurs because they are "similar" to the job in which the MSD occurred. OSHA also estimates that ergonomics programs can reduce the incidence of MSDs by 25% to 75%. How do these estimates compare with your experience?

Our estimates strongly suggest that this program will actually increase the number of MSDs by as much as 20% due to the incentive to report and the inability to dispute or confirm cause and effect.

6. OSHA proposes to offer some regulatory relief to entities with fewer than 10 employees but provides no cost or benefits data for this group. Do you believe firms with fewer than 10 employees have different economics than firms with 10-19 employees, and if so, do you believe OSHA should provide a data breakdown on both of these segments of the "very small business" sector?

Yes on all accounts, however, there is also a significant difference between large businesses and small businesses as well as differences in the various business segments within small businesses.

7. Do you believe that OSHA should consider whether the ergonomics coverage implicitly provided by the safety and health programs resulting from the Agency's air conditioning program is sufficient without also having an ergonomics program standard?

Absolutely!

SPECIFIC QUESTIONS - Sections of the Standard

1. After reading this section, do you understand whether this standard applies to your business? Are the definitions of manual handling and work-related MSDs clear? Do you think some employees in your business engage in manual handling? Could you describe the nature of the jobs that you consider manual handling?

Intuitively, the answer may be yes, however, there are several unanswered key issues that present questionable application of the standard. For example, to what standard will the term "heavy" be applied, i.e., range weight, specific weight, cumulated weight, region, industry, frequency, etc.

2. Do you think that a small business within your industry will have difficulty determining if their business has a "problem job"?

No, however, we believe OSHA will have difficulty applying the standard the way it is written

3. Do you feel confident in your ability to identify whether a particular injury (an MSD) is "work related" as defined by the proposed rule?

Yes, however, we believe OSHA will not be in a position to confirm our findings with so many discretionary interpretations available.

4. Are you required to keep OSHA 200 logs? If not, are you aware of the criteria involved in recording injuries and illnesses for the OSHA 200 log?

Yes

5. The proposed rule used the occurrence of a recordable MSD as a trigger for further action. Instead, should the rule use signs and symptoms of MSDs that are not yet recordable as a trigger? Or should OSHA use at least 2 MSDs to trigger employer action?

We feel a minimum should be established based upon the number of hours worked on the job causing the MSD. A recordable MSD should not be triggered unless the casual job accounts for over 20% of the employee's shift in conjunction with an increase over a pre-established base line. This is the only viable way to track effectiveness of the program.

6. Is the definition of an MSD clear?

Yes

7. Should the draft standard cover all of the general industry? Alternatively, should it be restricted to manufacturing operations and manual handling only?

Create a standard for all general industry and allow the uniqueness of the industries to customize their own programs on a voluntary basis.

Purpose & Basic Obligation

1. Have there been work-related MSDs within your workplace in the last three years? Do you feel that this standard, if it had been in place prior to those injuries, would have eliminated or substantially reduced the number or severity of these WMSDs?

Yes, however, none could be specifically attributable to a work related job activity. Categorically no. In fact, we believe it would have increased both MSD frequency and severity due to ease of access to "benefits". The administration costs alone would have been insurmountable and incurred without the expected economic, frequency and severity results.

2. If you already have an ergonomics program, does it comply with OSHA's requirements under 302(c)? Do you understand what the purposes of each requirement are within this standard, so that you may determine if each differs from those of your current program? Is the rule flexible enough to accommodate your program, or other effective programs?

Further analysis is needed in order to answer this accurately.

3. Is a basic program necessary in any form? Alternatively, should the basic program requirement be extended to all firms? If yes to either question, what elements should be in the basic program?

We believe so. The basic program should educate in the identification of potential MSDs and offer guidance to fix these jobs and/or functions.

4. Are all of the elements of a full program necessary? Are there elements that should be added? If so, what are they?

No, it needs to be industry specific.

5. What is your view of the draft provision that you could avoid most of the rule's requirements if there are no MSDs for 3 years? Does it provide appropriate relief for employers who have successfully controlled their ergonomic hazards?

It is worded appropriately referencing the rule's requirements and it seems to provide appropriate relief, however, after 3 clean years, does a MSD report invalidate the assumption of a previously successful program?

Hazard Identification, Analysis & Control:

1. How often do you feel it would be necessary to identify ergonomic hazards within your business? Where would you turn for information on "how to recognize signs and symptoms," what is causing the problem, and what are the "reporting signs," so that you can provide information to your employees?

We do it on a daily basis via incident reporting and consult with specialists, i.e., doctors when situations warrant

2. The standard requires you to ask employees to job that are similar to an identified "problem job" if they are experiencing MSD symptoms. How will this approach work in your business? Please provide the reasons for your answer.

It will, in fact, increase reportable MSDs which will also significantly increase fraudulent claims and administrative costs associated with substantiating claims

3. Do you believe that you will be able to evaluate the job factors and determine which ones are likely to be causing or contributing to the problem? How often will you need outside assistance to make such evaluations?

Yes, however, the degree of outside assistance will depend entirely upon OSHA's acceptance of our evaluations

Training

1. Please describe any ergonomic training that you already provide to your employees. How many hours of training is provided, how often? Would this rule require you to provide additional training to your employees? If yes, what additional training is needed and what costs do you anticipate? How often is retraining needed? Is retraining needed at least every three years?

Ergonomically speaking, we provide safe lifting training on an initial and recurring basis approximately one hour quarterly

Medical Management

1. Should OSHA require medical removal protection for employees who are injured or made ill by ergonomic hazards? Are there less expensive alternatives that would achieve the goals of medical removal protection?

Absolutely no! The cost of mandatory medical removal protection would economically devastate our industry. We are certain that alternatives can be suggested, however, the vast complexities of our industry would require further investigation for an accurate response.

2. How will the medical removal protection provision affect your business. In your opinion? Do you provide for any of the elements of the medical removal protection provision as part of your existing personnel policies? What is the basis for your projection of the impact on your business?

It will significantly add costs to our operation and would not reduce WMSDs any further. We are proactive in the area of training and cross utilization of skills and further regulations would only cause an excessive economic and administrative burden.

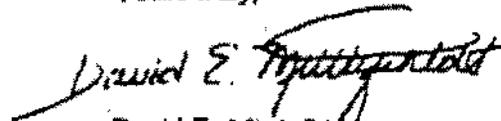
Record Keeping

1. Do you know if your firm will be exempt from the proposed rule's record keeping requirements? If so, do you foresee keeping records anyway?

We will not be exempt.

If you need anything further, please feel free to contact me at any time.

Yours truly,



David E. Mittlefehdt
President/CEO

dmb

L 0316

March 31, 1989

Ms. Martha Kent and Mr. Adnan Corsey
U.S. Department of Labor
OSHA
Washington, DC 20210

Subject: Small Business Advocacy Review Panel
Proposed Ergonomics Program Standard

Dear Ms. Kent and Mr. Corsey

As requested by the Panel, I am submitting my written comments on the proposed Ergonomics Program Standard. The numbers beside my comments correspond to the questions in the document entitled "Issues for Comment and Discussion with...Panel..."

A. General Questions

1. Unclear provisions. Similar jobs -- how broadly would this be interpreted? Example: Most of our production employees are responsible for moving furniture (our product) from their work station to the next. This is one small portion of each person's job. If one of those employees sustains a back strain from manually moving furniture, does this mean that all employees who move furniture as a portion of their job are in "similar" jobs and therefore would require controls, training, etc?
7. Compliance assistance materials. Checklist to identify ergonomic hazards would be very helpful. Also the NIOSH lifting formula. If it were available in an easy to use and understand guide, would be very helpful.
11. How would identification of work-related MSD hazards change under this rule? The "known hazard" provision creates a clear disincentive to be pro-active. If an employer uses professional assistance to help identify potential ergonomic hazards, the hazards identified then become "known hazards." This creates an obligation to "fix" the job even if no WMSD has occurred.

B. Costs and Assumptions

1. Estimate of cost to control ergonomic hazards -- Depends on scope of "similar jobs" as mentioned in #1 above.
3. Will you be able to pass on to your customers any associated costs of controlling hazards...? In my opinion, the impact of this standard would be to further decrease the profits of U.S. companies. It is difficult at best to compete with foreign products as it is, without the added burden of complying with this standard. This standard adds to the attraction of manufacturing goods outside the borders of the United States.

4. Time requirements: Estimates are low in at least the following areas:
 - a. Initial set up of program. One hour is not sufficient. One hour is barely sufficient to read and understand the standard. Initial set up would take at least four hours.
 - b. Hazard control program. One hour of managerial time and one hour of employee time to control hazards when MSD occurs is too low. Employer must research available controls, evaluate them, consider cost, etc.

5. Estimate provided on my one-pager for first year costs is extremely low. Implementation of management leadership, employee participation, hazard identification and information to employees cannot be accomplished for \$73. Even the time estimates included in the packet, which are themselves low, say 4.75 hrs of managerial time and a half hour for each employee. How can this be accomplished for \$73?

SPECIFIC QUESTIONS: Sections of the Standard

1910.500 - Does this Standard Apply to Me?

1. Definitions of manual handling clear? - Who defines "heavy" as used in the definition? How?

3. Do you feel confident in your ability to identify an MSD as being work-related or not? NO.
Example: One of our employees, who operates a computer keyboard as a portion of her job, has developed carpal tunnel syndrome. This employee uses the keyboard to access information only; there is no data entry involved. I would estimate that she performs only about 600 keystrokes per 8-hour day. Is this injury work-related? And, if so, are all employees who use computer keyboards on such a limited basis in "similar" jobs?

5. If the 100% wage provision remains part of the standard, I fear that employers will be subject to fraudulent or exaggerated claims. If OSHA used at least 2 WMSD's to trigger employer action, it would help protect employers from the impact of these false claims.

1910.504-505 - Hazard Identification, Analysis and Control

3. Do you believe that you will be able to evaluate the job factors and determine which ones are likely to be causing or contributing to the problem? I will need education to be able to evaluate the job factors. Even though I feel that for a small employer I'm fairly well versed in ergonomic concerns. "Small" employers that I have attempted to discuss ergonomics with are only minimally familiar with the concepts at best. Small businesses generally do not have professionals on staff who are capable of analyzing jobs and providing controls without outside assistance. Agencies that provide complimentary or inexpensive professional assistance, such as OSHA Consultative Services and insurance carriers, will be stretched beyond their limits when asked to assist small businesses in complying with the proposed standard.

March 31, 1999

Page 3

1910.507 - Medical Management

1. Medical Removal Protection - Since work restrictions could include complete removal from the work place, this standard as proposed would have employers paying 100% of wages to employees who are not working. This is in addition to paying for overtime or temporary employees to do the work of the injured employee. Especially since some MSD's are diagnosed by symptoms only, such as low back pain or muscle strains, I feel this provision would subject employers to increased fraudulent claims. This would be especially true in states that do not permit the employer to select the health care provider. In short, there are many employees who would want to be paid 100% of their wages while not working.

I do not believe that MSD's should be treated differently from other work-related injuries. The protection provided by workers compensation is sufficient for any work-related injury. Early reporting of symptoms would still be accomplished if employees knew their medical expenses and lost time would be covered by workers compensation.

2. How will Medical Removal Protection affect us? We don't always have light duty jobs available. Those that we do have may not be perceived as being desirable. This provision might encourage exaggeration of symptoms to avoid these jobs and still achieve 100% pay.

Question relating to 1910.507 (c) (2)

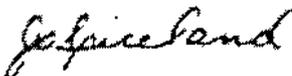
"You must maintain the employee's total earnings...and benefits when work restrictions are prescribed." How does this apply to accrued benefits such as sick time, vacation time, etc. if prescribed to be out of work for a lengthy period of time?

Comment on 1910.512 Definitions

Manufacturing Operations - Maintenance personnel should not be classified as having "manufacturing production jobs." Our maintenance personnel perform duties that vary greatly from hour to hour and day to day but they are in no way involved in manufacturing.

Once again I appreciate the opportunity to be involved in this process. If any of my comments require clarification please do not hesitate to contact me.

Respectfully



Jo Spiceland
Director of Human Resources

CAMELLIA CITY



March 31, 1999

SERVICES

Federal Small Business Advocacy Review Panel
c/o Marthe Kent, Panel Chair
U.S. Department of Labor
Occupational Health and Safety Administration
Washington, DC 20210

Transmitted via Facsimile: (202) 693-1641

PLEASE CONFIRM RECEIPT by Telephone (916) 456-7802

RE Small Business view of proposed OSHA ruling/draft on Ergonomics Standard

To all parties involved with the proposed OSHA ruling on ergonomics:

Camellia City Services currently employs 26 full time employees and several part-time assistants. Most of our work force is young, unskilled workers with a fledgling work ethic, but a heart to learn a trade. We have a written safety plan, including comments regarding repetitive stress cautions, hold weekly safety meetings and post-review each injury. I personally monitor every injured employee and get him or her back to work as the system allows.

Several gardeners from our landscape maintenance division perform the same tasks every day. One beautiful fall day the assignment is raking. One develops a painful discomfort from raking. Another worker claims that he needs an ergonomically correct leaf-rake. Still a third gets a blister because (at the age of 18) it is the first day he has ever held a rake for more than 15 minutes. However, the other 35 workers that spent the day raking are unaffected. In 1997, after purchasing three "Ergonomically-Correct" leaf-rakes, Camellia City Landscape Management was recognized for diligence concerning our worker safety program. The news media broadcast our worker using this rake and one employee sitting on an ergonomic-chair (the ones you kneel on). The rakes cost over twice the price of a comparable rake. Most employees disliked them claiming that they were uncomfortable and less easy to use. The company selling them could not clearly identify the reason for their claim that these rakes were "safer" for any worker; they simply looked safer because of a bent handle and fancy label: "Ergonomically Correct". For over twenty years, we have treated our employees as our number one resource. If any employee desires an "Ergonomically Correct" rake, then we buy it for him/her. The choice to follow safety guidelines and employer-mandated rules is controlled by each employee. This is still a country based on free enterprise and our staff does not require more laws to protect them from their own wrong choices.

I recognize the need for compliance with Small Business Regulatory Enforcement Act (SBREFA) requiring OSHA to seek advice, comments and opinions from the public sector and stand proud to have become a part of that process. I have been a Sole Proprietor for over twenty years. I have formed corporations, partnerships and limited partnerships. I currently hold eight separate business licenses, a General Engineering Contractor license, thirteen assumed permits and licenses for operating four small enterprises I have bought and sold businesses over the past twenty years and struggled to stay in full-legal compliance the entire time.

Defining a problem:

Repetitive stress injuries (RSIs), sometimes referred to as ergonomic-disorders, do exist. Since the early '80s, the work force has heard more and more about these RSIs (or muscular-skeletal disorders (MSDs)). While not all muscular-skeletal issues are a direct result of repetitive stress, these terms still describe similar, ergonomic issues. However, is there an epidemic of work-related RSIs/MSDs? Do we have a clear understanding of what causes MSDs? Unfettered by these uncertainties and unanswered questions

regarding MSDs, the federal Occupational Safety and Health Administration plans to publish a proposed ergonomics regulation? You are NOT READY!

Before we can successfully review the suggested ruling, we need to review the initial premise. Until we have a firm grasp on the medical knowledge needed to explain what the causes and cures of so-called ergonomic injuries are, any ergonomics regulation is premature! Is there any legitimate reason, other than bureaucracy, that this issue should be progressed to this point? We need a sound diagnosis from a panel of physicians (NOT physicians employed by OSHA!) before attempting a cure by government regulators. The draft standard, therefore, must be clear on what qualifies as effective "controls" once we report an MSD. The measurement of 3 years without another MSD does not provide the certainty I need to implement controls and manage my employees needs.

It is not just a matter of defining the usual need and medical "disorders." As a business owner/manager, I face making decisions regarding medical issues almost daily! We investigate every accident, every potential accident and every incident reported by our staff. We regularly face workers compensation fraud and potential abuse of the fact that no one in the world today can unmistakably assure us that every "work-related" injury is truly "work-related." After twenty years of protecting my employees and my businesses from this issue, it is unclear how to define every "work-related" injury. How does OSHA expect us to define a "work-related" MSD?

Just the facts:

I have found extensive examples of confusing data, exaggerated statistics and misleading details regarding the "need" for ergonomic rules of any kind. Reading the bullet points at www.osha-slc.gov/SLTC/ergonomics/background.htm I repeat my concern regarding fact-finding. I am extremely concerned over the possibility that the required input and suggestions gathered by these reviews are a waste of my time. During our conference call, one of the Small Entity Representatives (SERs) asked a question regarding the cost of this ruling to OSHA. The answer referred to the cost estimates from OSHA. The SER asked again, clarifying the question to request the cost for OSHA to comply with their ruling. Some laughter ensued and the reply was that OSHA was already in compliance. The SER repeated the question a third time to no avail and gave up getting an answer to a legitimate question.

By my own research, I can only find that repetitive stress injuries make up about 4% of total workplace injuries and illness. RSI's account for less than 1% of injuries and illness that keep workers off the job. The Bureau of Labor Statistics (BLS), on the other hand, states that MSDs account for 34% of workplace injuries. To get that number, BLS obviously added conditions like hearing loss, which often are age-related. Additionally, OSHA included back injury claims, although many of those injuries had nothing to do with RSI's. The proposed ruling refers to MSDs as the same as RSI's. In fact, not every muscular-skeletal disorder is directly a result of a repetitive stress issue. For the third straight year, disorders associated with repeated stress have continued a downward fall. OSHA should recognize this trend, agree that repetitive stress injuries are NOT epidemic and admit we need to understand these injuries better before we regulate.

This current proposed ruling from OSHA lacks any sound basis from which to make such decisions. We still need solid proof (a foundation of scientific data) consisting of information showing, very specifically, how things that we do cause injury. This is the only way to assure that an ergonomic regulation would actually prevent repetitive stress injuries. In my hours of volunteer investigation and review, I not only learned a lot about ergonomics and new safety topics, but found volumes of help on the subject. There is an organization, the National Commission on Ergonomics (NCE), the OSHA website, an interesting site for study at www.ergonomics.org, the Small Business Advocacy home page and many medical articles and debates posted on-line. We all (government, business, consumers, employers, and employees) need to educate before we regulate.

The "Triggering Mechanism":

Does OSHA intend for its regulation to cover just manufacturing and manual handling operations? The wording in this initial part of the proposal is so poor that several SERs expressed concern over it! They clearly stated that any business experiencing an MSD or having knowledge of a potential job likely to cause an MSD would be included under the ruling. However, there is a clear exception of maritime, construction and agriculture. Yet, during the conference call, it was explained that these are exempt pending a future ruling for those industries, but that they would be included if they fall into the "knowledge of" or "existing" MSD category! With the pending rule in place, OSHA could conceivably expand it to cover other sectors such as construction and the many related trades there. This initial and extremely critical part must be rewritten! Once the facts are solid and the reasoning and justification for a ruling is clearly agreed, this "triggering mechanism" should be all-inclusive and clearly stated. Why set us up for more legislation and regulation down the road? A poorly defined regulation is the epitome of "Government Red Tape."

The costs are huge:

This proposed rule still requires either complete elimination or severe re-writing. It is no exaggeration to say that the cumulative cost to employers throughout the nation could easily reach into the billions of dollars. Such a regulation could force an overhaul of work tasks, the redesign of work environments and/or use of experimental tools. Automation of certain tasks better left manual, a slower and more costly production system and a senseless increase in the time allowed for breaks are other potential hazards of such careless regulation. Moreover, employers would have to spend a great deal of additional time evaluating work tasks for no apparent "safety" reason. Congress turned to the National Academy of Science (NAS) medical professionals to take the debate out of the political arena. An earlier NAS workshop hastily convened and OSHA lauds this as proof that "substantial sound scientific evidence exists" linking muscular-skeletal disorders to large percentages of work. This is clearly a myth, given the extensive research now available. OSHA now realizes this and will surely make concessions to abort the current ruling plans.

Study the cost estimates and "Table 1" of the preliminary draft Initial Regulatory Flexibility Analysis again. I cannot stretch my imagination to see how these numbers were collected. The "information on your industry" was explained, yet the SIC System is dysfunctional, at best. While I realize where the numbers come from, it is quite clear that this system of analysis and number gathering MUST face severe reform before any more regulation stems from it. "Ergonomically Correct" rakes cost \$24.99 each - according to this proposal, when we report an MSD, Camellia City Services will replace our 38 existing rakes with approved tools. The cost of rakes (\$949.62) more accurately describes the initial cost of "control" (element required once we report an MSD) ONLY beginning the compliance process. My companies combined hours (exposure) over the past five years are slightly over 300,000 hrs. In scrutiny of our own OSHA 200 logs and incident reports, we concede that (maybe) one injury be recorded as MSD! Given the number of injuries that workers have claimed are work-related, this one, reported MSD would not even bring the probability of having another MSD in a year to one percent. However, this one occurrence would force us into a compliance mode. The cost of compliance with this one issue (a back strain claimed to be due to the repetitive stress of lifting) would have been several thousand dollars! The cost to maintain such a job-redesign would be over \$500 (80 per month, IF we did not increase the size of our business!

Like most small businesses, we do not have the resources to evaluate and hypothesize the varying effects of such overbearing government intervention. I learned that one division of Intel Corporation produced a study showing that this ruling would cost them just over \$1,000 per employee to establish. They added that the cost to remain in compliance would be about \$166 per employee per year. I pooled our limited resources and guesstimate that costs to initiate compliance and further stay in compliance is as follows:

- \$300 (for an office worker, of whom we have 3)
- \$647 (for each field worker, of whom we have 21)
- \$6,000 additional (for any of three jobs in the field potentially requiring specialized equipment).
- \$147 per employee per year is a conservative estimate of our continued compliance costs.
- A cost to my small business of \$34,087.00 the first year and, at least, \$3,822.00 annually without growth.

Let us work TOGETHER SMART:

"In order to put these recommendations into practice, a person would have to be a skilled observer of his or her own joint and muscle functioning. We would each have to be able to change his or her posture to a healthier one at will. No one develops this sort of highly refined sensory awareness without special training. Therefore, in order to derive the benefits of ergonomic research, we must learn how to observe our bodies in a new way." - Applying Ergonomic Principles in the Workplace: How the Alexander Technique can Help by Holly A. Sweeney.

I even found some good, proposed legislation, which will permit the much-needed research necessary to complete before the Occupational Safety and Health Administration rushes to judgment on ergonomic regulation. Surely, OSHA is familiar with the bill (HR-987), mandating an objective review of ergonomics. While we await the completion of that study, we can all continue to learn. Any ergonomic regulation lacking sound, medical-science, facts will cost American workers and employers billions of dollars while failing to prevent even one, single injury. Please do not rush to regulate simply for regulation sake!

I do not believe that OSHA's draft ergonomics standard accurately assessed the additional costs associated with creating new experts in every small business. Nor, does the standard provide assurances that an on-staff or contracted industrial hygienist in every business (arguably the result of this proposed standard), combined with OSHA's Safety and Health Program Rule will lessen MSDs. This proposal is lacking in accurate cost assumptions, lacking in clear easy-to-follow definitions that, if relied upon, will ensure no penalties from OSHA inspectors, and, most importantly, lacking in assurances that the standard will help my employees. To that end, I respectfully recommend that OSHA completely reconsider its standard-setting approach to ergonomics.

OSHA could better serve the public by using its resources to educate. Instead of charging forward to regulate and set policy, OSHA has the ability to reach out and disseminate valuable information. Such information can be easily traced to a reduction in work-related injuries and actually solve problems!

I will return to running my small business. I will have our Irrigation Specialists work on irrigation pipes. I will guide our Pesticide Applicators to skillfully-apply hazardous chemicals. I will pray that our government will seek similar resolutions (do what we do best). Let the medical professionals do their part, the insurance companies do their part, the businesses do our part and the lawmakers do their part. When each of us perform according to our special gifts, we can create a society that WORKS FOR AMERICA!

Sincerely submitted

Clifford M. Wilcox, Proprietor/Idios
Carmelita City Services
Carmelita City Landscape Management
Carmelita City Landscapers
Local Property Maintenance
County D.R.E.A.M.S.

Mr. Genevieve Chief Counsel
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SOMNOS LABORATORIES INC.
Clinical Sleep and Electromyographic Testing

FAX TRANSMISSION: 4 (number of pages including this cover sheet)

DATE: March 30, 1999

FROM: Troy Stentz
SOMNOS LABORATORIES
Lincoln, Nebraska

TO: Martha Kent
OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION
Washington, D.C.

RE: Ergonomics Program Standard Comments

IF YOU HAVE ANY TROUBLE RECEIVING THIS FAX TRANSMISSION, OR BELIEVE YOU HAVE RECEIVED IT IN ERROR, PLEASE CALL (402)476-8191 IMMEDIATELY.



SOMNOS LABORATORIES INC.
Clinical Sleep and Electromyographic Testing

March 30, 1999

Ms. Marthe Kent
Chair, Small Business Advocacy Review Panel
OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION
Washington, D.C. 20210

RE: Ergonomics Program Standard

Dear Marthe:

Thank you for giving me the opportunity to participate in the panel review of OSHA's draft proposal for the Ergonomics Program Standard. Of course the material to review was extensive and quite detailed, but I did manage to make a complete reading of it over the past three weeks. The highlight of this process was certainly the conference call on March 25th with several other panel members. I enjoyed discussing these issues with my "peers" in small business. It seemed to me that we had a very diverse group.

I'll try to tackle the list of issues in a rather general method. As I mentioned during the conference call, this standard will have a much smaller impact on my company in comparison to those businesses that are primarily manufacturers or material handling ventures. My expectations are that we would have little if any additional work to do within our Health and Safety Committee if this standard was adopted. Despite that, I am concerned that for very small business, especially those with fewer than ten employees, some of the requirements of this standard would be cost prohibitive (namely the Medical Management portion of this standard).

Let me address each section of the list of issues provided to us:

A. General Questions

My opinion is that the draft standard is clear and well written. I appreciate the Frequently Asked Questions section and description of key terms. I found myself referring to the key terms section as I went through the standard and all of my questions were answered there.

Our business has an active Health and Safety Committee which holds a minimum of one annual meeting, but we generally meet more frequently than that. At our monthly case review meetings (at which all employees are present) we generally cover one safety topic or issue. Employees in our company have participated willingly in the past with safety/health issues and I believe they would give the same effort to an ergonomics standard. Adding an ergonomics standard to our health and safety program would likely cost us between \$150 to \$300 for managerial time to develop the documentation and deliver a 30 minute training session for employees. To gather our group for a 30 minute training session costs approximately \$100.

This standard does not create any disincentives to hire in my area of business. Because our company does very little repetitive work or material handling I would not be inclined to change my hiring practices.

Ms. Marthe Kent
March 30, 1999
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As we have developed our safety and health program we have consulted with our medical director (a physician) and our clinical director (a Ph.D. in Health and Human Performance). We have also taken advantage of the written materials provided through OSHA publications. In addition to these resources, our worker's comp carrier has provided day-long courses in our area that have been very helpful. I believe these resources would continue to help us if an ergonomics standard was adopted, however, if we had a workplace MSD we would likely have to bring some outside help to identify hazardous jobs and design engineering controls. I have no idea how much this might cost, but I can't imagine it would be available for anything less than a \$2,000 per job (consultant's time and costs of re-engineering a work station). My hope is that we are unlikely to have a MSD in our company very often.

We have had only one OSHA 200 reportable injury in our company in the past three years and this was not a MSD. We would continue to rely on our OSHA 200 log to identify MSDs. We have had no loss-time injuries at our company since we were founded in 1990. Our worker's comp premiums have been steady for many years now. I would expect no changes in the near future.

B. Costs and Assumptions

I really don't have any basis for making cost estimates for this standard because our company is so small and our work on Health and Safety matters is shared amongst several individuals who may only spend a couple of hours each month on this task. At best I can give some idea of the hours it would take to integrate this standard into our health and safety program. As far as the additional elements of this standard I could not estimate these without some considerable research.

The leadership time would probably amount to 10 to 20 hours. This time would be spent reviewing the standard and integrating it into our written health and safety policies, as well as developing presentation materials and training for our employees. To gather the group and meet for a half hour on this standard would take about five manhours (ten employees x 30 minutes).

We are aware of our obligations under the General Duty Clause of the OSH Act. We became aware of this through our early work on our Health and Safety program during which we reviewed the OSHA standards. This has not, however, led us to develop measures for addressing ergonomic hazards rather our efforts have been geared toward other more immediate hazards in our workplace (i.e. air quality, blood-borne pathogens, safe driving). About the only work on an "ergonomic" issue would be our Proper Lifting policy and training program.

In our particular company if a MSD occurred it would probably effect four or five "similar" jobs. I hope I'm defining "similar" properly. For example, if we had a sleep technologist in our company develop a MSD in the workplace there would be four other sleep technologists in the company that perform the same job. I have no basis to estimate the benefits we could gain from implementing a ergonomics program.

I do believe OSHA needs to give relief to businesses with fewer than ten employees. We have recently passed that threshold, but thinking back to the early days of our company when there just three or four of us working here - the cost of a MSD in terms of having to meet our obligations to the injured employee, develop the program, and fix the problem would have likely put us out of business.

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March 30, 1999
Page 3

C. Specific Questions

I understand how this standard applies to my business and I believe it should apply to all businesses. The definitions are clear and I feel I could identify problem jobs and work related MSDs (as should others in the health care industry). I am concerned that other types of small business may not be able to easily identify these. I think the rule as it is proposed, with one MSD triggering further action, is sufficient. Two MSDs would be too large a proportion of my workforce to effectively address problem jobs in a timely manner. We are required to keep OSHA 200 logs.

I like the draft provision of allowing a business to avoid the standard's provision if there are no MSDs for three years as long it does not discourage these types of injuries.

I feel we would only need to identify ergonomic hazards once every five years. That is simply my prediction on how rarely we have MSD type injuries on the job, and even that might be conservative.

The medical management portion of the standard concerns me most. Perhaps because I'm not very familiar with how worker's comp factors in (since we have never had a claim), I'm concerned that the costs for medical removal protection could seriously harm our business. We recently had an employee injure her back at home and she was told by her doctor she could not return to work for at least six months. I hate to think what would have happened if she had received that injury on the job. We don't really have any "light duty" jobs in a company as small as ours. It would almost be easier for me to have someone just stay at home than to try to spend my days coming up with "light duty" work for them (in this employee's case she was not to do lifting of any kind).

For short-term injuries (one day to one month) we could weather an employee's absence and the costs of maintaining their pay (with the assistance of worker's comp coverage). But beyond one month we would have a difficult time keeping our obligation. As I said before, not knowing how much our worker's comp insurance and existing health care insurance would pay for it's difficult to predict how long someone could be on restriction or medical removal for. Employees at our business are so highly trained that it is difficult to quickly replace an injured worker, and even if I could it would be prohibitively expensive to have one tech at home on medical leave and a replacement tech working or training on the job in their absence. It usually takes us four to eight weeks to locate and hire a new employee and then an additional two to six months to train them.

I hope this information is of assistance. If I can be of any further help, please feel free to call me at 402/476-6191 or contact me via e-mail at somnos@earthlink.net. I look forward to an update on the group's progress. Thank you again for allowing me to participate.

Sincerely yours,



T. Troy Stenz
SOMNOS LABORATORIES

L 0327

ANSWERS
PROVIDED BY VICTOR N. TUCCI, M.D.
GENERAL QUESTIONS

- 1 Terms used in the proposed standard such as feasible and reasonable are too subjective.
When the employee's salary is determined for "medical removal", is this pre- or post- tax dollars.
Are home health care jobs, jobs that require extensive driving and home based jobs included?
If one employee has an MSD, do you have to modify all similar workstations?

- 2 Clarify terminology as listed above.

3. My first recommendation is to provide tax incentives to purchase ergonomically correct equipment with a full tax break in the year purchased instead of amortizing the purchase over several years.
My second recommendation is to provide resources for employers to learn more about realistic ergonomic solutions
My third recommendation is to provide grants to educate employees on methods to avoid ergonomic injuries in the workplace and during non-work hours

Setting up a non-regulated safety and health program would be an effective approach if it is not regulated by the government and is work site specific

- 4 The General Duty Clause covers MSDs now

- 5 Employee participation is difficult at best for any employer program. The AFL-CIO initially opposed safety committees that were composed of equal numbers of representatives of labor and management. Unions tend to oppose any situation where employees other than union officers are involved. Job rotation is an important aspect of reducing MSDs, however unions oppose job rotation in favor of jobs being bid and assigned by seniority

- 6 We have a safety and health program. The ergonomics portion of our program includes education, but not customized workstations. We have not had any reportable MSDs thus far. If we instituted this program, we would need to customize our workstations involving a cost of \$1800.00 per station. The benefits would be questionable since our employees have computers in their homes they use during non-work hours and we are not aware of the type of workstations they have there. A question is how do you determine a work-related vs a non-work related injury?

4. These times are grossly underestimated. The estimated times do not account for the number of hazards, which would require analysis and education (initially for the program manager(s), and then for the employees.). The stated times should be at least doubled. In addition, in most firms, the employees indicated in the chart would not be completing the program. This takes a professional with ergonomic expertise, experience, and knowledge.
5. I feel the estimates are not accurate. There is tremendous cost involved with establishing a program. Small businesses may not have the expertise required to establish this type of program and it will require extensive research and time on their part or the cost of outside assistance if they opt for that venue. Most employees in a small business work at various tasks or workstations during the workday. To pinpoint the cause of an MSD to one workstation would be difficult.

In our case, the cost to revise our workstations with ergonomic equipment (chairs, desks, and keyboards) would be \$1800 per workstation. Medical removal costs: If an employee who earns \$2000.00 a month is removed from his/her job, I have the cost of \$ 660.00 (the difference between worker's comp and the workers full salary) plus the required taxes per month, plus the cost of contracting a replacement from a temporary agency at \$15.00 per hour or a total of \$2640.00 per month or an additional \$640.00 per month over my normal payroll for that person. My total cost for an employee on medical removal for the first month would be \$1800.00, plus \$660.00, plus \$640.00 for a grand total of \$3100.00 for the first month. The cost for subsequent months would be \$1300.00 per month, if my employee were not able to return to work at my facility. I will also continue to pay \$ 215.00 for health care benefits. This figure does not include program development, hazard analysis, or medical evaluation for the ergo program, workers comp cost increase, and training a temporary employee. The estimated first year cost if an MSD occurs of \$2,555.00 is grossly underestimated.

6. Yes Yes

7. I believe that both proposed standards are excessive and unnecessary. According to statistics the American workplace is getting safer. These proposed regulations intrude into the management of the various industries they are to regulate and surreptitiously advocate that OSHA manage the workplace.

SPECIFIC QUESTIONS

1. Our business does not have any jobs that include the traditional definition of manual handling. However, any job that requires use of a tool such as pencil, pen, computer, cash register may be regulated by this standard.
2. No. Most occupational medicine consultants will not have a problem with the hazard identification and education requirements but they may have problems with the cost of purchasing ergonomically correct furniture and equipment as well as the cost of replacement employees.
3. I am a physician and a consultant in this field and I am troubled by this proposed standard. I am not able to determine with any certainty if a MSD is job-related. As I am certain this may be the same with other physicians, they will indicate that every MSD is job-related, no matter in what outside activities the employee(s) participate
4. No. Yes
5. The number of MSDs that trigger an action should be determined by the size of the work force and the certainty that they are job-related. Instead of using one MSD as a trigger for compliance, a system similar to the worker's compensation mod rate may be a better indicator or use current OSHA guidelines of 20% employees injured doing similar tasks or facilities with MSDs over industry averages
6. In the case of back injuries determining by symptoms if it is an MSD is not always accurate. There may be other causes.
7. No. No

PURPOSE AND BASIC OBLIGATION

1. No
2. No Yes No
3. No No
4. No. If all of the proposed elements were not required more businesses may initiate parts of the program proactively before they needed to. No.

5. ? No. It only takes one incident, work-related or non work-related to trigger the program.

HAZARD IDENTIFICATION, ANALYSIS, AND CONTROL

1. When a workstation is changed or added, jobs change, or employees change, it will be necessary to evaluate the ergonomic hazards.

Health care provider or occupational health consultant.
2. By asking employees if they have specific symptoms, they will probably have the symptoms that will be listed in the appendices (which have not been provided). As a health care professional, I also know that most of the symptoms of work-related injuries may also be associated with non work-related injuries.
3. As a consultant in this field, I will evaluate the problems and contributing factors. Most small businesses will require outside assistance.

TRAINING

1. We train employees at initial hire and as modifications are made to the workplace. Additional education is provided as needed. Education is provided in two-hour increments depending on the level of education needed. Additional training would be specific to the workstation or specific task assigned. Our cost is the cost of non-productivity by the employee and employer completing the training. For small businesses, consulting fees vary. This rule would require us to provide additional training on signs and symptoms of all MSDs. Currently we educate on prevention.

MEDICAL MANAGEMENT

1. This question needs to be addressed on an individual workplace basis.
2. We have not had an incident to date. If we had an injury, they would receive workers comp. If medical removal were mandated at full pay, this would cause a great hardship, paying two salaries for one job. The training time to break in a new employee is three to six months.

RECORD KEEPING

1. Unless we have an MSD, we will be exempted. No.



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March 30, 1999

Ms. Marthe Kent, Chair
Small Business Advocacy Review Board
U. S. Department of Labor
200 Constitution Ave., NW
Room N-3605
Washington, DC 20210

Dear Ms. Kent,

Thank you for the opportunity to participate on this historic panel.

The interactions with the other small business owners, OSHA representatives, and Office of Advocacy personnel were very informative and enlightening.

I have attached my comments and the answers to the questions for your review.

I will continue my involvement with this project as the matter progresses and look forward to being of assistance on additional occupational health and safety concerns.

Regards,

Victor N. Tucci, M.D.
President

VNT:kay
Enclosures

L 0332

COMMENTS ON THE PROPOSED ERGONOMIC DRAFT
SUBMITTED BY
VICTOR N. TUCCI, M.D.

The necessity of any proposed mandated Ergonomic Standard remains unclear to me at this time. This proposed standard is intended to eliminate the discomfort of sprains, strains, aches and pains that may or may not be work related, presently covered under the General Duty Clause. My comments as put forth here represent my views both as a small business owner and as a member of the College of Occupational and Environmental Medicine.

Is the standard necessary at this time?

The number of work related injuries and injury rates have been on the decline for the past 3 years.

Consider the following

According to the (Pennsylvania Bureau of Worker's Compensation Annual Report Fiscal Year 1997-1998)

- The number of Pennsylvania work related injuries and illnesses has dropped from 111,412 in FY 1995-96 to 87,339 in FY 1997-98; and
- The 1997-1998 the total number of reported workplace injuries and illnesses are approximately 34.2% of the reported workplace injuries in the year 1916

According to OSHA Facts issued by the U.S. Department of Labor (Appropriations for Fiscal Year 1999)

- In 1996 there were 400,000 fewer injuries and illnesses in private sector firms than in 1995
- In addition, the rate of injuries and illness for every 100 workers dropped from 8.9% in 1992 to 7.4% in 1996 - the lowest on record; and
- This report also states that of the 6.8 million reported cases, 293,760 (4.3%) were associated with repeated trauma.

As a physician, I have a problem with the fact that there is an assumption in 1910.508c that all MusculoSkeletal Disorders are work related.

There are *biological* and other factors that predispose workers to MSD's. These include, but are not limited to:

- Age
- Gender
- Pregnancy
- Diabetes mellitus
- Rheumatoid arthritis
- Wrist shape and size
- Oral contraceptives
- Gynecological surgery
- Vitamin B-6 deficiency
- Human factors

In addition there are *non-work related factors*, such as:

- sporting activities
- weekend chores
- second jobs
- hobbies such as knitting, and
- home computer usage that stress muscles and put undue pressure on nerves

Finally, there is *workers compensation fraud*. Musculoskeletal pain is hard to prove

- Full injury reimbursement without enforcement of worker compensation fraud provisions could encourage workers compensation fraud.
- The employee who reports a MSD will receive 66% of his wages tax free under workers comp and only pay taxes on the 33.3% the employers pay. This would be a pay increase.
- I am aware of individuals working as independent contractors AND collecting workers compensation, or, Double Dipping.

Backaches are like headaches. if you have it you know it, but there is no conclusive physiological method of proof that the person is or is not experiencing pain

As a physician, I can tell you that it is impossible to determine with certainty what percentage of a MSD is work related.

The provisions of this standard state that the employer must provide a job description and hazard analysis of the job. In addition, it would be helpful for the physician to have the employee job description as well as description of all non-work related activities to determine if the injury is truly work related. Without all the facts, the physician may not be able to determine accurately if the MSDS is or is not work-related.

I ALSO WOULD LIKE TO TAKE ISSUE WITH 1910.508b2. THIS IMPLIES THAT EMPLOYERS WOULD BRIBE A HEALTH CARE PROVIDER TO GIVE AN INJURED EMPLOYEE A CLEAN BILL OF HEALTH AND IT IMPLIES THAT THE HEALTH CARE PROVIDERS MIGHT ENDANGER THEIR PATIENTS FOR A BRIBE. What basis do you have for assumptions like this?

What would the cost of this standard be to a small business?

A small business like mine with an employee who experiences a carpal tunnel injury or back problem, whether it is work related or not, would have to spend approximately \$1800.00 (good quality, not top of the line) per computer workstation to purchase ergonomically correct chairs, desks, keyboards, and ergonomic mice. This expense for an ergonomically correct workstation would be incurred based on a diagnosis made without all the facts.

I am like most small businesses. I do not have complete job descriptions for every position. Everyone does "whatever it takes" to get the job done. So, first of all, in the event of a reportable MSD, a small business needs to write a thorough job description, complete a job hazard analysis, and list the alternative duty jobs to forward to the physician within five days.

Many small employers do not have the expertise or more importantly the time to complete an accurate job description or job hazard analysis – they must rely on outside contractors. It would probably require a minimum of two days to do a complete hazard analysis and prepare the report.

In addition, the required education must be specific to the workplace for managers and employees. For a business with 15 employees, this education would take a minimum of a half-day to prepare and a minimum of a half-day to present.

A professional with experience to assist with the above would require between \$1,000.00 - \$5,000.00 per day depending on the level of expertise, experience, and credentials. A conservative average cost would be \$2000.00 per day.

Questions, which still remain unanswered, include:

- *OSHA has stated that general industry, except manufacturing and manual handling, does not have to act unless there is an injury. Is this a willful violation knowing the existence of a hazard and not correcting it under the General Duty clause?*
- *OSHA has stated the employer is initially responsible to determine if this injury is work related but if this employer determines it is not, is it possible for the employee to file a complaint with OSHA or initiate a lawsuit?*
- *OSHA has stated that their OSHA consultation service will help small business. How many ergonomists and ergonomic engineers do they have and how long will a company wait to see a qualified professional?*
- *Why is health care, with its specific problems included, when construction, agriculture, and maritime are not covered?*
- *What are the definitions of reasonable and feasible as used in the proposed standard? Are they subjective or objective definitions?*
- *Are MSDs included that occur outside of a traditional workplace, such as home health care, and vehicular travel?*

Ideas to improve the existing draft standard are:

1. Instead of using one MSD as a trigger for compliance,
 - A system similar to the workers compensation mod rate might provide a better barometer.
 - Use current OSHA standards for citing ergonomic hazards under the General Duty Clause, considering:
 - 20% of worker's performing similar tasks with MSDs; and
 - the MSD rates per SIC.
2. Eliminate the full pay provision since this would increase the workers pay and promote workers compensation fraud.
3. Clarify terms like feasible and reasonable.
4. Concentrate education efforts on methods of prevention of MSD's rather than on identification of symptoms.

In conclusion:

This draft ergonomic standard is an improvement over past draft ergonomic standards. There has been a great effort made not to make this a one size fits all type of standard.

With the positive trends we are seeing through voluntary efforts made by companies, we need to encourage additional efforts.

My recommendations are

- Provide tax incentives to purchase ergonomically correct equipment with a full tax break in the year purchased instead of amortizing the purchase over several years
- Provide resources for employers to learn more about ergonomic hazards and solutions
- Provide grants to educate employees and managers on ways to avoid ergonomic injuries in the workplace and outside the work place.

Experienced professionals should provide the above two recommendations, not theorists

- States should implement stricter worker compensation fraud penalties.

I believe these measures will encourage all employers to eliminate potential WMSD's

URGENT FAX

TO: Marthe Kent (c/o Adrian Corsey

Fax: 202-693-2106

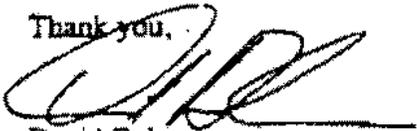
From: David Bolen

Pages: 26

**SUBJECT: Ergonomic Standard Small Business Advocacy Review Panel
Comments**

I have attached comment and supplemental information relating to the ergonomic standard review process as requested by Ms. Marthe Kent, Review Panel Chair. I will follow this fax with a hard copy by mail, but because of the April 1st deadline I decided to fax my initial comments. Please forward to these comments or copies to Ms. Kent and any other appropriate persons within OSHA.

Thank you,



David Bolen

President

New World Tours

L 0345



March 30, 1999

Ms. Marthe Kent
Chair, Small Business Advocacy Review Panel
Occupational Safety & Health Administration
U.S. Department of Labor
Washington, D.C. 20210

Dear Ms. Kent,

Thank you for allowing me to express my observations, opinions, and concerns relating to OSHA's proposed ergonomic standards in the recently convened SBREFA review process. Discussions during the teleconference of last week were informative and thought provoking. I am respectfully submitting the following letter and attachments for review by the panel members, OSHA, and for inclusion into the public docket.

My company, New World Tours, is based in Lorton, Virginia. We currently operate 25 motorcoaches in charter and tour service and have 72 full and part time employees. New World Tours, with under \$5 million annual revenues and under 100 employees meets the Small Business Administration's definition of a small passenger carrier business. I have been involved in the motorcoach industry for over fifteen years and have had an opportunity to observe patterns and trends development during those years. As such I will explain what I believe the effect of this rule will be to my company should it be implemented as proposed. I have arranged my comments on an issue-by-issue basis and will outline my observations and recommendations below.

OSHA Already Has Enforcement Power Under The "General Duty Clause"

I find it difficult to understand why an ergonomic standard is necessary. OSHA already has all the power it needs to require any company to fix a condition that contributes to work place injuries. Further, if OSHA implements its proposed Safety and Health Program, then logically ergonomic related hazards would also fall within its purview. A separate ergonomic standard appears to me as "triple-dipping" and makes me question the agency's motives.

Page 1 of 5

9406 B Gunston Cove Road • Lorton, Virginia 22079 • (703) 643-9800 • Fax (703) 643-9527
P.O. Box 400 • Bermany Beach, Delaware 19930 • 1-800-322-7733 • Fax 1-888-539-5207

However, after reading the medical removal provisions of the proposal a clearer picture emerges. Today, if an employee reports a work place injury, they are eligible for approximately 66 2/3 percent of their salary until they are ready to return to work. This income is not taxable. The total amount is less than the salary a person would earn if they were on the job, however it is considered to provide a realistic and adequate safety net from personal bankruptcy and provides an incentive to get well as quickly as possible. Under the proposed standard, the workers compensation carrier will still pay their share while the employer is asked to contribute the other 33 1/3 percent to round out the full salary. If the workers compensation portion still enjoys tax exempt status, the injured worker receives a capital increase to stay away from the workplace. Any incentive to promote rapid healing and a return to work is removed, particularly if the employer no longer is to be allowed to select the health care provider. Not only will my compensation premiums go through the roof; the other one-third salary payment will drive the direct costs even higher. Furthermore, this will also put me into an adversarial relationship with my compensation insurer. *I strongly urge OSHA to consider the "general duty clause" of the Occupational Safety and Health Act as sufficient for small businesses unless compelling evidence indicates that the ergonomic standard is necessary, and then only on a case-by-case basis.*

The Relationship Between The Employer And Their Insurer Is Not Recognized

My company's workers compensation premiums currently cost \$73 thousand annually. This amounts to approximately \$1 thousand per employee per annum, which, as an experience rated value, is relatively low. *I have had only 2 reportable claims during the past 3 years time, neither of which could be classified as an MSD or repetitive motion disorder, one was a slip-and-fall while exiting a bus and the other was a "stepped in a pothole" incident.* Part of the reason for our lack of MSD or repetitive motion injuries directly relates to our close working relationship with our insurer. The insurer primary concern is to determine and put a dollar value to the level of risk they are being asked to underwrite. It is in their interest to make certain that their insured companies are as safe as possible and maintains an acceptable and stable level of risk.

This is why my insurer provides safety inspections, training, and information services. If a trend or pattern of claims begins to develop it is my insurer who will demand improvements either through increasing my premiums or by threatening to cancel my insurance coverage if the improvements are not made. If I loose my insurance, I can assure you that finding another insurance carrier will be difficult and very expensive. If I am unable to obtain insurance because my company is viewed as an unacceptable risk, then I'm out of business. With this form of business relationship it appears to me that OSHA's ergonomic standard is not only very expensive but also redundant. *I strongly urge OSHA to re-evaluate the fundamental business relationship between small company owners and private compensation insurers. I believe the facts will prove that OSHA's proposed ergonomic standard to be redundant in my company and in many other small businesses.*

Page 2 of 5

L 0347

OSHA's Claim Of Workers Compensation Claims Underreporting Lacks Credibility And Must Be Substantiated By Direct Evidence

When I examined the information package sent to me for review by OSHA, I came across a statement that claimed that workers compensation claim data could not be counted on to provide a true picture of MSD and repetitive motion injuries. This statement is astounding and is certainly not my experience. My observation has been that workers compensation claims increase during times when job security is threatened. Similarly, I have experienced a situation where an injured worker has been afraid to file a legitimate claim for fear of reprisal. If OSHA has compelling evidence to the contrary it must provide it, since compensation is at the heart of the ergonomics standard that it is proposing.

As a sidebar, compensation claim filings appear to act almost as an economic condition indicator. During periods of relative economic stability or growth, compensation claims decrease. It is my understanding that that compensation claims are currently at an all time low and are continuing to drop which seems to indicate that workers feel relatively secure in today's strong job market. Conversely, it has been observed that in times of economic recession compensation claims escalate. *This has been my experience and the experience of my insurer. It has also been my experience that employees are not shy or in fear of their employer when pursuing a legitimate workers compensation claim.*

Motorcoach industry compensation insurers that I spoke with prior to the panel discussion indicated to me that MSD and repetitive motion disorders are not a problem with the SIC 4131, 4141, and 4142 sub-categories. *OSHA must justify its compensation-underreporting allegation, on an industry-by-industry basis, with irrefutable evidence and not simply with anecdotal information, supposition, or unsupportable data.*

A 2 Digit SIC "Industry" Identification Is Misleading

My business was identified within the broad Standard Industrial Code (SIC) 41-group designation in the information package that was provided to me for review. While it is true that charter and tour bus companies fall within this category, it is patently unfair and misleading to consider the statistics relating to the entire group as representative of my industry or specifically my company. In the "Industry Specific Fact Sheet" that I was provided it was pointed out that "my industry" has an MSD rate of 2.9 percent. While this may be OSHA's rate for the entire SIC 41 group, it provides a deceptive picture of the SIC 4142 subgroup, which is non-local charter bus companies. In the past 3 years New World Tours has not experienced a single work related injury that could be categorized as either an MSD or a repetitive motion injury. I have attached copies of my Workers Compensation claims for this period. *I strongly urge OSHA to not simply rely on 2 digit SIC "lumping" as a means of justifying its position and lending credibility to its data.*

Page 3 of 5

L 0348

4 Digit SIC Identifier Does Not Indicate My Company As A Risk

With respect to SIC designation, OSHA must examine each industry individually to determine if *significant risk* of MSD or repetitive motion injury occurrence is present by thorough examination 4 digit SIC safety and inspection records. For example, my company is identified by the Bureau of Labor Statistics and OSHA as SIC 4142, Charter Bus Service (Except Local). I have attached copies of information I obtained from OSHA's website relating to the 108 OSHA inspections it has conducted on SIC 4142 companies, such as mine, from 1973 to the present time. Please note that each individual inspection information (also attached) records the reason for the inspection, *the type of injury (if any)*, violations, fines, and subsequent remedial actions on the part of the employer. OSHA has the information at hand to determine the level of risk posed by individual industries or individual companies. If OSHA breaks bus companies out by the 4 digit identifier from the 2 digit SIC group and examines them individually it will be seen that *significant ergonomic risk is not evidenced for companies such as mine. I strongly urge OSHA to examine all industry safety histories individually to determine if significant risk is present. If evidence of significant risk is not present then the industry should be exempted from the standards until such time that evidence indicates that the standards are warranted.*

Material Handling Needs Narrower Definition

OSHA's proposal to capture any company that employs persons that have a "material handling" component in their job description need further defining. In my company bus drivers may have to lift, carry, or push-pull passenger luggage during a trip and mechanics may have to lift or carry motorcoach parts. However, these portions of their jobs are minimal when compared to their primary function. Drivers and mechanics are highly skilled professionals whose primary function is to make certain that passengers are carried safely and in comfort.

Employers place a high value on skilled employees. An employer has a great deal to lose in not protecting an employee from obvious health and safety risks. This is not an issue of increased workers compensation premiums, but rather one of lost productivity and missed business opportunities. It is often said that the worker is a company's most valuable resource. In the motorcoach industry, where skilled drivers and mechanics are becoming increasingly scarce, it is a plain simple fact.

This is the reason a company like mine invests heavily in employee training. Even when lifting or carrying makes up a very small portion of a driver or mechanics daily duties, the risk is recognized and addressed as it has been for many years. *I strongly urge OSHA to take into consideration the amount of time an employee spends in "material(s) handling" duties as a part of their job; and whether they have been provided safety training in lifting, carrying, pushing or pulling. These are important factors to consider and should justify flexibility in whether an ergonomic standard is justified.*

Page 4 of 5

L 0349

Certain Jobs Can Not Be "Fixed" By Ergonomic "Widgets"

As mentioned in the previous section motorcoach company drivers and mechanics may, in the course of their daily duties have to lift, carry, push or pull objects. During the panel discussion of last week, OSHA's ergonomic expert stated that in certain instances a job cannot be corrected or improved by mechanical or other means and that proper safety training is the solution. He further stated that for purposes of the proposed standard, a company that has provided such training should be considered to be in compliance with the rule. *I strongly urge OSHA to state this clearly in the preamble and in the body of any rule they issue, along with a variety of industry examples.*

Sincerely,



David Bolen
President

Attachments

DB/al

cc: Jere Glover, Esq., Chief Counsel for Advocacy, U.S. Small Business Administration

Honorable Christopher Bond, Chairman, Senate Small Business Committee

Honorable John Kerry, Ranking Minority Member, Senate Small Business Committee

Honorable James Talent, Chairman, House Small Business Committee

Honorable Nydia Velazquez, Ranking Minority Member, House Small Business Committee

Mr. Norm Litzler, VP Government Affairs, United Motorcoach Association

-0-

L 0350

ONE PAGE 0039
DATE PRODUCED 07/08/98
PAGE 0001

HARTFORD INSURANCE GROUP - INDIVIDUAL RISK EXPERIENCE
PREMIUM AND LOSS SUMMARY

PRODUCER
LANCER MANAGEMENT COMPANY
LONG BEACH NY

PRODUCER
LANCER MANAGEMENT COMPANY
LONG BEACH NY

PRODUCER CODE 124001
UND CODE CPU1

PRODUCER CODE 124001
UND CODE CPU1

REPORT L0320001-01 HARTFORD INSURANCE GROUP - INDIVIDUAL RISK EXPERIENCE
REQUESTED BY LONG ISLAND
HOMECIND REGIONAL - LONG ISLAND

NAME INSURED
NEW WORLD TOURS, INC.
ORTON

ACCOUNT NUMBER -
CURRENT POLICY 012MBV EM0649
07/25/97-07/25/98

REASON FOR REFERRAL
REQUESTED BY TONY

WEEK PERIOD ALL INFO ON FILE

A = AUDIT COMPLETED R = REINS ADJ COMPL M = AMOUNT IN THOUSANDS
↓ = WC A/C INCL ALLOC EXP

POLICY NUMBER	POLICY PERIOD	EARNED	TOTAL	LOSS	LOSS RATIO	CLAIM FREQ	PAID	EXPENSE	LOSSES	OPEN	OPEN	OPEN
WORKERS' COMPENSATION												
12MBV C29195	07/01/96-07/25/97	27920	318	1.11	1	318	01	01	01	01	01	01
12MBV EM0649	07/25/97-07/25/98	43052	6000	13.31	0	13671	01	46331	01	01	01	01
CURRENT TERM PREMIUM DISPLAY IS EARNED												
POLICY TOTALS												
12MBV C29195	07/01/96-07/25/97	27920	318	1.11	1	318	01	01	01	01	01	01
12MBV EM0649	07/25/97-07/25/98	43052	6000	13.31	0	13671	01	46331	01	01	01	01

REPORT LOS200CD-03 HARTFORD INSURANCE GROUP-INDIVIDUAL RISK EXPERIENCE
 REQUESTED BY LONG ISLAND PRODUCING REGIONAL-LONG ISLAND
 AHE INSURED
 EM WORLD TOURS, INC.
 WILTON
 ACCOUNT NUMBER-

VALUED AS OF 07/06/98
 VA
 CURRENT POLICY 012WBV EM0649
 07/25/97-07/25/98

PRODUCER
 LANDER MANAGEMENT COMPANY
 LONG BEACH NY
 PRODUCER CODE 124001

DNC PAGE 0040
 DATE PRODUCED 07/08/98
 PAGE 0001

REQUESTED BY TONY
 OD- WORKERS' COMPENSATION

UND CODE CB01
 * = RECOVERY PENDING * = WC MEDICAL ONLY

DATE	DATE	CLAIN	RISK	CLASS	PAID	OPEN	TOTAL INC
REPORTED	CLOSED	NUMBER	STATE	CODE	LOSSES/ PAID	LOSSES/ OPEN	LOSS + EXP
CLAIMANT/DRIVER/LOCATION OF PROPERTY				AGE	LEN ENPL	EXPENSE	
LOCATION OF ACCIDENT/CLAIM DESC/CLMT OCCUPATION							
POLICY 012WBV CZ9193 07/01/96-07/25/97							
02/24/97	03/13/97	04/30/97	723C 77140 VA	0573628F9U	318	0	318 *
DOMINQUEZ NORA				43	01Y	0	0
WILTON VA/13-BLIP/FALL ENTRANCE FLOOR STEP/ LT HAND							COACH CLEANER

PAID LOSSES	PAID EXPENSE	OPEN LOSSES	OPEN EXPENSE	TOTAL INC LOSS + EXP
318	0	0	0	318
318	0	0	0	318

TOTAL CLAIMS FOR VA
 TOTAL CLAIMS FOR THE LOSS

1 CLAIMS
 1 CLAIMS

L 0352

01/01/98 THU 14:38 FAX 703 638 2850 UNITED MOTORCOACH ASSN 0008

REPORT LD&700CD-51
 REQUESTED BY: CRUI
 REQUESTED FOR:
 REASON FOR REQUEST:
 ACCOUNT REVIEW
 COMMENT: REQUESTED POLICY 12 WBV EN0649

HARTFORD INSURANCE GROUP-ACCOUNT EXPERIENCE
 AIF ACCOUNT NUMBER 1014561651
 ACCOUNT TRADE NAME NEW WORLD TOURS INC
 ACCOUNT INDIVIDUAL NAME
 ACCOUNT ADDRESS 9406 D BUNSTON COVE RD LUNTON
 REQUESTED FROM TABS SCREEN

VALUED AS OF
 07/09/98

PAGE 1
 VA

NOTE: M = THOUSANDS

LINE#	OF	POLICY NUMBER	POLICY TERM	EARNED (PREM EXCL) (RETR ADJ)	LOSS (PARTICIPATION)	CLAIM (FREQUENCY)	CLAIM SEVERITY (GREATER THAN)	AMT (10% 25% 50% IN MI)	WRITTEN PREMIUM	AGENCY CODE	MBI CODE			
LATEST POLICY INFORMATION														
		1012WBV EN0649	07/25/97-07/25/99	45,157	13.3%	0	1	0	0	0	0	47,368	12400	167
LATEST POLICY INFORMATION TOTAL				45,157	13.3%	0	1	0	0	0	0	47,368		
PRIOR LOB INFORMATION														
		WORKERS COMP	07/01/96-07/25/97	27,920	1.1%	1	0	0	0	0	0			
PRIOR LOB TOTAL				27,920	1.1%	1	0	0	0	0	0			
ACCOUNT TOTAL				73,077	8.6%	1	1	0	0	0	0			

01/01/98 TRC 11:08 FAX 703 938 2950

UNITED MOTORCOACH ASSN.

2010

TOTAL PAGES: 5

L0354

~~PRODUCTION REGIONAL~~-LONG ISLAND
 NAME INSURED
 NEW WORLD TOURS, INC.
 LONDON
 ACCOUNT NUMBER-

VALUED AS OF 02/25/99

PRODUCER
 LANCER MANAGEMENT COMPANY
 LONG BEACH NY

UA
 * CURRENT POLICY 012WV EM0649 *
 07/25/98-07/25/99

PRODUCER CODE 124001
 UNID CODE (00)

REASON FOR REFERRAL
 REQUESTED BY ANNA

SEEK PERIOD ALL INFO ON FILE

A = AUDIT COMPLETED R = RETRO ADJ COMPL M = AMOUNT IN THOUSANDS
 I = WC A/C INCL ALLIC EXP

POLICY NUMBER	POLICY PERIOD	EARNED IFRER EXCLING IFRTRD ADJIFL	TOTAL LOBB EXP	LOSSES RATIO	CLAIM FREQUENCY PAID/ OPEN	PAID LOSSES	PAID EXPENSE	OPEN LOSSES	OPEN EXPENSE
WORKERS' COMPENSATION									
012WB	029195 07/01/96-07/25/97	27920 A	340	1.21	0	3101	01	221	01
012WDV	EM0649 07/25/97-07/25/98	46014 A	42090	89.91	0	204561	01	216341	01
TOTAL LAST 02 TERMS		74734	42430	56.81	0	207741	01	216561	01
012WV	EM0649 07/25/98-07/25/99	22088	12980	58.81	1	18721	01	111081	01
CURRENT TERM PREMIUM DISPLAY IS EARNED									
POLICY TOTALS									
012WB	029195 07/01/96-07/25/97	27920	340	1.21	0	3101	01	221	01
012WDV	EM0649 07/25/97-07/25/98	46014	42090	89.91	0	204561	01	216341	01
TOTAL LAST 02 TERMS		74734	42430	56.81	0	207741	01	216561	01
012WV	EM0649 07/25/98-07/25/99	22088	12980	58.81	1	18721	01	111081	01

01/01/98 THU 11:08 FAX 703 838 2850
 016 231 6034 TO 19739523657
 016 231 6034
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L 0355

Post-IT Fax Note 7871

Date	3/1/99	Page #	4
To	Linda Fischer	From	Anna Bruno
Co/Dept		Co	Hartford
Phone #		Phone #	
Fax #		Fax #	

04/01/98 THU 11:08 FAX 703 838 2850
 UNITED MOTORCOACH ASSN
 2011

REPORT ID: 20000-03
 REQUESTED BY LONG ISLAND
 PRODUCED REGIONAL-LONG ISLAND
 NAME INSURED

HARTFORD INSURANCE GROUP--INDIVIDUAL RISK EXPERIENCE
 ****DETAIL LOSS EXHIBIT****

DATE PRODUCED 02/27/99
 PAGE 0001

NEW WORLD TOURS, INC.
 LORTON

VALUE AS OF 02/25/99

PRODUCER
 LANGER MANAGEMENT COMPANY
 LONG BEACH NY

ACCOUNT NUMBER-

VA
 CURRENT POLICY 012WB EM0649
 07/25/98-07/25/99

PRODUCER CODE 124001

REQUESTED BY ANNA
 LOW WORKERS' COMPENSATION

UND CODE DRU
 * = RECOVERY PENDING * = WC MEDICAL ONLY

LOSS DATE	DATE REPORTED	DATE CLOSED	CLAIM NUMBER	RISK STATE	CLASS CODE	CLAIM CODE	PAID LOSSES/PAID EXPENSE	OPEN LOSSES/OPEN EXPENSE	TOTAL INC LOSS + EXP
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POLICY 012WB CZ9195							07/01/96-07/25/97		
02/24/97	03/13/97	00/00/00	723C 77140	VA	057302GPDV	43	310 0	22 0	340 *
DOMINGUEZ NORA LORTON VA/13-SLIP/FALL ENTRANCE FLOOR STEP/ LT HAND							COACH CLEANER		

TOTAL CLAIMS FOR VA	1 CLAIMS	PAID LOSSES	310	PAID EXPENSE	0	OPEN LOSSES	22	OPEN EXPENSE	0	TOTAL INC LOSS + EXP	340
TOTAL CLAIMS FOR THE LOSS	1 CLAIMS	PAID LOSSES	310	PAID EXPENSE	0	OPEN LOSSES	22	OPEN EXPENSE	0	TOTAL INC LOSS + EXP	340

P. 02/03

516 231 6804 TO 1975522057

MAR 01 '99 12:04 PM THE HARTFORD

L 0356

03/01/99 THU 14:38 FAX 703 338 2850

UNITED MOTORCOACH ASSN.

2012

REPORT LOSS2000B-0J HANFORD INSURANCE GROUP-INDIVIDUAL RISK EXPERIENCE DATE PRODUCED 02/27/99
 REBATED BY LONG ISLAND ***DETAIL LOSS EXHIBITION*** PAGE 0003
 PRODUCING REGIONAL-LONG ISLAND PRODUCER LANCER MANAGEMENT COMPANY NY
 NAME INSURED VALUER AS OF 03/25/99 LORR BEACH NY
 NEW WORLD TOURS, INC. PRODUCER CODE 124001
 LORTON VA CURRENT POLICY 012URU EN0649 URB CODE 05U
 ACCOUNT NUMBER- 07/25/98-07/25/99 * - RECOVERY PENDING - WE MEDICAL ONLY

LOSS DATE	REPORTED DATE	CLOSED DATE	CLAIM NUMBER	RISK STATE	CLASS CODE	LEN ENPL	PAID LOSSES/PAID EXPENSE	OPEN LOSSES/OPEN EXPENSE	TOTAL INC LOSS + EXP
12/27/98	01/03/99	01/06/99	639C 00072	VA	0573820FIV	44	0	0	0
TATE KORMIE ANIMPOLIS VA/61-PAIN KNEE BUS ACCIDENT									
12/27/98	01/05/99	00/00/00	639C 00217	VA	0573820FIV	44	1872	1108	12980
TATE ROBINIE LORTON VA/61-RT KNEE STRUCK STEERING COLUMN									

PAID LOSSES	PAID EXPENSE	OPEN LOSSES	OPEN EXPENSE	TOTAL INC LOSS + EXP
1872	0	1108	0	12980
1872	0	1108	0	12980

TOTAL CLAIMS FOR VA 2 CLAIMS
 TOTAL CLAIMS FOR THE LOSS 2 CLAIMS

L 0358



SIC Major Group 41

Major Group 41: Local And Suburban Transit And Interurban Highway Passenger Transportation

Major Group Structure

This major group includes establishments primarily engaged in furnishing local and suburban passenger transportation, such as those providing passenger transportation within a single municipality, contiguous municipalities, or a municipality and its suburban areas, by bus, rail, or subway, either separately or in combination, and establishments engaged in furnishing transportation to local scenic features. Also included are establishments primarily engaged in furnishing highway passenger transportation and establishments furnishing highway passenger terminal or maintenance facilities. Intercity bus lines are included in this major group, but interurban railways are classified in Major Group 40.

- Industry Group 411: *Local And Suburban Passenger Transportation*
 - 4111 Local And Suburban Transit
 - 4119 Local Passenger Transportation, Not Elsewhere Classified
- Industry Group 412: *Taxicabs*
 - 4121 Taxicabs
- Industry Group 413: *Intercity And Rural Bus Transportation*
 - 4131 Intercity And Rural Bus Transportation
- Industry Group 414: *Bus Charter Service*
 - 4141 Local Bus Charter Service
 - 4142 Bus Charter Service, Except Local
- Industry Group 415: *School Buses*
 - 4151 School Buses
- Industry Group 417: *Terminal And Service Facilities For Motor Vehicle*
 - 4171 Terminal And Service Facilities For Motor Vehicle Passenger

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L 0359



Details for the inspections listed below may be obtained in two ways. The first method is simply following the inspection activity number link. The second method is marking the check boxes for selected inspections and pressing the *Get Detail* button. Information relevant to the selected cases will be returned and may then be browsed or printed. For information on the data elements displayed below, see [definitions](#).

Please note that inspections which are known to be incomplete will have the identifying Activity Nr shown in *italic*. Information for these open cases is especially dynamic, e.g., violations may be added or deleted.

Search Options					
SIC	Date Range	RID	State	Limits	Other Options
4142	1972-07-01	2010-12-31	All	All	150/9999

<input type="button" value="Get Detail"/> <input type="button" value="+"/> <input type="button" value="All"/> <input type="button" value="Reset"/>				Found 114 -- Processed 114 -- Selected 114 -- Displayed 108				
	Activity Nr	Open Date	Report ID	St	Type	SIC	Vio	Establishment Name
<input type="checkbox"/>	115174955	01/28/1999	1055360	WA	Complaint	4142	1	Western States Bus Services Inc
<input type="checkbox"/>	<i>119794111</i>	08/25/1998	0950622	CA	Complaint	4142	1	Greyhound Lines, Inc
<input type="checkbox"/>	300210002	07/24/1998	1032500	ID	Complaint	4142		Western Trails Charters and Tours Lic
<input type="checkbox"/>	125254417	05/21/1998	0453720	NC	Planned	4142	12	Holiday Express Corporation
<input type="checkbox"/>	<i>125356142</i>	05/14/1998	0950612	CA	Complaint	4142	3	Serendipity Land Yachts, Ltd
<input type="checkbox"/>	302140330	05/05/1998	1054112	OR	Complaint	4142		Ryder Ate Inc
<input type="checkbox"/>	<i>302999338</i>	03/18/1998	0950635	CA	Accident	4142	16	United Transportation Service
<input type="checkbox"/>	301773115	02/11/1998	0454510	SC	UnprogRel	4142		Palmetto Coach
<input type="checkbox"/>	<i>125391895</i>	12/05/1997	0950633	CA	Accident	4142	3	West Coast Charter Inc
<input type="checkbox"/>	<i>301947505</i>	11/19/1997	0214500	NJ	Complaint	4142	3	Hudson Transit Lines, Inc.
<input type="checkbox"/>	<i>301947495</i>	11/19/1997	0214500	NJ	Complaint	4142	11	Hudson Transit Lines, Inc.
<input type="checkbox"/>	<i>301869177</i>	07/28/1997	1054191	OR	Complaint	4142	1	Raz Transportation Company
<input type="checkbox"/>	301239125	05/28/1997	1054112	OR	Complaint	4142	1	Ryder Ate Inc
<input type="checkbox"/>	300795168	04/09/1997	0950625	CA	Complaint	4142	1	Best Tours & Travel
<input type="checkbox"/>	119739787	04/02/1997	0950661	CA	Planned	4142		Abbey Charter, Inc.
<input type="checkbox"/>	301520219	12/16/1996	0453730	NC	Planned	4142	13	Travel Professionals, Inc.
<input type="checkbox"/>	300258878	09/17/1996	0453710	NC	Planned	4142	10	Nancy & Dwight'S Holiday Tours
<input type="checkbox"/>	018051128	08/05/1996	0522000	OH	Accident	4142	1	Whinworth Bus Sales, Inc.
<input type="checkbox"/>	123476590	07/26/1996	0625400	TX	Accident	4142	2	United Dispatch of Austin, Inc.
<input type="checkbox"/>	124717372	06/21/1996	1054112	OR	FollowUp	4142		Raz Transportation Company
<input type="checkbox"/>	122209638	04/12/1996	0523400	WI	Complaint	4142	3	Wisconsin Coach Lines

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<input type="checkbox"/>	22	124717463	02/06/1996	1054112	OR	Planned	4142	1	Raz Transportation Company
<input type="checkbox"/>	23	126750074	09/25/1995	0854910	UT	Planned	4142	7	Jackson Rock Springs
<input type="checkbox"/>	24	116112053	04/10/1995	0729300	MO	Complaint	4142	1	Greyhound Lines Inc
<input type="checkbox"/>	25	115164810	04/10/1995	1055350	WA	Planned	4142	4	Douglas L & Sally A Stiles Dba Bassett Transit
<input type="checkbox"/>	26	115456691	01/25/1995	1055330	WA	Complaint	4142	2	Totem Coaches Inc
<input type="checkbox"/>	27	111112389	12/14/1994	0453710	NC	Planned	4142	11	La Grange Bus Co
<input type="checkbox"/>	28	124808171	02/28/1994	1054112	OR	Complaint	4142	6	Raz Transportation Company
<input type="checkbox"/>	29	123691552	11/22/1993	0355118	VA	Complaint	4142	5	Abbott Tours
<input type="checkbox"/>	30	109643122	08/17/1993	0317020	DE	Complaint	4142	1	Gregg'S Bus Service Inc
<input type="checkbox"/>	31	119808897	05/26/1993	0950621	CA	Complaint	4142	4	Amador Stage Lines
<input type="checkbox"/>	32	109032961	04/15/1993	0213100	NY	Complaint	4142	4	Yankee Trails Inc.
<input type="checkbox"/>	33	123760019	04/07/1993	1054112	OR	Planned	4142	1	Greyhound Lines Inc
<input type="checkbox"/>	34	123760035	04/07/1993	1054112	OR	Planned	4142		Greyhound Lines Inc
<input type="checkbox"/>	35	109041343	03/10/1993	0214500	NJ	Complaint	4142	8	Hudson Transit Corp.
<input type="checkbox"/>	36	123760053	02/26/1993	1054116	OR	Planned	4142	1	York Tours Inc
<input type="checkbox"/>	37	108663691	10/26/1992	0214700	NY	Complaint	4142	3	Amboy Bus Company
<input type="checkbox"/>	38	107542508	10/15/1992	0111400	MA	UnprogRel	4142		Ryder Student Transportation Service Inc.
<input type="checkbox"/>	39	120429717	09/04/1992	0552700	MN	FollowUp	4142		Voigt'S Bus Service, Inc.
<input type="checkbox"/>	40	115681801	09/01/1992	0454510	SC	Complaint	4142	7	Great American Buslines of Charleston
<input type="checkbox"/>	41	115774895	08/04/1992	1054114	OR	Planned	4142	2	Green Tortoise Inc
<input type="checkbox"/>	42	111685350	02/19/1992	0552700	MN	Complaint	4142	2	Voight Motor Coach, Inc.
<input type="checkbox"/>	43	115060360	01/07/1992	0751910	LA	Complaint	4142	4	Burlington Trailways
<input type="checkbox"/>	44	105633085	12/02/1991	0854910	UT	FollowUp	4142		Le Bus Inc
<input type="checkbox"/>	45	114981322	10/31/1991	0551800	TN	Complaint	4142	5	Shop Busses Incorporated
<input type="checkbox"/>	46	108262007	10/24/1991	1054116	OR	Complaint	4142	13	York Tours Inc
<input type="checkbox"/>	47	115768749	10/01/1991	1054111	OR	Complaint	4142	10	Western Greyhound Lines Company
<input type="checkbox"/>	48	111630450	05/20/1991	0552700	MN	Planned	4142	15	Voigt'S Bus Service, Inc
<input type="checkbox"/>	49	105634349	05/13/1991	0854910	UT	Complaint	4142	11	Le Bus
<input type="checkbox"/>	50	111788600	04/01/1991	0950612	CA	Accident	4142	2	Bay Rapid Transit Company
<input type="checkbox"/>	51	111828844	04/01/1991	0950614	CA	Complaint	4142	6	Durham Transportation Co.
<input type="checkbox"/>	52	111824686	09/14/1990	0950614	CA	Complaint	4142	4	Bay Area Bus Service
<input type="checkbox"/>	53	111777181	08/10/1990	0950612	CA	Complaint	4142		Sierra Valley Lines
<input type="checkbox"/>	54	108177585	06/12/1990	0950411	AZ	Complaint	4142	5	Marshall American Travels
<input type="checkbox"/>	55	107867780	03/28/1990	0855610	WY	Planned	4142	3	Powder River Transportation Service, Inc.
<input type="checkbox"/>	56	103144515	02/22/1990	0523300	WI	Complaint	4142	3	Sam Van Calder, Inc.

<input type="checkbox"/>	57	102740545	12/22/1988	0112000	CT	Complaint	4142	2	New Britain Transportation Company
<input type="checkbox"/>	58	000871632	10/13/1988	0317740	PA	Complaint	4142	9	Trans Bridge Lines, Inc.
<input type="checkbox"/>	59	000866525	10/13/1988	0317740	PA	Complaint	4142	3	Trans Bridge Lines, Inc.
<input type="checkbox"/>	60	100482306	04/01/1988	0214500	NJ	Complaint	4142	1	Leisure Time Tours
<input type="checkbox"/>	61	106106156	03/22/1988	0418800	FL	Accident	4142		Sun Buses Inc.
<input type="checkbox"/>	62	105677017	03/03/1988	0355112	VA	Complaint	4142	6	Gallop Bus Lines, Inc.
<input type="checkbox"/>	63	003006012	06/01/1987	0453710	NC	Accident	4142	3	Tran-Service, Inc.
<input type="checkbox"/>	64	103659173	02/03/1987	1050210	AK	Complaint	4142	1	Tundra Tours Inc.
<input type="checkbox"/>	65	017813981	01/20/1987	0213100	NY	Complaint	4142	4	Mountainview Coach Lines, Inc.
<input type="checkbox"/>	66	100192715	04/17/1986	0213900	NJ	Complaint	4142		Star Tours, Inc.
<input type="checkbox"/>	67	017808528	04/03/1986	0213100	NY	Complaint	4142	2	Mountain View Coach Lines Inc
<input type="checkbox"/>	68	100449974	02/19/1986	0111400	MA	FollowUp	4142		Tec Fab, Inc.
<input type="checkbox"/>	69	014855043	04/15/1985	0352440	MD	Complaint	4142		Gold Line Inc
<input type="checkbox"/>	70	001990217	01/09/1985	0316700	PA	Complaint	4142		B & W Bus Service Inc
<input type="checkbox"/>	71	000662858	09/06/1984	0213400	NJ	Planned	4142		Rogers Transfer Inc
<input type="checkbox"/>	72	014892848	06/28/1984	0552700	MN	Planned	4142	5	Lorenz Bus Service
<input type="checkbox"/>	73	001771542	04/13/1984	0317500	PA	Complaint	4142		T T T Inc
<input type="checkbox"/>	74	010144939	11/23/1983	0111400	MA	Planned	4142	5	Commonwealth Coach Inc
<input type="checkbox"/>	75	217979715	11/15/1983	0854910	UT	Planned	4142	2	Tag A Long Tours
<input type="checkbox"/>	76	218227387	07/26/1983	0953220	NV	Planned	4142	12	Las Vegas Tonopah Reno Stage
<input type="checkbox"/>	77	218245025	07/26/1983	0953220	NV	Planned	4142		Las Vegas Tonopah Reno Stage
<input type="checkbox"/>	78	011554821	06/14/1983	0214700	NY	Complaint	4142	3	Winston Coach Inc
<input type="checkbox"/>	79	013191902	04/05/1983	0453710	NC	Planned	4142	3	Coastal Plain Charter Bus Serv
<input type="checkbox"/>	80	010491605	03/09/1983	0112000	CT	Complaint	4142	3	Arrow Lines Inc
<input type="checkbox"/>	81	014204085	11/15/1982	0453710	NC	Planned	4142	6	Piedmont Coachlines Inc
<input type="checkbox"/>	82	217974278	06/09/1982	0854910	UT	Planned	4142		Lewis Brothers Stages Inc
<input type="checkbox"/>	83	01154618	03/10/1982	0751910	LA	Complaint	4142		Marshall Motor Coach
<input type="checkbox"/>	84	011408200	09/01/1981	0214200	NJ	ProgRelated	4142		Rogers Transfer Inc
<input type="checkbox"/>	85	010490725	08/13/1981	0112000	CT	Accident	4142	1	Chicamo Bus Co
<input type="checkbox"/>	86	013805270	03/11/1981	0436200	AL	Planned	4142		Gulf Transport Co
<input type="checkbox"/>	87	010631695	02/26/1981	0112600	MA	Complaint	4142	1	Longueil Transportation Inc
<input type="checkbox"/>	88	011408051	09/05/1980	0214200	NJ	ProgRelated	4142		Rogers Transfer Inc
<input type="checkbox"/>	89	013827712	05/27/1980	0436200	AL	FollowUp	4142	5	Gulf Transport Co
<input type="checkbox"/>	90	013798418	04/08/1980	0436200	AL	Complaint	4142	1	Gulf Transport Co
<input type="checkbox"/>	91	018758276	11/07/1979	0418800	FL	Complaint	4142		Aero Inc Gray Line Airport
<input type="checkbox"/>	92	011407996	08/14/1979	0214200	NJ	ProgRelated	4142		Rogers Transfer Inc
<input type="checkbox"/>	93	010136695	03/24/1978	0111400	MA	Complaint	4142	1	Tromely Motor Coach

<input type="checkbox"/>	94	011411774	08/16/1977	0214200	NJ	ProgRelated	4142	1	Rogers Transfer Inc
<input type="checkbox"/>	95	010700938	01/18/1977	0213100	NY	Complaint	4142		Page Airways of Albany Inc
<input type="checkbox"/>	96	013004379	01/04/1977	0317700	PA	Complaint	4142	8	Delaware Valley Transportation
<input type="checkbox"/>	97	010739803	11/29/1976	0213100	NY	FollowUp	4142		Page Airways of Albany Inc
<input type="checkbox"/>	98	010532687	08/10/1976	0112000	RI	Complaint	4142	15	Senior Citizens Transportation
<input type="checkbox"/>	99	011340510	08/06/1976	0214200	NJ	ProgRelated	4142		Rogers Transfer Inc
<input type="checkbox"/>	100	015667215	07/07/1976	0524500	IL	FollowUp	4142		Illinois Highway Transportation
<input type="checkbox"/>	101	010739498	05/17/1976	0213100	NY	FollowUp	4142	1	Page Airways of Albany Inc
<input type="checkbox"/>	102	010739456	04/26/1976	0213100	NY	Complaint	4142	8	Page Airways of Albany Inc
<input type="checkbox"/>	103	013376728	01/16/1976	0418800	FL	Planned	4142		A-1 Bus Lines Inc
<input type="checkbox"/>	104	013376629	12/16/1975	0418800	FL	Planned	4142	6	A-1 Bus Lines Inc
<input type="checkbox"/>	105	010725612	11/07/1975	0213100	NY	Planned	4142	7	Yankee Trails Inc
<input type="checkbox"/>	106	015665532	08/21/1975	0524500	IL	Planned	4142	21	Illinois Highway Transportation
<input type="checkbox"/>	107	010679751	12/23/1974	0112600	MA	Planned	4142	7	Longueil Transportation Inc
<input type="checkbox"/>	108	012866406	03/20/1973	0317500	PA	Planned	4142	1	O D Anderson Inc

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**Establishment Search Inspection Detail**Definitions

Inspection: 115174955 - Western States Bus Services Inc

Inspection Information - Office: Washington Region 6			
Nr: 115174955 Report ID: 1055360 Open: 01/28/1999			
Western States Bus Services Inc	Nr Employees: 0		
Riverside School Bus Garage	Nr Controlled: 0		
Chattaroy, WA 99003	Union Status: NonUnion		
SIC: 4142/Bus Charter Service, Except Local	LWDI Rate:		
Mailing: 34515 N Newport Hwy Ste 100, Chattaroy, WA 99003			
Inspection Type: Complaint	Employees Covered: 0		
Scope: Complete	Advance Notice: N		
Ownership: Private			
Safety/Health: Safety	Close Conference: 01/28/1999		
Opt Report Nr: S77379295	Close Case: 03/12/1999		
Related Activity: Type	ID	Date	Safety Health
Complaint	077379295	01/21/1999	Yes

	Violation Summary					Total
	Serious	Willful	Repeat	Other	Unclass	
Nr Violations				1		1
Penalty Amount						
FTA Amount						

Violation Items									
ID	Type	Standard	Issuance	Abate	Curr\$	Init\$	Fta\$	Contest	LastEvent
1	Other	0620540901 A	02/12/1999	03/17/1999	0.00	0.00	0.00		

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Inspection Detail Definitions

This page provides descriptions for the information contained on the inspection detail page. The data collected as the result of an inspection is always subject to revision and correction. All data should be interpreted with that proviso.

Inspection Information

This section provides information regarding the establishment being inspected, and other basic information collected for every inspection.

Activity Nr	Provides a unique identifier for the inspection.
Report ID	Identifies the OSHA office or organizational unit responsible for the inspection.
Open Date	Indicates when the inspection was started.
CSHO/Job Title	Identifies the individual responsible for conducting the inspection.
Site Address	Identifies the site location where the inspection was performed.
Mailing Address	Identifies the mailing address for the organization being inspected when differing from site address.
SIC	Indicates the 4-digit Standard Industrial Classification Code from the 1987 version SIC manual which most closely applies.
Nr Employees	Indicates number employed at worksite inspected.
Nr Controlled	Indicates number of employees, nationwide, controlled by employer inspected.
Union Status	Indicates whether employees covered by inspection were affiliated with a union.
LTDI Rate	Indicates the lost workday injury rate posted at time of inspection.
Inspection Type	Indicates the impetus for actually performing the inspection; e.g., may be part of a planned schedule, accident, complaint, etc.
Scope	Indicates whether a complete, partial or records only inspection was performed; may also indicate no inspection if for some reason the inspection could not take place.
Ownership	Indicates whether inspection was in private or public sector.
Safety/Health	Indicates whether safety or health issues were the focus of the inspection.
Local Emphasis	Indicates whether specific office dependent initiatives were present when performing the inspection.
National Emphasis	Indicates whether special OSHA wide initiatives were present when performing the inspection.
Planning Guide	Indicates that this inspection was planned from information contained in a planning guide; the guide is associated with high hazard industry groups.

Nr Covered	Indicates number of employees covered by the inspection.
Advance Notice	Indicates whether advance notice was given of the pending inspection.
Hours Spent	Indicates number of manhours associated with the inspection.
Close Conference	Indicates the ending date of the onsite portion of the inspection.
Close Case	Indicates the date on which all activity associated with the inspection ceased.
Optional Information	Indicates additional information recorded for the inspection.
Related Activity	Indicates a related complaint, accident, referral or another inspection.

Violation Information

This section provides information regarding OSHA standards which were cited including penalty dollar amounts, contest information and abateements

Nr Violations	Total does not include violations which were deleted due to a settlement or judicial action. Violations which are grouped (see below) are only counted once as a group rather than individually for each standard cited.
Penalty Amount	Total represents the amount currently assessed for the inspection. This may differ from the Initial Penalty if settlement or judicial actions resulted in reductions.
FTA Amount	Total represents Failure To Abate assessment resulting when the violations were not abated during the abatement period specified on the citation.
Delete Flag	The letter 'D' will be displayed at the beginning of each detail line if the violation item was deleted as the result of settlement or judicial action.
Citation ID	Provides a unique identifier for the violation. Consists of a 2-digit Citation Nr, followed by a 3-digit Item Nr, followed optionally by a 1 or 2 letter indicator if the violation item is part of a group. Violations may be grouped when 2 or more violations together form a more serious hazard than either one individually.
Violation Type	Indicates: Willful, Repeat, Serious, Other, or Unclassified. Provides an indication of the degree of severity of the hazard found.
Standard	Indicates the OSHA standard being cited. The standard may be either Federal or State in the case of states which run their own OSHA.
Issuance Date	Represents the date the citation was issued to the employer.
Abatement Date	Represents the date by which the violation must be corrected.
Current Penalty	Represents the amount currently assessed for the violation. This may differ from the Initial Penalty if settlement or judicial actions resulted in reductions.
Initial Penalty	Represents the amount initially assessed when the citation was first issued to the employer.
Failure to Abate Penalty	Represents Failure To Abate assessment resulting when the violation was not abated during the abatement period specified on the citation.
Contest Date	Represents the date the violation was contested by the employer.

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Event Code	Represents a settlement or judicial action which occurred
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Accident Information

This section provides definitions for the accident injury information collected during the course of an accident related inspection.

Summary Nr	Provides an unique identifier for the accident investigation. This investigation may be linked to several inspections, e.g., if there were multiple contractors at a construction site.
Event Date	Indicates the date on which the accident occurred.
Event Description	Provides a short one line description of the accident.
Event Abstract	Provides a summary of the accident
Inspection Nr	Provides for each injury a link to the corresponding inspection
Age	Indicates the age of the injured person.
Sex	Indicates the sex of the injured person.
Degree of injury	Indicates whether the injured person was killed, hospitalized, or non-hospitalized injury
Nature of injury	Indicates the nature of the injury.
Occupation	Indicates the occupation of the injured person.

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OSHA

Occupational Safety & Health Administration
U.S. Department of Labor



Standards Cited for SIC 4142; 1 - 99 employees; Federal

No Standards cited for SIC 4142

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**Standards Cited for SIC 4142; 100 - 249 employees; Federal***4142 Bus Charter Service, Except Local*

Listed below are the standards which were cited by Federal OSHA for the specified SIC during the period October 1997 through September 1998. Penalties shown reflect current rather than initial amounts. For more information, see definitions.

Standard	#Cited	#Insp	\$Penalty	Description
Total	6	1	4000.00	
1910.133	1	1	2000.00	Personal Protective Equipment, General Requirements
1910.133	1	1	0.00	Eye & Face Protection
1910.136	1	1	0.00	Occupational Foot Protection
1910.138	1	1	0.00	Hand Protection
1910.159	1	1	2000.00	Medical Services & First Aid
1910.160	1	1	0.00	Hazard Communication

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**Standards Cited for SIC 4142; 250+ employees; Federal***4142 Bus Charter Service, Except Local*

Listed below are the standards which were cited by Federal OSHA for the specified SIC during the period October 1997 through September 1998. Penalties shown reflect current rather than initial amounts. For more information, see definitions.

Standard	#Cited	#Insp	\$Penalty	Description
=Total=	12	1	7700.00	
1910.15	2	1	1100.00	Portable Fire Extinguishers
1910.212	2	1	1100.00	Abrasive Wheel Machinery
1910.136	1	1	1100.00	Means of Egress, General Requirements
1910.137	1	1	0.00	Means of Egress, General
1910.150	1	1	0.00	Storage & Handling of Liquefied Petroleum Gases
1910.213	1	1	1100.00	Machines, General Requirements
1910.244	1	1	1100.00	Other Portable Tools & Equipment
1910.253	1	1	1100.00	Oxygen-Fuel Gas Welding & Cutting
1910.333	1	1	0.00	Electrical Systems Design, General Requirements
1910.334	1	1	1100.00	Electrical, Use of Equipment

Last updated on 9/11/04

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**Standards Cited for SIC 4142; All sizes; Federal***4142 Bus Charter Service, Except Local*

Listed below are the standards which were cited by Federal OSHA for the specified SIC during the period October 1997 through September 1998. Penalties shown reflect current rather than initial amounts. For more information, see definitions.

Standard	#Cited	#Insp	SPenalty	Description
1910.157	2	2	11700.00	Portable Fire Extinguishers
1910.158	2	1	1100.00	Abrasive Wheel Machinery
1910.159	2	1	1100.00	Means of Egress, General Requirements
1910.160	1	1	1200.00	Means of Egress, General
1910.161	1	1	0.00	Storage & Handling of Liquefied Petroleum Gases
1910.162	1	1	0.00	Personal Protective Equipment, General Requirements
1910.163	1	1	1000.00	Eye & Face Protection
1910.164	1	1	0.00	Occupational Foot Protection
1910.165	1	1	0.00	Hand Protection
1910.166	1	1	2000.00	Medical Services & First Aid
1910.167	1	1	1100.00	Machines, General Requirements
1910.168	1	1	1200.00	Other Portable Tools & Equipment
1910.169	1	1	1100.00	Oxygen-Fuel Gas Welding & Cutting
1910.170	1	1	0.00	Electrical Systems Design, General Requirements
1910.171	1	1	1100.00	Electrical, Use of Equipment
1910.172	1	1	0.00	Hazard Communication

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Standards Cited for SIC 4142; 1 - 99 employees; Federal

No Standards cited for SIC 4142

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