

STATE OF CALIFORNIA
DEPARTMENT OF INDUSTRIAL RELATIONS

In the Matter of:)
OSHA Standards Board Meeting)
_____)

CERTIFIED COPY

PUBLIC MEETING, PUBLIC HEARING, AND BUSINESS MEETING
OF THE OCCUPATIONAL SAFETY AND HEALTH STANDARDS BOARD

HYBRID MEETING VIA WEBEX AND IN-PERSON

RANCHO CORDOVA CITY HALL
American River Room
2729 Prospect Park Drive
Rancho Cordova, California 95670

Thursday, December 19, 2024

Reported by:

MARCENA M. MUNGUIA,
CSR No. 10420

Job No.:
52367DIR-OSHSB (Rev)

STATE OF CALIFORNIA

DEPARTMENT OF INDUSTRIAL RELATIONS

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OSHA Standards Board Meeting)
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Transcript of Proceedings, reported via Webex
Videoconference, commencing at 10:00 a.m. and
concluding at 4:58 p.m., on Thursday, December 19,
2024, heard before the State of California Department
of Industrial Relations Occupational Safety and
Health Standards Board, reported by Marcena M.
Munguia, CSR No. 10420, a Certified Shorthand
Reporter in and for the State of California.

1 APPEARANCES

2
3 BOARD MEMBERS PRESENT IN RANCHO CORDOVA:

4 Joseph M. Alioto, Jr., Chairman

5 Kathleen Crawford, Management Representative

6 Dave Harrison, Labor Representative

7 Nola J. Kennedy, Occupational Health Representative

8 Chris Laszcz-Davis, Management Representative

9 Dave Thomas, Labor Representative

10 Derek Urwin, Occupational Safety Representative

11
12 BOARD STAFF PRESENT IN RANCHO CORDOVA:

13 Millicent Barajas, Executive Officer

14 Autumn Gonzalez, Chief Counsel

15 Kelly Chau, Attorney

16 Amalia Neidhardt, Principal Safety Engineer

17 Maryrose Chan, Senior Safety Engineer

18 Sarah Money, Executive Assistant

19
20 BOARD STAFF PRESENT VIA TELECONFERENCE AND/OR WEBEX:

21 Michelle Iorio, Attorney

22 Michael Nelmidia, Senior Safety Engineer

23 Simone Sumeshwar, Senior Safety Engineer

24 Jesi Mowry, Administration & Personnel Support Analyst

1 APPEARANCES

2
3 DEPARTMENT OF INDUSTRIAL RELATIONS STAFF PRESENT IN
4 RANCHO CORDOVA:

5 Katie Hagen, Director
6

7 CAL/OSHA STAFF PRESENT IN RANCHO CORDOVA:

8 Eric Berg, Deputy Chief of Health

9 Michael Wilson, Senior Safety Engineer
10

11 Cal/OSHA STAFF PRESENT VIA WEBEX:

12 Kevin Graulich, Principal Safety Engineer

13 Christine Hoffman, Senior Safety Engineer
14

15 TKO STAFF:

16 Conner Helm

17 Sean Acrea

18 John Roensch
19

20 SPANISH INTERPRETERS:

21 Lourdes Alcala

22 AnaElvia Sanchez
23
24
25

1
2 APPEARANCES

3 PUBLIC COMMENTERS:

4 PUBLIC COMMENT RE: DIRECTOR HAGEN'S PRESENTATION,
5 RECRUITMENT AND HIRING:

6 Pamela Murcell, California Industrial Hygiene Council

7 Bruce Wick, Housing Contractors of California

8 Michael Miiller, California Association of Winegrape
9 Growers

10 Maegan Ortiz, IDEPSCA

11 PUBLIC HEARING RE: TITLE 8 CONSTRUCTION SAFETY ORDERS,
12 SECTION 1635, CONE AND BAR BARRICADES:

13 Greg McClelland, Western Steel Council

14 Michael Donlon, Construction Employers Association

15 Kevin Bland, Ogletree Deakins, representing the
16 California Framing Contractors, the Residential
17 Contractors Association, and the Western Steel Council

18 Len Welsh, Ironworkers Management Progressive Action
19 Cooperative Trust

20 PUBLIC COMMENT RE: TITLE 8 GENERAL INDUSTRY SAFETY
21 ORDERS, SECTION 5204, OCCUPATIONAL EXPOSURES TO
22 RESPIRABLE CRYSTALLINE SILICA:

23 Don Schinske, WOEMA

24 Pamela Murcell, California Industrial Hygiene Council

25 Dave Smith, Safety Consultant

Adam Harper, California Construction and Industrial
Materials Association

Alice Berliner, L.A. County Department of Public Health

Renee Guerrero Deleon, Southern California Coalition
for Occupational Safety and Health, SoCalCOSH

1 APPEARANCES

2 PUBLIC COMMENT RE: TITLE 8 GENERAL INDUSTRY SAFETY
3 ORDERS, SECTION 5204, OCCUPATIONAL EXPOSURES TO
4 RESPIRABLE CRYSTALLINE SILICA (cont'd):

5 David Harrington, Retired Cal/OSHA

6 Jim Hieb, Natural Stone Institute

7 Ayan Ortega, Southern California Coalition
8 for Occupational Safety and Health, SoCalCOSH

9 Maegan Ortiz, IDEPSCA

10 Dr. Sally Sadaghiani, WOEMA

11 PUBLIC COMMENT ON NON-AGENDA ITEMS OR TO PROPOSE NEW
12 OR REVISED STANDARDS:

13 Bryan Little, California Farm Bureau

14 Ron Grubb, Phylmar Group

15 Helen Cleary, HCC - Safety & Regulatory Compliance
16 Consultant

17 Bruce Wick, Housing Contractors of California

18 AnaStacia Nicol Wright, Worksafe

19 Robert Moutrie, California Chamber of Commerce

20 Ruth Lopez, Valley Voices

21 Maegan Ortiz, IDEPSCA

22 Dave Smith, Safety Consultant

23 Pamela Murcell, California Industrial Hygiene Council

24 Ayan Ortega, Southern California Coalition
25 for Occupational Safety and Health, SoCalCOSH

Renee Guerrero Deleon, Southern California Coalition
For Occupational Safety and Health, SoCalCOSH

Jorge Luna Monterrey, Valley Voices

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1 Thursday, December 19, 2024

2 10:00 a.m.

3
4
5 CHAIR ALIOTO: Good morning, everybody, and thank you
6 all for coming. This meeting of the Occupational Safety
7 and Health Standards Board is now called to order.

8 Having done that, I want to first wish everybody
9 a happy holidays. We haven't seen you since before
10 Thanksgiving. I hope that you and all of your families
11 had a wonderful Thanksgiving and will continue to have a
12 great holiday through the course of the remaining month.

13 We're going to start this meeting. I'm going to
14 ask all to stand and join me in reciting the Pledge of
15 Allegiance.

16 (Pledge of Allegiance)

17 CHAIR ALIOTO: All right. My name is Joseph M.
18 Alioto Junior. I am the Chairman, and the other Board
19 Members that are present here in Rancho Cordova here with
20 me today are: Kathleen Crawford, Management
21 Representative; Dave Harrison, Labor Representative; Nola
22 Kennedy, Occupational Health Representative; Chris
23 Laszcz-Davis, Management Representative; Dave Thomas,
24 Labor Representative; and Derek Urwin, Occupational
25 Safety Representative. It's good to have everybody here.

1 Director Katie Hagen is also joining us in
2 person.

3 Good morning, Director Hagen.

4 And present from the Board staff for today's
5 meeting are: Millie Barajas, our Executive Officer;
6 Autumn Gonzalez, Chief Counsel; Kelly Chau, Attorney;
7 Amalia Neidhardt, Principal Safety Engineer; Maryrose
8 Chan, Senior Safety Engineer; and Sarah Money, our
9 incomparable Executive Assistant.

10 Present in Rancho Cordova from Cal/OSHA today
11 is: Eric Berg, Deputy Chief of Health for Cal/OSHA; and
12 Michael Wilson, Senior Safety Engineer.

13 Welcome to you both.

14 The Cal/OSHA staff members present via WebEx
15 are: Kevin Graulich, Principal Safety Engineer; and
16 Christine Hoffman, Senior Safety Engineer, though Kevin I
17 think is here in person.

18 The Board staff supporting the meeting remotely
19 are: Michelle Iorio, Attorney; Michael Nelmda, Senior
20 Safety Engineer; and Simone Sumeshwar; Jesi Mowry,
21 Administration and Personnel Support Analyst.

22 All right. Copies of the agenda and -- first,
23 welcome to all of you and to all of our visitors today
24 and those who wish to and speak, and we'll talk through
25 that in a moment. Copies of the agenda and other

1 materials related to today's proceedings are available on
2 the table near the entrance to the room and are posted on
3 the OSHSB website.

4 This meeting is also being live broadcast via
5 video and audio stream in both English and Spanish.
6 Links to these noninteractive live broadcasts can be
7 accessed via the "Board Meeting Schedule, Notice of
8 Proposals, and Agendas" section on the main page of the
9 OSHSB website.

10 If you are participating in today's meeting via
11 teleconference or via videoconference, we are asking
12 everybody to please place their phones or computers on
13 mute and wait to unmute until you are called to speak.
14 Those who are unable to do so will be asked -- or will be
15 removed from the meeting to avoid disruption.

16 If you are participating via teleconference or
17 videoconference, the instructions for joining the public
18 comment queue can be found on the agenda itself. You may
19 join by clicking the public comment queue link in the
20 "Board Meetings" section on the OSHSB website or by
21 calling the following phone number: (510) 868-2730.
22 And that will allow you to access the automated public
23 comment queue voicemail. If you experience any technical
24 issues with the teleconference or the videoconference,
25 I'm going to give you an email that you can send an email

1 to and describe what's happening. That email address is
2 oshsb@dir.ca.gov.

3 Our non-agenda comment period will take place
4 towards the end of the meeting. For those participating
5 who are not able to attend or have to leave early and
6 would like to make a non-agenda comment, please send your
7 written comment to -- I'm going to give you another email
8 address -- OSHSB_NAComments@dir.ca.gov.

9 Now, just briefly on this, this will allow you
10 if you are -- the non-agenda public comment section of
11 this meeting will happen at the end. This is going to be
12 a long meeting. That's going to be in about three or
13 four hours. If you cannot make and cannot wait until
14 that time, go ahead and send your comments to that email
15 website and we will read those comments into the record
16 at the time of the non-agenda public comments section.

17 Okay. That email one more time, OSHSB_N, as in
18 Nancy, A, as in alpha, Comments@dir.ca.gov.

19 All right. Please have those sent in and
20 time-stamped by 10:45 this morning. That's in 45 minutes
21 or so, and anything that's -- anything that's delivered
22 to that email address after 10:45, we cannot assure that
23 that will be read into the record during the appropriate
24 time during this meeting, but it will make its way into
25 the written record. So go ahead and send us your

1 comments.

2 All right. Please limit your comments to 500
3 words, if you're writing something into an email like
4 that, and an OSHSB staff will read it into the record, as
5 I just described.

6 For our participants who are native Spanish
7 speakers, we are working with Amalia Neidhardt to provide
8 interpretation into English for the Board.

9 At this time, Amalia Neidhardt will provide
10 introductions and instructions to the Spanish-speaking
11 commenters.

12 Ms. Neidhardt?

13 (Introductions and instructions given
14 in Spanish)

15 CHAIR ALIOTO: Thank you, Amalia.

16 All right. Before we continue with the agenda,
17 I just want to get a feel for timing. I think this
18 might -- has the potential to be a pretty long meeting.

19 So I want to first find out from folks in
20 person, if you could just give me by show of hands
21 whether you are going to be looking to comment on the
22 public hearing with respect to the Cone and Bar
23 Barricades.

24 Anybody present that's going to be talking about
25 that? Okay. One commenter. Two. Two commenters?

1 Okay. Great. And then folks, if you are online
2 and you are interested in making a comment about Cone and
3 Bar Barricades, would you kindly raise your hand on
4 the -- on the videoconference so we can get a count of
5 how many folks are looking to do that.

6 MR. ACREA: I don't see any hands raised online.

7 CHAIR ALIOTO: Okay. How about if you plan to talk
8 at all about silica today? If you have a public comment
9 on the silica vote, if you're present here, would you
10 mind raising your hand? Okay. Just a couple?

11 How about online, if you could raise your hand
12 online.

13 MR. ACREA: I see seven as of right now, seven
14 hands raised.

15 CHAIR ALIOTO: Let's give that a couple minutes.
16 Folks are clicking in. Again, this is if you wish to
17 make a public comment. I'm just trying to get a count
18 here, if you wish to make a public comment during Silica.
19 It looks like about eight.

20 All right. And then finally, if you could put
21 your hands down online -- thank you for doing that -- and
22 then anybody who wishes -- who is online who wishes to
23 make any kind of public comment that's not on the agenda
24 towards the end, would you mind raising your hand.

25 All right. Thank you, folks. That looks to be

1 about eight; 16, 20, 25. Let's call it 25.

2 All right. And then folks that are present
3 looking to make a comment on non-agenda items, a quick
4 raise of the hand? Oh, we have a few here. Okay. Raise
5 them up high, please. Okay. I've got it.

6 All right. So we're going to have a pretty long
7 meeting today. We're going to limit public comments to
8 two minutes per person and if you could, please abide by
9 that. And then for Spanish-speaking folks who require
10 translation, they'll have four minutes. I think you
11 already translated it as such, so I think we're good
12 there, and let's proceed with the agenda.

13 Director Hagen, thank you so much for coming.

14 DIRECTOR HAGEN: Yes. Thanks for having me. Good
15 morning, everybody.

16 CHAIR ALIOTO: Good morning.

17 DIRECTOR HAGEN: If I can get my PowerPoint up here.
18 All right. Is it working? Oh, it is. I went too fast.

19 All right. Well, thanks again for having me.
20 And I want to apologize to those of you who attended the
21 CHSWC meeting last week. This may be a repeat of what
22 you heard from me there, but last week I spoke about DWC
23 as well as Cal/OSHA and today's presentation is focused
24 mainly on Cal/OSHA, so I will do my best.

25 All right. So I wanted to show a chart first

1 off. Everybody likes numbers, and what this is is the
2 vacancy rate for Cal/OSHA and for DIR. I believe the
3 lower line is the DIR and so what that includes is sort
4 of the rest of DIR, all the divisions, the independent
5 boards and commissions, and then Cal/OSHA has its own
6 line; and what I like about this particular chart is it's
7 about 18, 20 months' worth of data that I'm tracking and
8 you can see a couple years ago, we were at 35, 38 percent
9 vacancy rate for Cal/OSHA and steadily it has been
10 declining.

11 We've been slowly bringing down the vacancy rate
12 and what's significant about this is during that period
13 of time, we've received a large number of new positions
14 in the budget change proposal process either that we
15 requested or that accompanied legislation, new
16 legislation. I believe we had approximately 55 bills we
17 had to implement two years ago, about 35 bills this last
18 year. So there's quite a few -- a couple hundred every
19 year, it feels like, throughout DIR, new positions to
20 implement those various new laws.

21 And then we also have attrition. Like everybody
22 else, we have turnover in the organization and so I'm
23 really proud of the team that, you know, over the last
24 couple of years, they've steadily brought that number
25 down. I would say in the last six months, it's

1 definitely going in the right direction. Debra Lee and
2 her team are doing a great job at keeping the emphasis on
3 hiring throughout the organization.

4 And you'll notice that DIR number is not quite
5 as impressive, but we are going down, but it is a lower
6 rate if you look at the other divisions and I want to
7 talk about why we still struggle to some extent with
8 Cal/OSHA vacancies. I'll talk about that during my
9 presentation.

10 So I thought I would start with challenges that
11 we're facing in Cal/OSHA and then some of the strategies
12 that we're implementing in order to address those
13 challenges.

14 So one of the biggest reasons that CalHR --
15 excuse me. I'm already jumping ahead to my discussion
16 about CalHR. The reason that Cal/OSHA struggles
17 frequently is we have candidates that don't necessarily
18 meet the minimum qualifications for the classification.

19 So we've got a big marketing campaign out there.
20 Folks are, you know, word of mouth. Everybody knows
21 we're hiring, but often the folks find they don't meet
22 the minimum qualifications. There's educational and
23 experience requirements and so we find that that's a big
24 challenge, continues to be a challenge for us, and it's
25 very restrictive. Our candidate pools are small because

1 of the way the minimum qualifications are outlined for
2 the engineer and the industrial hygienists
3 classifications. So that's one challenge.

4 And then another challenge specifically is
5 bilingual engineers. So if we're lucky enough to find an
6 engineer, you know, we try to find folks that speak
7 various languages to help us communicate more effectively
8 with the workers that we serve and unfortunately, it's
9 very hard to find bilingual engineers. We have quite a
10 few Spanish speakers, fortunately, within Cal/OSHA, but
11 it's very difficult to find Spanish and/or many other
12 languages that we actively recruit for.

13 Finding industrial hygienists altogether is very
14 challenging, specifically in certain geographic areas.
15 Rural areas, we're trying to stand up an agricultural
16 effort in the Central Valley. We've got offices that --
17 new offices that we're opening with Cal/OSHA and Labor
18 Commissioner staff and it's very challenging to try to
19 find safety engineers and industrial hygienists that
20 either live in those areas or are willing to relocate to
21 those areas.

22 So those are our core challenges and so I
23 thought I would start talking a little bit about what
24 we're doing to try to meet those challenges.

25 So you may or may not be aware that we have

1 emergency hiring authority and that's fairly unique in
2 Civil Service. The only other department that I'm aware
3 of that was awarded emergency hiring by the legislature
4 was DMV when they were getting the new driver's licenses
5 up a couple years ago. I forget what that was called.
6 Yeah. And so they were given temporary emergency hiring
7 authority and basically it's a temporary hire.

8 It sounds wonderful, but like most things in
9 Civil Service, it's complicated to implement. And so
10 it's a temporary hire. You don't -- the good news is you
11 don't have to be on a certification list. You don't even
12 have to meet the minimum qualifications. It's
13 generally -- it's just an emergency hire. I can say,
14 "You, you're hired and we appoint you." There's no sort
15 of screening criteria at all that's required to appoint
16 someone and it's meant for temporary work up to nine
17 months.

18 So what that means is if we were able to hire
19 some folks on an emergency basis -- and we have. We've
20 begun to hire. I think we've hired about 16 I think so
21 far in Cal/OSHA -- we -- unfortunately, they still have
22 to go through the merit-based hiring process in order to
23 get appointed permanently. So it's truly -- my hope had
24 been initially that we could just sort of roll them in to
25 a permanent position, but alas, you cannot do that with

1 the merit-based hiring process. You have to compete for
2 the job. So -- but we are looking at glass half full and
3 really trying to find situations in which we can grab
4 some people quickly.

5 We've done a couple hire-in-person events where
6 we were able to hire some folks. I believe the classes
7 in Cal/OSHA -- we're using the Labor Commissioner and the
8 Cal/OSHA's office and for Cal/OSHA, I believe we're
9 focusing on clerical support because the period of time
10 to train them is minimal compared to, you know, perhaps
11 an industrial hygienist or a safety engineer and we
12 desperately need clerical support to help us with our
13 mailings and, you know, processing citations and the
14 like.

15 So we have had some luck in hiring office
16 tech-level emergency hires and a few senior IHs that
17 are -- that happen to be going through the merit-based
18 hiring process as well. We were able to appoint them as
19 emergency hire while they go through that process.

20 So we intend to continue to expand the use of
21 this emergency hiring. I believe we have a couple years
22 until it expires and we'll see, you know, if that helps
23 us with our temporary need going forward, but the one
24 downside to it, unfortunately, as well is these are, in
25 State vernacular, blanket hires, which means there's no

1 authorized positions associated with them. So we have to
2 watch our budget like everyone and once we begin to fill
3 all of our permanent positions, we're not going to have
4 the budget necessarily to continue to hire emergency
5 hires; right? We're filling -- using that budget funding
6 for these.

7 So we're also adding support staff capacity in
8 Cal/OSHA and DIR/HR to support hiring managers. One of
9 the things that Cal/OSHA had had trouble sort of
10 increasing the volume of its hiring efforts over the last
11 couple of years is because the managers of the field
12 offices and district offices and enforcement were super
13 busy; right? They're supervising their staff. They're
14 rolling out, overseeing, you know, complicated
15 investigations and they just didn't have the capacity to
16 do all of that, plus hiring.

17 So we've added a whole new Recruitment and
18 Hiring Unit within the Enforcement Branch of Cal/OSHA and
19 then we've added HR staff at the headquarters to be
20 able to review and approve all of those merit-based
21 hiring packages that come up.

22 So we're hoping that alleviates some of the sort
23 of the support work associated with hiring for the field
24 managers and if anything, it also allows us to get out
25 and do more recruitment, in-person recruitment than we

1 had been doing, as well, before. So it's nice to have
2 that capacity.

3 The next strategy is probably one of the more
4 significant ones and that is working on a class
5 specification change in 2025 and, in fact, I just got an
6 email on my way here today that we're good to go to start
7 the study next month.

8 So we had been focused -- we've been working
9 with a vendor focused on the Labor Commissioner's
10 two-class series first. We've been doing that for the
11 last six months with a vendor where we've redesigned the
12 minimum qualifications, we've reduced the educational
13 requirements and some of the experience requirements so
14 that we can open up the candidate pool, and we intend to
15 do the same sort of assessment and review of all of the
16 Cal/OSHA classifications starting in January.

17 And so that -- I don't know if that will mean
18 reducing our educational requirements. It could in a
19 sort of training capacity classification. At the lower
20 level, we could offer some sort of training program if
21 they don't have a degree. That's yet to be established
22 or worked out, but we are trying to look for
23 opportunities to bring people in at all levels,
24 including or not excluding potentially an apprentice
25 classification that I would like to try to tackle.

1 So we have that class study with our vendor.
2 Probably that will take three to four months. We do --
3 we work closely with the people actually doing the jobs
4 to get an idea of what their day-to-day work is, we do
5 sort of desk audits as part of that process, and then
6 from there we will make proposed changes to the class
7 spec changes in keeping -- making sure that it still
8 describes the job that was established probably in 1978;
9 right? The jobs have changed a lot in the years these
10 classes were created.

11 And so once we finalize the class spec, we'll
12 send it to our control agency, CalHR. They will review
13 it along with a salary study that's a part of the
14 process.

15 Once we get to a point where they're comfortable
16 with our proposed changes, CalHR will then work with the
17 unions to discuss what we're proposing. I believe there
18 could be a meet-and-confer as part of that on salary and
19 then eventually, if parties, you know, agree, it will
20 move on to the State Personnel Board where it will be
21 posted for 30 days for public comment and then hopefully
22 approved at that point.

23 So we have a ways to go, if you couldn't tell by
24 that lengthy process, but I'm excited that we're finally
25 in the queue and ready to go with Cal/OSHA and Debra Lee

1 and her team are excited about that as well.

2 While we were waiting for the Labor
3 Commissioner's class spec change project to finalize so
4 that we could start Cal/OSHA's, Cal/OSHA was working with
5 the same vendor but a different group on a workload
6 assessment and what that is is, you know, at many of our
7 public hearings, I hear folks say, you know, "Cal/OSHA
8 just doesn't have enough staff. Even if they filled
9 every position, Cal/OSHA just doesn't have enough staff
10 for the population of California."

11 So what the workload assessment is intended to
12 do is to assess: What do we need for staffing? What is
13 the right number of engineers? What is the right number
14 of industrial hygienists for the State of California in
15 order for us to accomplish our mission to meet federal
16 requirements, et cetera?

17 So that is coming to a conclusion and hopefully
18 in the next budget cycle, we'll be using that as
19 supporting documentation for a budget change proposal to
20 support requesting additional staffing as appropriate,
21 but it's very important for the budget cycle that
22 Cal/OSHA try to fill as many vacancies as we can prior to
23 that. They generally don't like to see a high vacancy
24 rate when you're asking for more positions, which makes a
25 whole lot of sense.

1 I mentioned a marketing campaign. We have been
2 targeting Cal/OSHA and Labor Commissioner vacancies. As
3 I mentioned earlier in our challenges, we're really
4 trying to find those bilingual engineers and industrial
5 hygienists. At this point, we've filled a lot. I won't
6 say the majority. I think we have about 120 enforcement
7 vacancies that still remain across the state. Those
8 aren't all field enforcement. Those are ART. Those are
9 elevator. A lot of those are elevators. It's spread
10 across the division, but we do have 332 active
11 enforcement staff within Cal/OSHA.

12 So just on the marketing campaign, we've been
13 doing it since March. I met with our communications team
14 last week and talked to them about working with our
15 vendor to now narrow the targeting down some more
16 potentially to really get to those industrial hygienists
17 and bilingual engineers because we're getting to a point
18 where we're posting several times for bilingual engineers
19 and we aren't getting very many candidates. So we need
20 to pump up the volume on the marketing for those two.

21 And then we have other industry-specific
22 strategies. We've consistently been working towards like
23 advertising with professional organizations. We've had a
24 number of our Cal/OSHA staff attend conventions and talk
25 to colleagues about joining us. So in addition to

1 marketing, we have a number of other recruitment
2 strategies that are also under way.

3 This is just another slide with some key data.
4 Cal/OSHA had 186 hires in 2024. 64 of those were
5 internal transfers or promotions. Cal/OSHA and the Labor
6 Commissioner are fairly unique in that they are -- it's
7 an entire department-specific series. So our folks, once
8 we hire them, they tend to stay. There isn't a lot of
9 other job opportunities within State service because
10 they're in a Cal/OSHA specific classification and, thus,
11 our separation rate is pretty low, which is good. It's
12 1.9 percent over the last year and that's much lower than
13 what you will see at other State agencies, which is about
14 8 percent separation rate.

15 The number of new positions, just for kicks, I
16 added in there. So you could see for the last four or
17 five years, we got 141 new positions and about 63 million
18 dollars for various legislative and regular program BCPs.

19 And off to the right, I like to present this
20 slide and, boy, I'm pushing my staff for that last number
21 because we're getting down to the wire and I want to
22 exceed the 2022 number. We're really trying to push
23 through. We've got about 29 packages pending just for
24 Cal/OSHA and so I'm hoping we can get those approved by
25 the end of this month, but I wanted to point out the vast

1 difference in a year over year.

2 For those of you who've been around a while, you
3 probably recall 2019 was when the Department lost its
4 hiring authority. There was a special investigation done
5 and it was determined that the Department had made a
6 number of illegal hires inconsistent with the merit
7 principles and the Department lost its hiring authority
8 and that was vested with the CalHR.

9 In 2020, we were still working towards -- I
10 started in March 2020 and a year to the day, in March
11 2021 is when the Department got its hiring authority
12 returned. During that period of time, we had to
13 reestablish every single Civil Service examination that
14 was online. They were all taken down when the Department
15 lost its authority. So most of the hires that you see in
16 2019 and 2020 were done as TAUs, temporary authorization,
17 because there were no examination lists of which to
18 appoint people from.

19 So if you've -- I'm probably speaking State
20 bureaucracy right now, but that's very significant.
21 Essentially, there's no way to legally hire someone when
22 there's no examination cert list. So it was very, very,
23 very disruptive not to have any examinations to the
24 organization and that's why hiring plummeted.

25 In 2021, we started to bring the number back up

1 and recruitment sort of really hit the stride in hiring
2 in 2022. We dipped down in 2023 I -- believe this is
3 just conjecture -- because our pools were diminishing in
4 the Labor Commissioner and Cal/OSHA. We'd done an
5 incredible amount of hiring in 2022, but we sort of
6 started seeing the candidate pool level out in 2023.

7 2024, early 2024 is when we began the marketing
8 campaign and our candidate pool started to go back up
9 again.

10 These are -- the first slide I showed you with
11 challenges and strategies, those are sort of today's
12 challenges and strategies. This slide is meant to sort
13 of comprehensively capture the challenges and strategies,
14 things that we've accomplished or have worked on or are
15 working on in some cases. You know, I mentioned the
16 hiring managers struggle to find time to work on hiring
17 tasks, so we got additional staffing.

18 We acknowledge that our hiring process was
19 over-corrected. Once we got our hiring authority
20 returned to us, we locked that hiring process down pretty
21 significantly because we were concerned. We were on sort
22 of a probationary period with CalHR. We were worried if
23 we messed up, they'd take it away again. So we are in
24 the process of rolling back some of that very restrictive
25 hiring processes and, again, these -- I put these up in

1 these slides to try to address many of the comments I've
2 heard at public hearings and, you know, I hear about this
3 quite often. "You know, why is your process so
4 restrictive?" And it's because of the loss of the hiring
5 authority.

6 We have inherent limitations and challenges with
7 Civil Service merit-based hiring. There are just certain
8 steps, you know, we have to abide by. There's certain
9 time frames that we have to advertise our positions. We
10 must conduct reference checks and file reviews, all of
11 those things. So there's inherent limitations there.

12 I mentioned the small candidate pools. Many of
13 our candidates are unfamiliar with Civil Service hiring
14 altogether. They don't understand. "I have to take an
15 exam? What are you talking about? And the exam is not
16 content based? It's based on my experience?" You know,
17 it does not make sense to a lot of people, so we find
18 that we have to do a lot of education around how to get a
19 State job.

20 And we have launched a webinar. When we started
21 our marketing campaign, we do monthly webinars where we
22 educate people on how to get a job with DIR and those are
23 very, very popular. We have hundreds of people often
24 that will call in on those.

25 We also have limited automation tools.

1 Essentially, we deal with hiring via email. We are in
2 the process currently to automate the hiring process end
3 to end. We're going to use ServiceNow. We've begun the
4 process documenting business requirements and eventually
5 we will get to a point where we have a workflow system
6 and our poor HR analyst won't be getting 10,000 emails
7 a day on a hundred different recruitments. It's very
8 difficult to manage that. It's also difficult for hiring
9 managers to manage everything via email. So we're
10 looking forward to a few months from now when we will
11 hopefully go live on that.

12 Strategies: Periodic communication to managers
13 to, you know, remind people, Please prioritize hiring.
14 You know, I don't do as much of that anymore as I used
15 to. People are on it. You know, they're very motivated
16 to fill their positions.

17 We've also done flexible interviews outside
18 business hours, on the weekends. I mentioned we've done
19 in-person hiring job fairs. Let's see. We do a lot of
20 training, coaching and education on best hiring
21 practices. We moved away from the CalHR required best
22 hiring practices recently and implemented our own DIR
23 best hiring practices and made it mandatory for all
24 hiring managers to go back through it. There's a lot of
25 people unhappy with me because it's an all-day training,

1 but I've gotten a lot of positive feedback that the
2 training is very effective. So I'm pleased that that
3 continues. I got a report last week that all but about
4 13 managers have gone through it in the Department.

5 We're also addressing pervasiveness allocations,
6 developing our -- you know, again, these are things I've
7 heard. "Why do you have to go back and forth with duty
8 statements between HR and the program?" The reason is
9 the Department has a number of misallocated positions,
10 meaning the duties don't necessarily -- in their duties
11 statement doesn't necessarily reflect what they're
12 actually doing and there could be a compensation
13 difference in that, and so it's important when you post a
14 new vacancy that the job is correctly described, right,
15 and it's for the right classification.

16 So we spend -- and that was another reason that
17 the Department lost its hiring authority was because of
18 pervasive misallocations.

19 We've -- I've talked about recruitment
20 strategies. Let's see. I've talked about the automation
21 project.

22 This is just a sample brag book of our
23 recruitment campaign. I'm really happy with how it
24 turned out. These are just standard -- that's a digital
25 ad. These are our physical billboards that we've had

1 throughout the state. I'm really excited about the
2 testimonials that we're adding in the new year from our
3 own staff. So we grabbed a bunch of inspectors and Labor
4 Commissioners and put them on video, asked them why they
5 love their job, and so we've got some fun new recruitment
6 videos coming up in the new year that I'm hoping folks
7 will resonate with candidates.

8 And then these are just for your information,
9 historical information. We conducted a peer review of
10 hiring. We asked another HR shop in the State
11 department -- in the State agencies to come and review
12 our hiring process for efficiency because we get a lot of
13 feedback that our process is not efficient, it's not fast
14 enough.

15 So we brought them in in 2021. They made a
16 number of recommendations which we've implemented and
17 because we're in the process of automating our hiring
18 process, we're doing another review of our hiring steps
19 to ensure that we're automating an efficient process end
20 to end.

21 We have submitted collective bargaining
22 proposals to CalHR for our engineers. I'm not at liberty
23 to share what was in those proposals. It's confidential
24 at this point; but, you know, I get that question a lot.
25 You know, "Well, why haven't you increased the pay,

1 Katie, for all your engineers?" And, you know, we are in
2 a collective bargaining situation. I don't have the
3 authority to do that, but we have let CalHR know what we
4 would like to see for the engineers in Cal/OSHA as well
5 as for the Labor Commissioners classifications.

6 We've automated -- I mentioned we lost our
7 hiring authority. We also lost our examinations a few
8 years back. We've -- since then, we've automated 18
9 DIR-specific exams and we continue to automate additional
10 exams as we move forward.

11 Let's see. I think I've talked about most of
12 this. We also are doing business process review and
13 performance measure development. I find in State
14 government in my almost 30 years, we do a really good job
15 of implementing innovative and great new projects, but we
16 don't do a great job of evaluating those and the
17 effectiveness of those and so we've started an internal
18 process where we establish performance measures as we
19 implement new measurements to see if they're effective,
20 including our marketing campaign.

21 And then, finally, we also have a comprehensive
22 workforce plan. It's available on our website if
23 anyone's interested in that. As you might imagine, when
24 you're hiring 800-plus people per year, there is a lot of
25 onboarding, a lot of training that needs to happen across

1 various divisions and programs. So we have a ton of
2 really great workforce initiatives under way. We have
3 leadership training that we've introduced, new employee
4 orientation. You name it, we've got a whole variety of
5 workforce initiatives as well. That would take a whole
6 other presentation to talk about those, which I won't do.

7 But thank you. Let me know if you have any
8 questions. I did pull a couple stats. I mentioned we
9 have 332 active enforcement staff out doing
10 investigations, including 180 in the field, 99 elevators,
11 25 in pressure vessel, 15 in PSM and 13 in ART, our
12 amusement rides. Since the data that I had up there on
13 the chart, we've hired an additional 29 staff in
14 Cal/OSHA. We have 118 recruitments in process in
15 Cal/OSHA and some of those are for multiple hires, so we
16 hope to make multiple hires from a single recruitment,
17 and that -- it remains, as I mentioned, about 120 vacant
18 positions that we still need to fill in Cal/OSHA.

19 And with that, I will open it up for questions.

20 CHAIR ALIOTO: Katie, thank you very much. Obviously
21 a Herculean task, but one that you're clearly up for and
22 are making great progress on. So I'll say
23 congratulations.

24 Let's just open it up for questions from the
25 Board.

1 BOARD MEMBER HARRISON: Director Hagen, thank you.
2 Great report. I'm glad to see that the hiring process is
3 moving along.

4 In your process, have you addressed exempt-level
5 hires, like executive officers and positions of that
6 nature? As you know, we ran for quite a while without an
7 executive officer on this Board and I'm wondering if
8 you're addressing that need as well.

9 DIRECTOR HAGEN: Well, exempt hires for the boards
10 and commissions are not under my authority necessarily;
11 right? They're under your authority. But yes, we have.

12 In fact, we're establishing a new position in
13 the Office of the Director that will be focused on
14 supporting all of our boards and commissions. I believe
15 we have about seven now independent boards and
16 commissions and even though about half of them have
17 support staff like the Standards Board, some do not and
18 we find that, for example, when a position turns over in
19 an executive role, it takes a while to get the wheels
20 running when the executive officer role is vacant, and
21 personally I found that I actually was doing a lot of
22 that work in absence of, you know, someone to perform
23 that work.

24 So we have been successful to obtain a position.
25 We're in the process of recruiting for that role and I'm

1 really looking forward to having another pair of hands
2 that can support all of the Board staff and commissions
3 in all the various tasks, administrative tasks
4 associated.

5 We do have -- in addition to the independent
6 boards and commissions, we do have a number of exempt
7 hires in DIR. I believe we have about 25
8 Governor-appointed exempts that work for me and all of
9 those -- I'm trying to -- I'm running through them in my
10 head. I believe they're all filled, with the exception
11 of Division of Apprenticeship Standards. Our chief just
12 left and we will be hopefully soon appointing a new
13 chief. Oh, and my Chief Deputy Director, I forgot that,
14 my number two, and I just finished interviews last week,
15 so I'm hoping that that soon will be filled as well.

16 So, you know, we're doing pretty well. I think
17 in the five years that I've been on board, we've hired 20
18 executives, which is pretty significant for any agency
19 and -- but I don't know that it's the hiring process that
20 delays the exempts. It's more about, you know, public
21 meeting notice that's required. You have to have a
22 closed session in order to do interviews and, you know,
23 it's just a very -- it adds a more -- a level of
24 complexity that the merit-based hires don't necessarily
25 have. I don't know if that answers your question.

1 BOARD MEMBER HARRISON: It does. Thank you.

2 DIRECTOR HAGEN: Sure.

3 BOARD MEMBER LASZCZ-DAVIS: That was a great report.
4 Just a couple of questions.

5 You know, especially I'm particularly interested
6 in your apprenticeship program, your bilingual inspectors
7 and enforcers, and the truth is is there a process in
8 place to collaborate with local community colleges, you
9 know, to bring the people on board and train them, and is
10 asynchronous learning a part of that as well?

11 DIRECTOR HAGEN: You know, let me -- asynchronous
12 learning. Oh, boy. So yes. We -- it's always --
13 everything's so complicated, so I'm trying to abbreviate
14 it.

15 The apprenticeship program -- as you probably
16 are aware, Division of Apprenticeship Standards just
17 happens to also be within the DIR umbrella and we work to
18 support employers, work with unions to establish new
19 apprenticeships. That's what our division does.

20 And so they're actually working with the State
21 of California to do the same for various State agencies.
22 The challenge with State apprenticeship models is that
23 you either have to have a classification, a stand-alone
24 classification that is an apprentice class, right,
25 because they don't meet the minimum qualifications for

1 the other jobs before they start the apprenticeship
2 program. So we need some sort of mechanism to appoint
3 them. That only exists for a handful of classifications
4 currently and, actually, the ones that we have are -- you
5 know, have been around for 20-plus years and so we're
6 trying to find a solution.

7 We, DIR, DAS, Division of Apprenticeship
8 Standards, is trying to find a solution with CalHR and
9 SEIU to perhaps make a legislative change or some other
10 mechanism to be able to appoint people into. So that, we
11 have to figure out before we can launch an apprenticeship
12 program.

13 We do have apprenticeship programs within State
14 government currently, but unfortunately they're -- well,
15 it's not unfortunate. They're limited to Civil Service
16 classifications. So, for example -- and they use the
17 training and development assignment mechanism. So they
18 are -- say an office tech wants to become an accounting
19 tech. That person -- they're already a Civil Service
20 appointee -- could go through an apprenticeship program
21 that's approved by SEIU and DAS and within a couple of
22 years, you know, go to a local community college, take
23 classes, do on-the-job training, and they can transfer
24 into that class at the end of their apprenticeship
25 program. That exists in State service, but unfortunately

1 it doesn't allow for people to come in from the outside;
2 right? So that's what I would like to be able to solve
3 and that's what we're trying to accomplish with CalHR and
4 DAS. That said, there are several other states that have
5 an industrial hygienist apprenticeship program. I've got
6 the curriculum. I'm ready to rock and roll. I just need
7 that appointment mechanism. But until that happens, my
8 hope was that during the class spec process change that I
9 described earlier within CalHR, I'm wondering -- I don't
10 know if this is possible, but I'd like the vendor to look
11 into this, is if we can develop an apprentice class as
12 part of the IH series so that we can grow our own
13 basically and then hopefully also solve it for the rest
14 of the state. But my job today is to focus on getting
15 IHs hired and so that's within the scope of our project.

16 Does that help? And obviously a lot of our
17 apprenticeship programs work with the community colleges.
18 They get a lot of the educational fulfillment through
19 community colleges, trade schools, et cetera.

20 You mentioned bilingual. You know, one of the
21 things that we struggle with, everybody within State
22 government struggles to find -- you know, we don't have a
23 bilingual classification. Like none of us go around
24 translating 24/7. We all have other jobs, but it's an
25 add-on if you're able to pass the bilingual exam and get

1 the pay differential for bilingual pay. If we cannot
2 find positions -- you know, candidates into key
3 positions, then we probably will have to remove the
4 bilingual requirement at some point and advertise broadly
5 to fill it and then continue to use the supplemental
6 tools that we have available for Cal/OSHA now. They can
7 schedule an interpreter to talk to workers. They can
8 bring another employee with them to a worker interview
9 who's bilingual.

10 And then we recently launched an application,
11 Translate Live. It's a Google application that we're
12 piloting in Cal/OSHA that we hope will help with
13 translation. It translates 150 languages with the press
14 of a button. DMV uses it. I feel like I'm copying DMV
15 on a lot of these things, but it's just coincidence.

16 But anyway, so we want to give it our best
17 effort. Debra really wants to try to fill a number of
18 the Central Valley positions with bilingual staff; but if
19 we're unable to find them, then we will pursue other
20 approaches.

21 BOARD CHAIR ALIOTO: Other questions from the Board?

22 BOARD MEMBER THOMAS: I think I just have -- so you
23 said you're trying to establish a pre-apprenticeship
24 program that will funnel people basically from
25 high school and community colleges toward the State in

1 certain positions? I'm not sure if I was getting that
2 right. I mean, that's what we do for our crafts.

3 DIRECTOR HAGEN: So we don't have a preapprenticeship
4 program, yet. We have an apprenticeship -- we have
5 several apprenticeship programs through SEIU for -- in
6 the State of California, not just necessarily DIR, but
7 for the State of California. They're in -- generally, I
8 think it's information technology, financial services,
9 sort of the non-tech, you know, the generalist
10 classifications for the most part, and we have -- DIR has
11 participated in a couple of those. But, again, that's
12 limited to current State employees and what we would like
13 to do is be able to hire from outside State government
14 into the IH field so that we can train them up.

15 We anticipate that the staffing assessment that
16 I mentioned is going to tell us we need a lot more IHs.
17 We know we do and so we want to -- we can't fill the ones
18 we have now, so we've got to do something different,
19 right? They just don't exist in the numbers that are
20 needed in the state of California and so we want to grow
21 our own, but we're in the very -- I just want to
22 emphasize we're in the very early stages of, you know,
23 how to tackle this and we're trying to go two different
24 directions, the IH class spec revisions and then a
25 statewide solution for the Division of Apprenticeship

1 Standards and CalHR that would help everyone, not just
2 DOSH.

3 BOARD MEMBER THOMAS: Thank you.

4 CHAIR ALIOTO: Any other questions from the Board?
5 All right. I -- yes. Go ahead.

6 BOARD MEMBER KENNEDY: I just have a quick comment,
7 not really a question.

8 So I'm a professor of industrial hygiene and,
9 you know, I know that Cal/OSHA is doing this recruiting
10 effort. I have not had anyone from Cal/OSHA recruitment
11 reach out to me to interact with my students.

12 DIRECTOR HAGEN: Yes. We can't currently hire new
13 graduates, so we have not -- our MQs don't allow for --
14 most of our classifications require some level of
15 experience, so we have not yet been targeting college
16 classrooms to try to fill our existing vacancies;
17 however, we really want to be able to. We want to find a
18 pathway through our class study to revise it hopefully to
19 allow for college graduates right out the gate.

20 We have been doing some job fairs at colleges.
21 We just haven't been going into the classrooms
22 necessarily. A lot of the professors -- I don't know
23 about you, Nola, but some of them don't want us in the
24 classroom or we have to bring pizza, strangely.

25 So -- so -- but we would like to get there. We

1 have a very small recruitment team that we're still
2 building upon, so I hope we're going to get there, but
3 we're really just focused on filling our current existing
4 vacancies that generally require some level of
5 experience.

6 BOARD MEMBER KENNEDY: Does that mean that the --
7 'cause there used to be a junior industrial hygienist.
8 Does that not --

9 DIRECTOR HAGEN: It exists.

10 BOARD MEMBER KENNEDY: Okay.

11 DIRECTOR HAGEN: Unfortunately, it's very difficult
12 to find candidates that meet the minimum qualifications
13 of that particular classification, so --

14 CHAIR ALIOTO: Director Hagen, I have just a couple
15 of questions. The first is about supply, labor supply,
16 and I'm looking at your vacancy graph that you presented
17 in your slides. The very first thing I want to do is
18 note and congratulate Ms. Lee. It looks to me like the
19 vacancy rate at DOSH dropped from 28 percent to 23
20 percent in six months, which I --

21 DIRECTOR HAGEN: Yes.

22 CHAIR ALIOTO: -- I find is extraordinary. That is
23 about a 20 percent reduction in the vacancies, which I
24 think is just really terrific. So please convey to her
25 our congratulations --

1 DIRECTOR HAGEN: I will. Thank you.

2 CHAIR ALIOTO: -- and congratulations to you as well.

3 But the rate itself remains high; right? To
4 what do you attribute that? Is that -- are there not
5 enough trained folks? I guess are there not enough
6 trained folks? Is it a lack of demand? Are the salaries
7 not high enough? And one way to gauge this is are these
8 similar vacancy rates in the private sector or is this
9 specifically a labor shortage that is being felt by the
10 government agencies?

11 DIRECTOR HAGEN: That's a lot.

12 CHAIR ALIOTO: Yeah, but really what it's about is --

13 DIRECTOR HAGEN: The labor market.

14 CHAIR ALIOTO: -- what's the source of the labor
15 shortage?

16 DIRECTOR HAGEN: Right. Well, I tried to describe
17 some of that in my presentation. I mean, really, we've
18 done a very good job, I think, of filling our safety
19 engineer series; right? Safety senior, safety engineer,
20 we're able to find them.

21 Now, there are some offices where we've had to
22 advertise multiple times and we don't get a good
23 candidate pool. That's hit or miss, right, and we keep
24 trying to fill those positions.

25 But what's very challenging is the industrial

1 hygiene series. They -- we have the industrial
2 hygienist, senior IH, and we're able to fill a number of
3 our senior IH. The salary is at a level that is
4 attractive. The entry level, we frequently have declines
5 due to salary level. Thus, our, you know, pursuit of the
6 collective bargaining proposal that went over. Also, our
7 pursuit of the class spec changes, which includes the
8 salary survey, and that will compare us to competitors,
9 right, state agencies, private entities, local, you know,
10 county levels, and we will hand that off to the financial
11 unit at CalHR and they will look at that and that will
12 hopefully at some point be collectively bargained.
13 So it is -- salary is definitely a challenge with the
14 Industrial Hygiene classification series in terms of
15 hiring folks.

16 We're able, like I said, to get safety
17 engineers. Whether, you know, the salary is sufficient,
18 I -- you know, it is from a recruitment standpoint. I
19 guess the point -- we'll have to see how it goes in terms
20 of retention over the next few years.

21 CHAIR ALIOTO: All right. One more question for you
22 then. A quick follow-up and then one more. It's kind of
23 a separate question, but is the collective bargaining
24 position that's being represented by CalHR, management's
25 being represented by -- management -- represented by

1 CalHR. Is that because of the loss of the hiring
2 authority?

3 DIRECTOR HAGEN: No. No. No. That's just how it's
4 done for all State agencies.

5 CHAIR ALIOTO: Okay. So --

6 DIRECTOR HAGEN: They represent all of the -- they
7 represent the administration. They stand in the shoes of
8 the Governor with the unions negotiating agreements.
9 Yeah.

10 CHAIR ALIOTO: So the best you can do is present a
11 proposal. You can't be at the table.

12 DIRECTOR HAGEN: Correct. Correct.

13 CHAIR ALIOTO: All right. Would you mind -- you
14 mentioned at the end there 180 folks. I want to talk
15 about enforcement personnel. That's an issue dear to my
16 heart. So 180 people in the field. What is the vacancy
17 rate for field enforcement and do you -- are you
18 experiencing the same headwinds with respect to meeting
19 those vacancies or filling those vacancies?

20 DIRECTOR HAGEN: I don't have the numbers off the top
21 of my head for field enforcement, but they are on our
22 website. They -- it's -- I've been thinking about
23 removing the percentages, though, because they are I
24 think very -- when there's only three people in a field
25 office, one vacancy, it skews the percentages. So -- but

1 we do have 121 engineers and IH vacancies across the
2 organization. But, again, those are not all field
3 enforcement. I don't have the mix on hand with me. A
4 lot of those positions are in the Elevator Unit. We
5 received a very large multiyear BCP a couple years ago
6 for elevators and we're still working on finding those
7 very -- those are also very hard to recruit for, mostly
8 coming from the elevator industry, experienced personnel.
9 So those, we're filling. We have great contacts within
10 the industry. It's just taking us a while to fill all of
11 those vacancies.

12 I'm sorry. What was your first question?

13 CHAIR ALIOTO: That's about the collective
14 bargaining, but you answered that.

15 DIRECTOR HAGEN: Okay.

16 CHAIR ALIOTO: So I'll just say we hear at every
17 meeting about employers -- we're going to hear from
18 employers later on today about what excellent jobs they
19 do to keep their employees safe and they end up being the
20 brunt of many of the regulations that are so difficult
21 for people who are already following the regulations to
22 comply with when the real problem sometimes seems to
23 exist among those who are scofflaws where enforcement
24 would really make it easier for everybody to be able to
25 follow regulations.

1 So I think I would just emphasize how important
2 it is, at least to me personally -- you and I have talked
3 about this -- how important it is to continue to hire
4 aggressively for enforcement.

5 DIRECTOR HAGEN: Absolutely. Yeah. And if I could
6 add, perhaps at a future Board meeting, you might be
7 interested in a presentation on our CWOP program. Oh,
8 gosh. I'm going to mess up the acronym. It's our
9 outreach initiative that we got a large fund during
10 COVID, actually, that allows us to give grants to CBOs
11 and universities that help us in communicating, doing
12 outreach with workers and employers. I believe the
13 dollar amount's around 30 million dollars annually that
14 we're administering these grants and we have an
15 incredible touch with all of these CBOs across the state
16 of California and they are carrying our message from
17 Cal/OSHA forward, everything from avian flu to COVID --
18 for several years, that was the main purpose -- silica.

19 I think it would be helpful. In addition to
20 enforcement, we also have to engage consistently in
21 outreach and we have a whole other program dedicated to
22 outreach. We have both Cal/OSHA and DIR staff dedicated
23 to outreach in addition to the enforcement staff.

24 CHAIR ALIOTO: Thank you very much. I don't think we
25 have any other questions. I'll just dovetail what you

1 said, and before I open it up for public comment on this
2 issue, outreach. Let's do some outreach right now.

3 The people that we have on the -- attending this
4 meeting, the folks that are here in the public to make
5 public comment, folks who are online attending this
6 meeting, the people at the diocese in front of me and to
7 my left and to the right, this is the brain trust for the
8 California Health and Safety -- Occupational Health and
9 Safety right here, among many other people. But there
10 are -- this is really a core of the folks who are
11 involved here. So I will implore you -- I don't know
12 where the camera is. It's over there.

13 I'm going to implore you folks, everybody here,
14 to reach out to your contacts and to do everything that
15 you can to help plug some of these vacancies so that we
16 can increase enforcement -- we need bilingual engineers,
17 industrial hygienists -- and do the best that we can to
18 preserve the safety and health of California workers.

19 So with that, let's open it up to public
20 comment.

21 Folks, anybody present in person who'd like to
22 make comment? Please. And if you don't mind coming up
23 and filling out a speaker card and handing that to
24 Ms. Money.

25 And then folks online who might want to comment

1 on this topic, if you could begin -- well, Mr. Roensch,
2 can you manage that part?

3 MS. MURCELL: Are you ready for me?

4 CHAIR ALIOTO: Indeed. Good morning.

5 MS. MURCELL: Good morning, everyone. A quick
6 comment related to the director's comments about the
7 junior IHs and Nola's question. This is Pamela Murcell.

8 CHAIR ALIOTO: Ma'am, would you -- I'm sorry. Would
9 you mind just stating your name for purposes of the
10 record.

11 MS. MURCELL: This is Pamela Murcell. I'm the
12 President of the California Industrial Hygiene Council
13 and just -- I looked up right quick the qualifications,
14 but I already knew them because I was a junior industrial
15 hygienist. I started with Cal/OSHA in 1980 when one of
16 the junior IH classes was formed and it was an excellent
17 opportunity and way to get involved with Cal/OSHA and it
18 was also an incredible learning experience, and the way
19 that the program ran was that they brought in --
20 brought in about 20 of us in Southern California where I
21 was and about 20 in Northern California in the Berkeley
22 office and they basically had us job shadow. And along
23 with that, we would be -- monthly also be receiving
24 additional training, additional educational opportunities
25 that Cal/OSHA sponsored.

1 Some of our trainers were Cal/OSHA staff,
2 seniors and supervising IHs. Some of our trainers were
3 through various vendors and consultants. It was an
4 excellent program. It was a one-year program.

5 After we finished our one year, we were advanced
6 into assistant IH positions within various offices in the
7 Cal/OSHA program and some of us stayed on to be associate
8 IHs, et cetera, et cetera. So the opportunities were
9 definitely there.

10 As far as minimum qualifications, I actually
11 pulled up to just jog my memory of what's actually
12 written in the CalHR listing for junior IHs and I'm sorry
13 to contradict, but there are no minimum qualifications
14 stated for experience. What it states is there's an
15 education requirement equivalent to graduation from
16 college with major work in industrial hygiene,
17 environmental health, engineering, chemistry, biology,
18 physics, medicine, public health, or in a field directly
19 related to occupational health and safety, and that's it.

20 So that's how I found out about the junior IH
21 program. I'm actually a graduate of the Cal State
22 Northridge bachelor's and master's program and I found
23 out about it while I was attending undergraduate there.

24 So just wanted to add that to the record.

25 CHAIR ALIOTO: Thank you very much for your comments.

1 MS. MURCELL: Thank you.

2 CHAIR ALIOTO: Anyone else?

3 Mr. Wick?

4 And then, Mr. Roensch, can you run a clock,
5 please, for us and I'm just going to remind everybody we
6 have a two-minute limit for today. Thank you. Sorry,
7 but that's just the way it goes.

8 MR. WICK: Thank you. I appreciate Director Hagen
9 and I'll make a similar comment I made at the CHSWC
10 meeting last week that I think one more real aspect here
11 would be engaging employer groups, leading employer
12 associations in this process.

13 We were promised in 2010 when we started funding
14 DIR that we would be fully engaged annually in how things
15 are going, you know, staffing, 'cause -- and that
16 happened the first year after 2010 and then the new
17 administration, that has not happened since. So we've
18 been operating blind, but the contribution has gone from
19 488 million dollars in 2010 for DIR to 2.06 billion
20 dollars this year. Employers are paying.

21 We want funding. We want Division workers' comp
22 fully funded. My people want the underground employers
23 gone after by both the Labor Commissioner and Cal/OSHA.
24 So I think we could engage employer associations to put
25 pressure on the legislature, on CalHR to say, Let's

1 get -- if we need to raise the pay, let's do it so we get
2 really competent people doing a great job out there.

3 Thank you.

4 CHAIR ALIOTO: Thank you very much.

5 Good morning.

6 MR. MIILLER: Good morning. Michael Miiller with
7 the California Association of Winegrape Growers, and
8 happy holidays. I'll be very, very brief.

9 We fully agree with what the Chair is saying
10 about enforcement and align ourselves with the comments
11 from Bruce that were just made. By all means, bad
12 actors, go after them. Take all the enforcement action
13 you need and do all of that.

14 We have one concern and that is with how
15 enforcement actions are sometimes announced. Earlier
16 this week, a news release came out with an enforcement
17 action against an animal shelter in Los Angeles. Without
18 regard to the merits of that case, or lack thereof, the
19 realities of the news release says that the citation was
20 due to the employer's willful violations of safety
21 regulations.

22 This is routine at Cal/OSHA where they put out a
23 news release and it's guilty until proven innocent. If
24 you look at news releases for enforcement actions from
25 environmental agencies like CalEPA, Resources Agency,

1 DPR, whoever, they go out of their way to say, This is an
2 accusation, This is alleged. There's a due process.

3 That doesn't happen with these news releases and
4 what that does is that now goes on their website. So
5 when you do a Google search for that employer, this pops
6 up, and if that employer wins on appeal and the citation
7 is dismissed, there's not a second news release that
8 comes out to correct the record, so forever this is on
9 their Google search. That harms the employers.

10 So we'd just ask that when a news release goes
11 out, if you can make it clear that it is alleged, that
12 the citation is the beginning of the enforcement action
13 subject to appeal and due process. Thank you very much.

14 CHAIR ALIOTO: Thank you for your comments.

15 Anyone else?

16 MR. MIILLER: Happy holidays.

17 CHAIR ALIOTO: Happy holidays to you too, Mr. Miiller.

18 Anyone else like to -- that is in person that
19 would like to make a comment?

20 All right. Let's go online, Mr. Roensch.

21 MR. ROENSCH: We have a hand raised from Maegan Ortiz
22 with IDEPSCA.

23 Maegan, go ahead.

24 MS. ORTIZ: Thank you. Good morning, Chair and
25 Members. Apologies. I'm usually there in person.

1 Maegan Ortiz, Director of the Instituto de Educacion
2 Popular del Sur de California or IDEPSCA.

3 I just want to thank Director Hagen for her
4 presentation today. IDEPSCA works with all of those
5 workers in the so-called "underground economy." I don't
6 think there's an underground economy. Really, there's
7 just workers who are not protected for a number of
8 reasons.

9 I also just want to take the opportunity to
10 highlight and congratulate Chief Lee and her staff who
11 have been working really hard in hires within Cal/OSHA
12 really to protect workers, right, because that is really
13 the purpose of Cal/OSHA and DIR. IDEPSCA is part of the
14 California Worker Outreach Program, CWOP, and also
15 Domestic Worker Education and Outreach Program, DWEOP,
16 because the thing is you can have all the laws on the
17 books and all the regulations on the books, but if
18 employers are not educated as to what their
19 responsibilities are, it's going to be hard to find
20 compliance.

21 But I wouldn't be a good worker advocate if I
22 also didn't say that the vacancies do still continue to
23 hurt low-wage workers, especially immigrant workers.
24 Those vacancies equal more wait times for these cases
25 when they are filed and for especially workers working in

1 low-wage industries and immigrant workers, those wait
2 times mean less time being able to work, less time being
3 able to put food on the table.

4 So while we congratulate DIR, we also look
5 forward to continuing to work with them to really make
6 sure that all workers get the help that they need. Thank
7 you.

8 CHAIR ALIOTO: Thank you, Ms. Ortiz.

9 MR. ROENSCH: Mr. Chairman, we have no further hands
10 raised.

11 CHAIR ALIOTO: All right. Thank you, folks. That's
12 going to close public comment on the presentation of
13 Director Hagen. I want to thank you on behalf of the
14 Board for coming --

15 DIRECTOR HAGEN: Thank you.

16 CHAIR ALIOTO: -- and a very informative presentation
17 and we congratulate you on your continued efforts to
18 improve this issue. Thank you.

19 All right, folks. We are going to go to the
20 public hearing and before we open the public hearing,
21 Maryrose Chan will brief the Board on the rulemaking
22 proposal. The Board Members will then have an
23 opportunity to make comments and ask questions.

24 Today's public hearing item is on Title 8:
25 Construction Safety Orders, Section 1635. This is Cone

1 and Bar Barricades.

2 Ms. Chan, will you please brief the Board.

3 MS. CHAN: Happy holidays, Chairman and Members of
4 the Board. It's a pleasure to be here to brief you on
5 the Cone and Barricades System, Section 1635.

6 On August -- oh, sorry.

7 On August 7, 2018, the District Council of Iron
8 Workers/California Ironworker Employers Council filed a
9 petition, which was designated as Petition 570.

10 On January 17, 2019, the Board adopted a
11 decision to grant Petition 570.

12 We convened a two, we convened a two-day
13 advisory committee meeting on October 10 and
14 October 11, 2019. The meeting was attended by
15 Cal/OSHA and labor and management representatives.

16 On April 20, 2020, due to the State's
17 stay-at-home order in response to COVID-19, Board staff
18 notified the committee that the proposal to amend
19 Section 1635 will move forward and the committee's work
20 to review the specific subsections in 1710 will resume at
21 a later time.

22 The proposal was eventually noticed on
23 November 1st, 2024.

24 Over the years, it has taken us a longer time to
25 get the proposal ready to be noticed. Rulemakings

1 undergo more layers of review and greater scrutiny,
2 particularly the economic impact analysis. More often
3 than not, Board staff requires assistance of the research
4 data analyst from DIR.

5 Petition 570 was received on August 8, 2018.
6 The petition letter dated August 7, 2018 was jointly
7 submitted by Don Zampa, President of District Council of
8 Iron Workers, and Greg McClelland, Executive Director of
9 the Western Steel Council.

10 The Petitioner sought for amendments in
11 subsections in 1710(l), Temporary Flooring, Skeleton
12 Steel Construction in Multi-story Buildings. The
13 subsections were (l)(l), temporary flooring, planking and
14 decking; (l)(3), fall protection at the periphery of
15 buildings; (l)(4), mid-rail protection; (l)(5),
16 installation of metal decking; (l)(6), holes and
17 openings; and a request for a new subsection (l)(8) for
18 the Cone and Barricade System.

19 The Board's adopted decision on January 17, 2019,
20 directed Board staff to conduct an advisory committee
21 meeting to consider the issues raised by the Petitioner.
22 The rulemaking addresses the Petitioner's request to add
23 a subsection (l)(8), Cone and Bar Barricade System;
24 however, instead of amending Section 1710(l)(8), the
25 amendments were made in Section 1635, Floors, Walls and

1 Structural Steel Framed Buildings. Section 1635(c)(2)
2 already contained provisions for barricading floor
3 openings while work is in progress.

4 During the advisory committee meeting, we were
5 able to resolve sections 1710(l)(l), (l)(3) and (l)(6)
6 and we have language for that, but a future advisory
7 committee meeting still needs to be convened to discuss
8 subsections (l)(4) and (l)(5). Changes to Section 1710
9 will be handled as a separate rulemaking.

10 As you can see, the cone and bar barricade
11 consists of high-visibility green cones. Employees are
12 more accustomed -- have become accustomed to the orange
13 color, so the high-visibility green cones call more
14 attention to them, and it's also required to be labeled
15 "Danger Floor Opening."

16 The cones are connected by bars, the
17 high-visibility bars. The hook shows that personal fall
18 protection is required when working inside the demarcated
19 area.

20 So the Cone and Bar Barricade System addresses
21 fall hazards relating to openings and leading edges when
22 work is in progress. So what does "work in progress"
23 mean? Openings are created to provide access to welding
24 structural members. It's also used to accommodate design
25 changes and to insert equipment.

1 During the advisory committee, we reviewed
2 accidents that have occurred while the employee was in
3 the process of removing the cover. As a matter of habit,
4 people naturally move forward and there has been very sad
5 accidents that have resulted because the employee removed
6 the cover and stepped into the opening. The barricades
7 communicates the presence of an opening or leading edges
8 and demarcates the area where personal fall protection is
9 required.

10 The rules that we created in this proposal
11 specifies the materials, the setup, inspection and
12 training on safe use.

13 The benefits of the proposal is that it will
14 help prevent falls through openings. It standardizes the
15 current use of the Cone and Bar Barricade System. It
16 eliminates the use of rope, caution tape, or other piled
17 materials as a means of barricading the area, and it also
18 will lessen the use of plank and plywood.

19 We received a letter from Federal OSHA that the
20 proposal is at least as effective as the federal
21 standard. Today is the last day for the public to
22 comment, December 19 and the proposal is ready for the
23 Board's consideration and comments.

24 CHAIR ALIOTO: Thank you, Maryrose.

25 For those interested in Maryrose's presentation,

1 if you would like to obtain a copy of it -- and for that
2 matter, since I forgot to tell you this last time, if you
3 would like to obtain a copy of Director Hagen's
4 presentation, kindly send a public record request to
5 oshsh-pra@dir.ca.gov and describe with particularity the
6 presentation that you'd like.

7 Let's open it up to questions from the Board for
8 Maryrose.

9 BOARD MEMBER KENNEDY: Again, no question, just a
10 comment and I wanted to congratulate Senior Engineer Chan
11 on a nice process and a successful advisory committee.

12 CHAIR ALIOTO: Yes. Agreed. I echo that.
13 Congratulations.

14 Any other comments or question?

15 BOARD MEMBER CRAWFORD: Well, ditto; however, I do
16 have just a quick question. Is there a specific height
17 on these cones?

18 MS. CHAN: Yes. They are required to be at least 28
19 inches high, so it's -- and it has to be a pretty sturdy
20 cone. It has to have a 10-pound weight capacity so that
21 it doesn't easily blow with the wind.

22 BOARD MEMBER CRAWFORD: Yeah. Okay. Thank you very
23 much.

24 CHAIR ALIOTO: Anyone else? Okay.

25 All right. We will now proceed with the public

1 hearing. During the hearing, we will consider the
2 proposed changes to the Occupational Safety and Health
3 Standards that were noticed for review today.

4 The Standards Board adopts standards that, in
5 our judgment, are enforceable, reasonable,
6 understandable, and contribute directly to the safety and
7 health of California employees. The Board is interested
8 in your testimony on the matters before us. Your
9 recommendations are appreciated and they will be
10 considered before a final decision is made.

11 If you have written comments, you may read them
12 into the record, but it is not necessary to do so as long
13 as your comments are submitted via email. Please submit
14 all written comments to the following email address:
15 OSHSBRulemaking@dir.ca.gov. Please do that by 5:00 p.m.
16 today in order for those comments to be included in the
17 written record. Board staff will ensure that they are
18 included in the record and forward copies of your
19 comments to each Board member and I will assure you that
20 your comments will be given every consideration. Please
21 include your name and address on any written materials
22 that you submit.

23 I would also like to remind the audience that
24 the public hearing is a forum for receiving comments, so
25 this is not for holding public debates.

1 If you would like to comment orally today,
2 please line up at the podium and then when I ask for
3 public testimony or when I do ask for public testimony,
4 please state your name and affiliation, if any, and
5 identify what portion of the regulation you would like to
6 address with your remarks.

7 If you are participating remotely and would like
8 to comment, please join the comment queue by clicking the
9 comment queue link in the "Board Meetings" section of the
10 main page of the OSHSB website or by calling the
11 following phone number, (510) 868-2730, to access the
12 automated public comment queue voicemail or if you're
13 online, just raise your hand.

14 Right? Yeah? Okay.

15 When public comment begins, we will alternate
16 between folks in person and commenters. Please present a
17 completed speaker slip to Ms. Money when you come up to
18 the podium; and for commenters attending via
19 teleconference, just please listen for your name. Please
20 keep your computer muted until your name is called and
21 then unmute to speak yourself -- to speak.

22 If you are on the phone, then you can dial star
23 6 to unmute yourself.

24 We're going to limit public comment today to two
25 minutes unless you're a Spanish speaker or other language

1 speaker that requires a translation, in which case we'll
2 increase that to four minutes.

3 After all testimony has been received and the
4 record is closed, staff will prepare a recommendation for
5 the Board to consider at a future meeting.

6 Amalia, would you kindly announce to the
7 Spanish-speaking audience the instructions for making
8 comments.

9 (Instructions given in Spanish)

10 CHAIR ALIOTO: Thank you very much.

11 Let's start with in-person speakers, folks who
12 are interested in commenting on this item. Anyone?

13 Sir, good morning to you.

14 MR. MC CLELLAND: Good morning, sir. My name is Greg
15 McClelland. I am the Executive Director of the Western
16 Steel Council.

17 I was one of the co-signers of the initial
18 Petition 570. We have been anxiously awaiting this day
19 and we appreciate Board staff's work, especially
20 Maryrose. I think I drug her all over Northern
21 California on a bunch of different job sites.

22 So as you guys can see, this is a different type
23 of system and as with any new technology and any new
24 system, there's obviously a long vetting process.

25 As a 30-year union ironworker here for

1 Local 118, I have worked and ran jobs up and down the
2 West Coast and in Las Vegas. One of the most horrible
3 things you can have is is a terrible accident or a fatality
4 on a project. This was in direct response to several
5 unnecessary fatalities of mostly apprentices, the folks
6 that are most at risk on the jobs, picking up a sheet of
7 plywood or a long plank and having natural habit of
8 walking forward to remove that plank.

9 I will give you some numbers just to make
10 yourselves sleep better at night. Since this has been
11 implemented, we started this -- it was implemented by one
12 of our foremost directors, the Hare corporation, back in
13 2014. District council wide, we've worked 170 million
14 man-hours since this system was instituted. Two-thirds
15 of those hours are structural steel. That would be
16 around 112 million man-hours worked with this system in
17 place, and zero fatalities associated with Cone and Bar
18 Barricade System.

19 This is one of the few times where I think in
20 the last 20 years, probably one of the most significant
21 safety changes and increases for the steel erection
22 industry, and I appreciate your time. Happy to
23 answer any questions.

24 CHAIR ALIOTO: Thank you very much, Mr. McClelland.
25 Let me say I want to thank you for bringing this petition

1 in 2018. We appreciate the efforts and all of the work
2 that you've put into it, especially with Mary, with
3 Maryrose, and the numbers that you've cited are very
4 helpful for us. And so I want to say thank you to you
5 personally for having brought this to our attention and
6 having done all the work that you've done.

7 MR. MC CLELLAND: Thank you. My pleasure. Thank
8 you.

9 CHAIR ALIOTO: Thank you.

10 Any other people that would like to make a
11 comment on this item?

12 MR. DONLON: Yes. Mike Donlon and today I'm
13 representing the Construction Employers Association.

14 This proposal allows a plastic bar the height of
15 a mid rail, 22 inches high -- the cones have to be
16 taller, but the bar can be at 22 inches -- as the sole
17 protection from a serious fall hazard.

18 In the Walking-Working Surface Advisory
19 Committee, the Division proposed banning engineered
20 portable guardrails that are much more stout than this.
21 Now, this works for the ironworkers when they're there
22 working. There's no doubt about that. But CEA has
23 concerns about allowing Cone and Bar Barricades to be the
24 only fall protection when ironworkers are not actively
25 working or even in the area.

1 This -- the proposal allows a Cone and Bar
2 Barricade to be the sole protection for days, even weeks,
3 as long as there is work in progress. There doesn't seem
4 to be consensus on what that means, but the CEA firmly
5 believes that the hole should be covered at the end of
6 the day. Now, there is a fall hazard when you do that,
7 but as Maryrose stated, they're required to be wearing
8 fall protection when they're in that area, so that
9 eliminates that fall hazard.

10 Other trades may need to access to these areas.
11 They may need to pass through these areas and be exposed
12 to this hazard. Superintendents at the beginning of the
13 day before the trades are there, at the end of the day,
14 survey their job sites and will be exposed to this fall
15 hazard.

16 A construction site is an attractive nuisance.
17 Despite fencing, actively monitored cameras, roving
18 security, people trespass onto construction sites. While
19 the safety boards are not intended to protect the public,
20 we should not accept a proposal that allows a deadly fall
21 hazard be unprotected for extended periods.

22 The second thing is the proposal requires
23 "Dangerous Floor Openings" on the cones in two-inch
24 letters. When you have an asbestos containment area, you
25 have to have a danger sign. Okay?

1 Section 3340 gives the requirements for safety
2 sign use. Danger signs shall be used where an imminent
3 hazard exists. General safety signs shall be used where
4 there is a need for general instruction or suggestions.

5 So we're putting the general safety sign up
6 where we need the danger sign. When they're putting in
7 the decking and they have a controlled access zone, they
8 have to have a danger sign. We should have a danger sign
9 here also. Thank you.

10 CHAIR ALIOTO: Thank you very much for your comments.
11 Thank you.

12 Anyone else in person that would like to make a
13 comment on this item? All right. I don't see anyone
14 else.

15 Is there anyone online that would like to make a
16 comment on the Cone and Bar Barricade issue?

17 MR. ROENSCH: We do have a hand raised by Kevin Bland
18 from Ogletree.

19 CHAIR ALIOTO: Good morning, Mr. Bland.

20 MR. BLAND: Good morning, Chair and Board Members,
21 staff. Kevin Bland, representing Western Steel Council,
22 also the Residential Contractors Association, and
23 California Framing Contractors Association.

24 As many know, I was an ironworker and my father
25 was an ironworker for many years. I participated in the

1 advisory committee just before COVID that Mr. McClelland
2 was discussing and we are in complete support of the
3 language and what's been proposed.

4 I think some of the issues that were just
5 brought up by Mr. Donlon, although many times we agree,
6 this is one point where we disagree. On this, it's been
7 a proven safety measure on job sites, as Mr. McClelland
8 pointed out with some amazing statistics here.

9 The concerns that were raised regarding
10 attractive nuisance and someone wandering in, they'd
11 literally have to wander through the cone and bar that is
12 very obvious and very clear that you don't enter that
13 unless you're authorized. It is limited to the
14 ironworkers. It says in the regulation that addresses
15 that concern that no one, no other trades should be in there.
16 When this is put in place, it's so many feet back, as you
17 can see in the regulatory language, like from where, say,
18 the column line would be, there is no reason, at least in
19 my experience, that anyone else would need to enter in
20 for any reason, and it also by covering the holes at the
21 end of the day defeats the purpose of avoiding the hazard
22 where we've had.

23 In fact, I have a personal experience with this.
24 This is how my dad fell and ended his career,
25 through removing a sheet of plywood and accidentally

1 stepping in years ago. He was severely injured. If this
2 had been in place, we wouldn't have had that injury and
3 he wouldn't have had to retire early with his injury.

4 So there's -- it's very important. We sat
5 through the advisory. We came to a clear consensus.
6 Maryrose did an amazing job of making sure that all the
7 points were covered, discussed thoroughly, vetted, and
8 all the safety concerns that were raised during that
9 process were addressed and we see the language here today
10 that is the consensus and protects the men and women
11 working in using the Cone and Bar System in the industry.

12 So I urge the Board when it comes time to vote
13 in the next meetings or two -- I don't know when the vote
14 will be -- but to have an aye vote and pass this as
15 written.

16 So thank you very much. Happy holidays to
17 everyone. I don't know if I'll have any other speaking
18 today, so I want to make sure I wish everyone happy
19 holidays and a prosperous new year, and I wanted to thank
20 the Board and the Board staff for all their work
21 throughout 2024. There have been a lot of
22 accomplishments and a lot yet to go and we know how hard
23 you guys work and you guys are basically almost a
24 volunteer organization sitting there at the Board and
25 that doesn't go unnoticed by those in the public and we

1 appreciate your service. So thank you very much.

2 CHAIR ALIOTO: Thank you.

3 MR. BLAND: If you have any questions, I'm happy to
4 answer them.

5 CHAIR ALIOTO: All right. Thank you, Mr. Bland, and
6 happy holidays to you as well.

7 MR. BLAND: Thank you.

8 MR. ROENSCH: Mr. Chairman, we do have another hand
9 raised from Len Welsh.

10 Mr. Welsh, if you would unmute your microphone,
11 you can address the Board.

12 MR. WELSH: Good morning. Can you all hear me?

13 CHAIR ALIOTO: Yes, we can. Good morning. And,
14 Mr. Welsh, if you would limit your comments, please, to
15 two minutes.

16 MR. WELSH: Will do. Len Welsh, representing the
17 Ironworkers Management Progressive Action Cooperative
18 Trust, otherwise known as IMPACT.

19 I do want to echo the last words of Kevin Bland
20 complimenting you all for the hard work you've done.
21 It's been a productive year. We're finally recovering
22 from the COVID episode. We've still got a ways to go.

23 I do totally respect Mike Donlon's opinion on
24 many things, but like Kevin and like Greg, I I fall on
25 the side of supporting this proposal.

1 Unlike many situations, we have a track record
2 here of zero fatalities, which is what we're looking at
3 when we talk about covering holes. It's not that often
4 we have this kind of a track record and I think that
5 speaks volumes. It's also true these issues were gone
6 over with the advisory committee. They were gone over
7 with Cal/OSHA Enforcement when we first came to an
8 understanding about what existing regulations would
9 permit and this procedure was begun back in 2014 with
10 Cal/OSHA's approval.

11 So I would urge the Board to adopt this
12 proposal. It's been way too long. It's been since 2019
13 we've been trying to get this done. It needs to happen
14 now and we should not let the good be the enemy of what
15 might -- what some might think is the perfect, although I
16 think what we have right now is pretty darn good for a
17 realistic, effective proposal.

18 Thanks again for your hard work. Happy
19 holidays, all, and I'm looking forward to working with
20 you in 2025.

21 CHAIR ALIOTO: Thank you, Mr. Welsh. And happy
22 holidays to you and your family as well.

23 Mr. Roensch, any other speakers online?

24 MR. ROENSCH: Mr. Chairman, at this time, we have no
25 hands raised and we also have no preregistered commenters

1 for this topic.

2 CHAIR ALIOTO: All right. Thank you. That will
3 close the public comment or -- close the public comment
4 and the public hearing.

5 If anybody remotely is participating and was
6 unable for whatever reason to join the comment queue and
7 would like to comment, please raise your hand if you
8 haven't tried to do that already. I also have -- I'm
9 going to read you an email address that you can send your
10 comments to in the event that you were unable to make
11 your comments on this issue, and that is
12 OSHSBRulemaking@dir.ca.gov. Your comments are due by
13 5:00 p.m. in order to be considered part of the written
14 record.

15 There being no further persons coming forward to
16 testify in this matter, this public hearing is closed and
17 written comments will be received until 5:00 p.m. today.

18 Folks, we've been going for almost two hours.
19 Let's take ten minutes and report back at 12:00 p.m.
20 Thank you.

21 (Recess)

22 CHAIR ALIOTO: All right. Good afternoon, folks, and
23 welcome back to the meeting. We will now proceed with
24 the business meeting. The purpose of the business
25 meeting is to allow the Board to vote on the matters

1 before it and receive briefings from staff regarding the
2 issues listed on the business meeting agenda.

3 As reflected on the agenda, public comment will
4 be accepted for Item A after the Board has received a
5 briefing on that particular item from staff. Public
6 comment on non-agenda items or to propose new or revised
7 standards will take place after the Cal/OSHA report.
8 In other words, when we take public comment on this
9 issue, it will only be on the issue that is listed on the
10 agenda.

11 All right. So we're going to move on to the
12 agenda. This is Item A, Proposed Safety Order for
13 Adoption, Title 8, General Industry Safety Orders. This
14 is Section 5204, Occupational Exposures to Respirable
15 Crystalline Silica.

16 Today's Cal/OSHA briefing will include a number
17 of presentations and they will be done in the following
18 order. We're first going to hear from Dr. Heinzerling.
19 I hope I didn't butcher that too bad, Amy, and she's here
20 with us today.

21 We're also going to hear from Jenny Houlroyd,
22 who is online, and she is going to be remote from Georgia
23 Tech University.

24 Jenny, are you online there?

25 Is she online still?

1 DR. HOULROYD: I am still here, yes.

2 CHAIR ALIOTO: Okay. Great. Welcome. We're really
3 excited to hear from you.

4 DR. HOULROYD: Thank you.

5 CHAIR ALIOTO: Thank you for being here.

6 We're also going to hear from Mike Wilson,
7 Cal/OSHA, and Eric Berg.

8 And Mr. Berg, why don't you take it over and
9 brief the Board. Thank you.

10 MR. BERG: All right. Thank you very much, Chair
11 Alioto.

12 Okay. So we have a couple speakers first.
13 First we'll have Dr. Houlroyd from the Georgia Institute
14 of Technology. Dr. Houlroyd serves as the Occupational
15 Health Group manager for the Safety, Health, and
16 Environmental Services Program at Georgia Tech. She's a
17 Certified Industrial Hygienist with the OSHA Consultation
18 Program and assists small businesses throughout Georgia
19 to ensure that their workplaces are as free from hazards
20 as possible and that workers are protected from potential
21 health risks. She also serves as faculty for the OSHA
22 Training Institute Education Center at Georgia Tech and
23 for the Professional Master's in Occupational Safety and
24 Health Program. I'll let Dr. Houlroyd take it over.

25 We've got the wrong PowerPoint up there.

1 CHAIR ALIOTO: All right, Dr. Houlroyd. Let's get
2 our PowerPoint presentation. We'll figure this out from
3 our end, if you can just stand by.

4 DR. HOULROYD: No problem.

5 CHAIR ALIOTO: All right, Doctor. Go ahead. Thank
6 you so much.

7 DR. HOULROYD: All right. Good afternoon, everyone.
8 Thank you, Chairman and the Board, for allowing me to
9 share my experience with all of you as an industrial
10 hygienist working with stone countertop fabricators.

11 Next slide, please.

12 The results, images and videos included in this
13 presentation are from real-life industrial hygiene
14 sampling. The results were collected as part of the
15 Georgia OSHA 21(d) Consultation Program, which is funded
16 by the U.S. Department of Labor, OSHA.

17 The images and videos are from OSHA consultation
18 visits. We also hired Mixed Bag Media, which is a film
19 crew, to take some video footage as part of a Susan
20 Harwood Training Grant that we received, and I am
21 required to say whenever I share Susan Harwood Training
22 Grant material that this does not necessarily reflect the
23 views or policies of the U.S. Department of Labor, nor
24 does mention of trade names, commercial products, or
25 organizations imply endorsement by the U.S. Government,

1 And I have also served as an expert witness for silicosis
2 cases.

3 Next slide, please.

4 All right. So how did I end up here speaking
5 with you guys today? I started my career as an
6 industrial hygienist with the Georgia Tech OSHA
7 Consultation Program in 2005. I remember my first year
8 as a consultant visiting stone countertop fabrication
9 shops while training in my position.

10 Our primary goal at the time was to demonstrate
11 to employers the hazards of cutting dry. There was no
12 specific OSHA standard for respirable crystalline silica
13 or RCS at the time and typically we would endeavor to
14 convince them to implement wet methods and we knew this
15 method would successfully reduce exposures to silica.
16 However, something changed around like 2017. Suddenly, for
17 some common fabrications tasks, referred to as similar
18 exposure groups, we were seeing air sampling results from
19 stone fabrication shops multiple times the OSHA PEL,
20 which is 50 micrograms per cubic meter; and even though
21 the companies have been using wet methods or local
22 exhaust ventilation, if fabrication tasks were conducted
23 dry, results were turned back well over 40 times the OSHA
24 PEL.

25 Our conversations with employers went from,

1 "This is how we reduce exposure" to "We need to research
2 additional controls, but in the meantime, we must protect
3 the employees with additional respiratory protection."
4 These are dangerously high levels of exposure and they
5 are primarily impacting vulnerable workers.

6 On average, our program assists approximately
7 five stone fabrication companies annually and over the
8 past 19 years working at Georgia Tech, I've had the
9 privilege to speak with hundreds of workers cutting and
10 polishing stone slabs.

11 Here, I have five of those workers shown;
12 however, given the growing epidemic of cases of silicosis
13 due to RCS exposure from fabricating engineered stone
14 slabs, I know unfortunately, given the estimated
15 prevalence, at least one of these men will develop and
16 die from silicosis.

17 Next slide, please.

18 I thought long and hard about what I wanted you
19 to lead with as my key points for you to remember and
20 these are the five points I want to convey through my
21 presentation: The first is that common engineering
22 controls for stone fabrication do not consistently reduce
23 exposures below the permissible exposure limit when current,
24 the current formulation of engineered or artificial stone is
25 present.

1 Both large and small fabricators have exposure
2 to respirable crystalline silica.

3 Three, industrial hygiene monitoring typically
4 only captures a snapshot of exposure, and this is
5 particularly true in cases of fabrication versus
6 manufacturing and careful analysis of our air sampling
7 results show wide variation exposure over time and within
8 work dates.

9 Four, caution should be used when using
10 respirable dust as a proxy for respirable crystalline
11 silica exposure.

12 And then, finally, five: Respiratory protection
13 is necessary for all employees who are working with stone
14 fabrication shops that process engineered stone slabs.

15 Next slide, please.

16 The data I will present today consists of air
17 sampling for both respirable dust and respirable
18 crystalline silica that was conducted as part of Georgia
19 Tech OSHA Consultation Program visits at stone
20 fabrication shops from 2017 through 2023. The results of
21 this analysis have been written into a scientific
22 journaled manuscript and have been submitted to the
23 Annals of Work Exposures and Health. We will also be
24 publishing the dataset that is the source for this
25 analysis.

1 Next slide,

2 So starting with point one, I want to emphasize
3 that engineering controls for stone fabrication did not
4 consistently reduce exposures below the permissible
5 exposure limit in our dataset. We had 75 employees that
6 we monitored for a full shift. Six cut dry, three were
7 support workers, three used wet methods in the vicinity
8 of dry cutting; and for the remaining 63 employees who
9 exclusively used wet methods, 51 percent had exposures at
10 or above the permissible exposure limit, reaching as high
11 as 370 micrograms per cubic meter, and 70 percent of
12 those monitored had exposures above the action level.
13 Water and ventilation did not reduce exposures below the
14 PEL when fabricating engineered stone quartz countertops
15 due to the high silica content in this product.

16 Next slide.

17 If you could click on the bottom, there is a
18 video that goes with this. There we go. It's showing.

19 Okay. For this to further demonstrate point
20 one, I want to emphasize that this video shows a
21 water-fed CNC circular saw used to cut a slab and
22 typically the employee that is programming this machine
23 is working in this location or nearby while the work is
24 being done, and you can make out that employee in the
25 back. He's wearing a yellow hard hat.

1 When the saw cuts, it uses a steady stream of
2 water to suppress dust; however, what you can see
3 happening is fine mist droplets of water get thrown into
4 the air, containing silica dust, and these water droplets
5 contain silica dust; and depending on the humidity, the
6 size of the droplets, these droplets can remain suspended
7 in the air for a period of time and then settle along
8 with the silica dust to surfaces throughout the shop.

9 Next slide, please.

10 This is also a video, if you could -- there we
11 go. The second main wet method that we see with
12 employees in stone fabrication shops is when they are
13 using small tools. Here is a gentleman and he is
14 polishing using a fully integrated water delivery system
15 in his polisher and because of the high velocity, water
16 is thrown into the air and that water is also containing
17 respirable crystalline silica.

18 And I think it's also important to note that
19 this video represents what most shops look like. It is a
20 large shared space where everyone works in a common area.

21 Next slide.

22 This is just an image and this image is of a
23 water jet that is used to cut a slab. We used a film
24 crew that used back lighting to allow us to see that as
25 the water cuts through the slab, you have both dust

1 emissions and fine dust particles being thrown in in
2 addition to the water being used.

3 Next slide.

4 Coming back to my second point: My second point
5 is that those both large and small fabricators are
6 exposed to respirable crystalline silica above the PEL
7 for the sites that we visited. We worked with six
8 companies that had fewer than 25 employees and five
9 companies that had 25 or more employees. We conducted
10 eight visits at the small companies and monitored 28
11 total employees and their exposures ranged from 9.2 to
12 370 micrograms per cubic meter.

13 In contrast, we conducted nine visits at larger
14 companies where we monitored 49 employees and their
15 exposures ranged from below the detection limit for our
16 lab to up to 5,100 micrograms per cubic meter.

17 Ultimately, when you look at the percentages of
18 employees exposed to respirable crystalline silica above
19 both the action level and the permissible exposure limit,
20 you can see that they're relatively similar regardless of
21 the company size.

22 Next slide.

23 My third point is related to industrial hygiene
24 monitoring and I think industrial hygiene monitoring is
25 particularly challenging when you're looking at

1 fabrication versus manufacturing because fabrication
2 changes from day to day, and I wanted to point out
3 several key points. When I review air sampling conducted
4 by a company or the consultants that they hire, there are
5 several questions that I ask, including: Have an
6 appropriate number of samples been collected? We want to
7 see if the results represent all the different jobs at
8 the shop, including support employees working in and
9 around fabrication, such as forklift drivers.

10 Do they represent the ratio of natural versus
11 engineered stone slab fabrication on any given day? At
12 the fabrication shops we have visited, the orders vary
13 greatly from day to day. If the day of sampling was
14 conducted was primarily natural stone versus engineered
15 stone, we can tell by looking at the exposure monitoring
16 results, the difference.

17 We also look at intraday variation and if that's
18 been captured. We switched to a higher flow rate cyclone
19 so that we could collect two samples from each employee
20 throughout the day to see if there are differences
21 between morning and afternoon, and I will share some of
22 those results later.

23 Is the employer counting -- accounting for
24 engineering control failure and have all similar exposure
25 groups been included in the air sampling?

1 And in our paper, we present four different
2 exposure groups: The support workers, those who
3 fabricate around using automated machines, small tool
4 operators, and those employees performing fabrication and
5 lamination activities.

6 Next slide.

7 Drilling down on my third point, I have this
8 first case study, which is the intraday variation. In
9 this slide, I reviewed the lab reports to see what type
10 of intraday variation was observed in our dataset.
11 Time-weighted averages represent what has been shown to
12 employees over an entire work shift and often missed some
13 of the peak exposures that occur throughout a day.

14 For the first worker, a polisher using wet
15 methods, the exposure was twice the PEL in the morning
16 and then below the lab's reporting limit in the
17 afternoon.

18 The next two employees were fabrication
19 fabricators that were laminating two slabs together. One
20 was dry cutting and the other was using wet methods. In
21 both cases, the exposures doubled from the morning to the
22 afternoon.

23 The fourth employee was just a forklift driver
24 and designated as a floater. His exposure was 65
25 micrograms per cubic meter in the morning and was 470

1 micrograms per cubic meter in the afternoon. He was not
2 engaged in fabricating but was in the vicinity of
3 fabrication taking place.

4 And finally, the highest exposure in our dataset
5 was a fabricator at a large company working in a location
6 where the water curtain ventilation system failed. The
7 exposure ranged from 2,200 to 6,800 micrograms per cubic
8 meter and represents the difference between requiring an
9 APF of 50 or Assigned Protection Factor for a respirator
10 of 50 versus the Assigned Protection Factor of 1,000.

11 Next slide, please.

12 Another limitation of industrial hygiene
13 monitoring is variation over time. At site six, we did
14 conduct four visits throughout the five-year time frame.
15 At the first visit, the consultant identified exposures
16 well above the permissible exposure limit. As a result,
17 the company prohibited dry cutting and installed water
18 curtain ventilation systems.

19 At the next visit, with the implemented changes,
20 exposures were reduced, though they were not reduced
21 below the permissible exposure limit.

22 At the third visit, however, exposures had
23 returned to being multiple times the permissible exposure
24 limit. Employees had resorted to dry cutting and the
25 water curtain ventilation system was no longer

1 functioning.

2 Follow-up monitoring wearing full gear, a return
3 to wet methods and the water curtain ventilation system
4 had been fixed showed that exposures were once again
5 reduced but still above the action level.

6 Next slide.

7 A third example for the related to industrial
8 hygiene monitoring and the third concern is that relying
9 on industrial hygiene monitoring is that oftentimes
10 support employees are often not included in the
11 monitoring. We have inputted -- we monitored several
12 support workers and so we took them out of our dataset
13 and did a separate analysis and using the Bayesian
14 Statistics analysis, we were able to demonstrate that
15 workers have a 22 percent probability of needing at least
16 an APF of 50, Assigned Protection Factor of 50, to
17 adequately be protected when it comes to respiratory
18 protection, and virtually 100 percent of workers in this
19 category would require a respirator.

20 Next slide.

21 A fourth key point -- and I only bring this up
22 because I've had several companies and employers and
23 professionals ask, "Can we use respirable dust to
24 estimate what the respirable crystalline silica exposure
25 is?" and I caution against that. Respirable dust, we

1 analyzed. We took a respirable dust sample for every
2 respirable crystalline silica exposure and we analyzed
3 them.

4 Now, while they were strongly correlated for
5 those in which we had a respirable crystalline silica
6 exposure result and a respirable dust result, we looked
7 at 22 samples where the respirable dust level was below
8 the reporting limit for the lab, which basically means
9 that the lab said that they couldn't identify any
10 respirable dust present, and eight of those 22 had
11 respirable crystalline silica exposures that were above
12 the action level, meaning if we used respirable dust as a
13 proxy, we would have missed eight cases of people being
14 overexposed.

15 Next slide.

16 And finally, my fifth key point is that
17 respiratory protection is absolutely necessary for all
18 employees working in stone fabrication shops that process
19 engineered stone slabs. We analyzed our entire dataset
20 using Bayesian decision analysis to determine what
21 category of respiratory protection is necessary for
22 workers.

23 For the prior, we inputted the actual
24 respiratory protection that was used by the workers. So
25 56 -- most, 56 percent of the workers, wore an APF of 10,

1 meaning they were either wearing an N95 or a half-mask
2 elastomeric respirator, and then 41 percent wore no
3 respiratory protection at all, and then there were two
4 employees that were wearing a full-face elastomeric
5 respirator which had an APF of 50. However, while we
6 looked at the actual air sampling results, which are
7 presented in the table for the likelihood, based off of
8 these different categories, 75.5 percent of all workers
9 have a probability of needing to wear a respirator with
10 an Assigned Protection Factor of at least 50 for their
11 respiratory protection, which would include the powered
12 air-purifying respirator category.

13 Next slide, please.

14 Another way to look at this is by using a risk
15 assessment based on the 95th percentile, and this is
16 really taking into account that air sampling results
17 typically in industrial hygiene are not normally
18 distributed and typically have a -- you'd need to do a
19 lot more where we get into the math, but we won't.

20 But what I want to show you is that the 95th
21 percentile of our dataset has the exposures being at 605
22 micrograms per cubic meter, which is many times above the
23 permissible exposure limit, and when you look at the
24 distribution of our air sampling results, which is the
25 image that's on the right-hand side, you can see that the

1 majority of the air sampling results were above the
2 occupational exposure limit, and the credible range for
3 this 95th percentile is 418 micrograms per cubic meter up
4 to 935 micrograms per cubic meter.

5 Next slide, please.

6 One of the reasons why I passionately believe
7 that all workers working with engineered stone slabs need
8 to wear respiratory protection is because there's still
9 so much that we're learning about why workers who
10 fabricate engineered stone slabs are developing silicosis
11 at such an accelerated rate and why there is such a high
12 prevalence of cases.

13 There is a complex mixture of resins, volatile
14 organic chemicals, metals, and respirable crystalline
15 silica all impacting the workers' lungs, yet we are
16 really only in the field quantifying the exposure to
17 respirable crystalline silica. We must also remember
18 that engineering controls do fail, leaving workers
19 exposed.

20 I commonly refer employers to the OSHA Small
21 Entity Compliance Guide, which states that OSHA considers
22 failure of engineering controls to be a situation that is
23 reasonably foreseeable when it relates to silica and
24 although engineering controls are usually reliable means
25 for controlling employee exposure, equipment does

1 occasionally fail, and let me show you what that looks
2 like.

3 Next slide, please.

4 In this slide, there are three images. The
5 first two were taken at company six, which I shared the
6 results for that company already. This company relaxed
7 worker protections after installing engineering controls;
8 however, the water curtain ventilation system was not
9 functioning properly, as shown in these images. The
10 first two images are from that site.

11 What it should look like I have included in the
12 third image, which you can see. I'm not sure if you can
13 see it from where you're sitting, but there is water
14 coming down and you can visibly see what's going on and
15 that it is effectively pulling any silica out of the air.

16 Yes, the employees in the first two pictures
17 were wearing respirators; however, these were
18 half-masked-type fitting elastomeric respirators with a
19 combination P100 organic vapor cartridges, but they were
20 not effective for the exposure levels. Not only that,
21 these employees, as we often see in fabrication shops,
22 were working 12-hour shifts due to the large number of
23 orders, which means that during these 12-hour shifts,
24 they were -- their lungs were bearing the burden of
25 equivalent to a shift and a half every single day, not to

1 mention how for these negative-pressure respirators, the
2 machine operating the respirator is the employee's lungs.
3 The respirable crystalline silica occupational exposure
4 limits were based off of an eight-hour workday and for
5 many fabrication shops, the actual dose time is much
6 longer.

7 If we were to be protective, we would want to
8 reduce the action level and the PEL even further
9 threshold during these longer shifts, which is another
10 reason why respiratory protection to reduce exposure
11 further is critical to protecting worker health and
12 reducing the risk of developing accelerated silicosis.

13 Next slide, please.

14 I want to thank my colleagues that helped
15 collect and analyze the data. We had an external
16 researcher, Dr. Jhy-Charm Soo, who was a biostatistician,
17 conduct the statistical analysis and my colleagues
18 Hilarie Warren, Brandon Philpot, Sean Castillo and I were
19 the consultants who collected the data and performed the
20 visits.

21 Next slide, please.

22 And thank you so much for your time and I'd be
23 happy to answer any questions you have.

24 CHAIR ALIOTO: Thank you so much, Doctor. It was a
25 very informative, eye-opening presentation.

1 Mr. Berg, how do you want to do this? Would you
2 like to have all of your presentations or should we do
3 questions one at a time?

4 MR. BERG: Would you prefer to have questions now,
5 Dr. Houlroyd, just so you can leave if you have to leave?
6 I know you're three hours ahead of us.

7 CHAIR ALIOTO: Why don't we see if -- if it's okay
8 with you, Doctor, we'll ask you questions about your
9 presentation now --

10 DR. HOULROYD: Okay.

11 CHAIR ALIOTO: -- and if you are able to stay until
12 the end of the other presentations for potential
13 follow-ups, that would be great. If you have to go, we
14 recognize that it's 3:30 in -- where you are, I think.

15 DR. HOULROYD: Yes.

16 CHAIR ALIOTO: Okay. So we completely understand. I
17 don't want to take up too much of your time.

18 DR. HOULROYD: I'd be happy to stay. Thank you.

19 CHAIR ALIOTO: Okay. Thank you.

20 Are there any questions from the Board for
21 Dr. Houlroyd? Please.

22 BOARD MEMBER THOMAS: Yeah. I was just looking at
23 the statistics here. Is it possible to work safely in
24 this industry without destroying your lungs over a period
25 of time, even with controls?

1 DR. HOULROYD: It is my professional opinion, as long
2 as the high-silica-content engineered stone slabs are
3 present, I do not -- we have not been able to
4 consistently and effectively get companies to keep their
5 exposures below the occupational exposure limits, so no.

6 BOARD MEMBER THOMAS: Thank you.

7 CHAIR ALIOTO: Any other questions? Mr. Urwin?

8 BOARD MEMBER URWIN: You mentioned in one of your
9 last slides that when engineering controls were in place
10 that some of those worker protections were relaxed. Can
11 you just mention what those protections were that you
12 observed that were relaxed and the presence of
13 engineering controls, whether they were functioning or
14 not?

15 DR. HOULROYD: Yes. Thank you for your question.

16 Oftentimes when people cut wet or polish wet, we
17 see them feel that the water is protective enough and so
18 they cease to wear respiratory protection. There's a
19 myriad of reasons of why they want to do it. Respirators
20 are hard to breathe through and it's hard to wear them
21 all day long and so they create a false sense of security
22 that if they're doing some form of engineering control,
23 they've reduced the risk enough to make it comfortable to
24 not wear a respirator, and that's most common what we
25 see.

1 BOARD MEMBER URWIN: And just a follow-up question:
2 Are there ways that the effectiveness or the correct
3 function of engineering controls are measured in these
4 environments or is it just, Hey, the device is on or it's
5 not on?

6 DR. HOULROYD: That's another great question. I have
7 visited many stone fabrication shops and many just
8 industrial plants in general and what I find is that the
9 effectiveness of controls actually varies hour to hour
10 for some of these control methods and what we see
11 sometimes is that the water flow for the fully integrated
12 tools, they will adjust the water flow so that they can
13 better see the edges in which they're working, and so I
14 have witnessed to be able to see a tough corner of a sink
15 hole that they're working on, they may temporarily turn
16 off the control measure and then turn it back on. So
17 that's the first element, so that time by time.

18 The second element is anecdotally, many, many
19 fabricators have told me that the product itself breaks
20 down the engineering controls over time so that the
21 engineering controls themselves were not necessarily
22 designed to handle the dust that is produced from the
23 engineered stone slabs. So that's another element, which
24 was the case with the water curtain ventilation system.

25 And they're pretty frenetic job sites where

1 they're fabricating stone slabs, so sometimes things can
2 get -- sometimes there is poor management of it over
3 time.

4 BOARD MEMBER URWIN: And sorry. Just to close out
5 the question, just for like the layperson, right, so
6 there's no green, yellow or red light that indicates your
7 engineering control is currently functioning and/or
8 effective. Is that correct, if I've understood your
9 explanation?

10 DR. HOULROYD: Yes. For the most part, there is no
11 green/red light. Sometimes ventilation systems will have
12 a dial that tells you whether or not they're functioning,
13 but that -- there's also the positioning of the
14 ventilation system adjacent to the slab that has an
15 impact on that as well.

16 BOARD MEMBER LASZCZ-DAVIS: I've got a question.

17 It seems to me, given that this is a profession
18 and a product that's fairly lucrative, that the
19 consortium of fabricators would have got together in some
20 such, some sort of forum to develop best practices in terms
21 of engineering controls, especially when you profile the
22 issues as you have. I mean, does such a consortium
23 exist?

24 DR. HOULROYD: There are professional associations
25 and I believe that they are presenting today as well.

1 BOARD MEMBER LASZCZ-DAVIS: Okay. Thank you.

2 CHAIR ALIOTO: Other questions for the doctor?

3 All right. Doctor, I have a couple.

4 The data you just presented, we've been hearing
5 a lot about respirable crystalline silica for months now.
6 I felt that I had a pretty good control of some of the
7 facts. You've presented something that in my opinion has
8 now opened a bit of a Pandora's box in light of what
9 you've just presented, so I want to ask you about the
10 quality of your data because if your data is accurate,
11 then I think that will change things potentially.

12 You mentioned at the outset that you presented
13 your data to a journal, I think. Was that journal
14 peer-reviewed?

15 DR. HOULROYD: We just submitted it, so we're waiting
16 to hear back if it's been accepted, but it would be
17 peer-reviewed if it's accepted, yes.

18 CHAIR ALIOTO: I see. All right.

19 And have you had any -- has there been any
20 criticism of your data with any others with whom you've
21 shared it or them?

22 DR. HOULROYD: Not that I'm aware of. All of the
23 data collection, we follow the methods and procedures
24 that are policy in the CPPM, which is the Consultation
25 Procedures and Policy Manual, and we sent the data to a

1 third -- an external person to do the analysis to add the
2 integrity of the data analysis.

3 CHAIR ALIOTO: Has there been any independent review
4 of your data or its collection?

5 DR. HOULROYD: We are planning on publishing the
6 entire dataset to allow that to happen.

7 CHAIR ALIOTO: Yeah. Understood.

8 And then your sponsor you mentioned is the U.S.
9 Department of Labor. Were there any other sponsors to
10 your study besides Labor?

11 DR. HOULROYD: No. There was not and, in fact,
12 the -- it was all part of Consultation and the Susan
13 Harwood Training Grant.

14 CHAIR ALIOTO: All right. So in light of all of that
15 and assuming -- and I have no reason to doubt the
16 integrity of your data at all -- and assuming it to be
17 correct, to follow up on Board Member Thomas's question,
18 there's not a safe way to do this even using wet methods
19 unless you have a full-face mask. Is that a correct
20 conclusion?

21 DR. HOULROYD: That's correct.

22 CHAIR ALIOTO: What did you -- what did you mention
23 toward the end of your presentation about use of a half
24 mask?

25 DR. HOULROYD: So when you look at -- just to kind

1 of -- I'm sorry if I'm saying this too simply. I just
2 want to make sure everyone in the room understands.

3 So when you do air sampling for any type of
4 exposure, you have what's called the Assigned Protection
5 Factor, which tells you how many times that exposure
6 limit you can be exposed to and consider that mask to
7 still be working, and so for the images that I shared
8 where there was the employee and the engineering control
9 failed, he was wearing a half-mask elastomeric
10 respirator, which means in theory, he could be exposed
11 ten times the permissible exposure limit. So that would
12 be 50 times 10, so he could be exposed up to 500
13 micrograms per cubic meter before we would expect that
14 half-mask elastomeric respirator to fail. That employee
15 was exposed to -- over a full shift to 5,100 micrograms
16 per cubic meter.

17 So doing the math with that, he would need more
18 than 100 times the limit or an Assigned Protection Factor
19 of 100 or greater, which means you would be jumping into
20 either the power -- the tight-fitting powered air
21 purifying respirator as is proposed in the silica
22 standard, per Cal/OSHA.

23 CHAIR ALIOTO: All right. Just a last set of
24 questions that I had for you. You mentioned that you had
25 served as an expert witness. Is that in a federal court?

1 DR. HOULROYD: That was in California and it was a
2 civil case.

3 CHAIR ALIOTO: Okay. So was that in a California
4 court?

5 DR. HOULROYD: Yes.

6 CHAIR ALIOTO: So California state court. And did --
7 were you qualified as a witness in that case -- I mean
8 qualified as an expert?

9 DR. HOULROYD: I was called as an expert, I was
10 deposed, and then I was actually not -- I didn't end up
11 testifying.

12 CHAIR ALIOTO: Okay. So you were -- was there ever
13 any kind of motion filed about your expert status in the
14 court or anything of that nature?

15 DR. HOULROYD: Yes, there was, but I am not a lawyer,
16 so I don't -- I'd have to call somebody else to explain
17 the specifics of that.

18 CHAIR ALIOTO: I completely understand. I completely
19 understand. All right.

20 DR. HOULROYD: But yes. I was deemed because the
21 data that I was referencing with Consultation had not
22 been formally published that I could not be qualified as
23 an expert.

24 CHAIR ALIOTO: Okay. Understood. All right. Great.

25 What is the time frame do you think for the peer

1 review of your data?

2 DR. HOULROYD: I am not sure. We can reach out to
3 the journal and ask. I'd be happy to do that.

4 CHAIR ALIOTO: That's all right. Thank you so much.

5 Did anybody else have any follow-up?

6 Oh, yes. Chris, go ahead.

7 Thank you, Doctor.

8 BOARD MEMBER LASZCZ-DAVIS: You know, I don't know if
9 it's appropriate for me to ask, but let me go ahead. I'm
10 sure somebody will tell me to stop if it's not
11 appropriate.

12 Have you had a chance to read the proposed
13 silica standard?

14 DR. HOULROYD: Yes, I have had a chance to read the
15 proposed standard.

16 BOARD MEMBER LASZCZ-DAVIS: And do you think it goes
17 far enough to address the issues that you've identified?

18 CHAIR ALIOTO: Yeah. Good question.

19 DR. HOULROYD: I don't know that I'm qualified to say
20 that per se because I know that my doctorate is in public
21 health policy and I know how complex the policy window
22 is. So in an ideal world, I would look to what Australia
23 did and -- but I understand the framework that we're
24 working with.

25 BOARD MEMBER LASZCZ-DAVIS: Okay.

1 DR. HOULROYD: I don't know if I answered that
2 appropriately either.

3 BOARD MEMBER LASZCZ-DAVIS: I mean, I appreciate your
4 stance.

5 MR. BERG: Australia banned artificial stone. It's
6 completely prohibited, so that's the reference.

7 BOARD MEMBER KENNEDY: So I'm sorry. This actually
8 is a question that you can probably answer, but there may
9 be other people in the room who can answer it also.

10 I'm curious, this seems to me while these slabs
11 for countertops are quite large -- when they're working
12 on them, it does seem to me this is a process that could
13 be enclosed and operated, say, computer-controlled or
14 even in a glove box type situation perhaps, although that
15 might be unwieldy, and I'm just wondering if you or
16 anyone else in this room has seen that type of operation,
17 if that exists.

18 DR. HOULROYD: For the countertop shops that I
19 visited, none have fully enclosed their operations.

20 MR. BERG: We had in our original proposal a
21 negative -- negative pressure enclosures like that's
22 required for asbestos, but the industry mentioned that
23 they use cranes to lift the product, so it would -- it
24 would not be possible for them to do that, so we
25 eliminated that.

1 BOARD MEMBER KENNEDY: Okay. It seems to me it could
2 be closed after the piece was put in place but maybe not.
3 I don't clearly understand the process entirely and I'm
4 not trying to take away from this presentation, but maybe
5 later when there are comments, someone will address that
6 question if they know an answer.

7 CHAIR ALIOTO: Any other questions from the Board for
8 Dr. Houlroyd? No. All right.

9 Mr. Berg, please continue, thank you, sir.

10 MR. BERG: Thank you very much.

11 CHAIR ALITO: Doctor, thank you so much for your time.
12 If you're able to stick around, that would be very helpful
13 and terrific. If you're not, it's completely understood
14 and we really appreciate your input.

15 DR. HOULROYD: I'd be happy to stick around. Thank
16 you very much for the opportunity to present.

17 CHAIR ALIOTO: Thank you.

18 MR. BERG: And thank you for your presentation. It
19 was excellent.

20 Next we have Dr. Amy Heinzerling. She's the
21 Chief of the Emerging Workplace Hazards Unit in the
22 Occupational Health Branch of the California Department
23 of Public Health. Thank you, Dr. Heinzerling.

24 CHAIR ALIOTO: Good afternoon.

25 DR. HEINZERLING: Good afternoon. I'll give them a

1 moment to pull up my presentation here before I get
2 started. It looks like it's all set.

3 All right. Good afternoon, Chair Alioto and
4 Members of the Board. Thank you very much for having me
5 again here to speak with you today.

6 As you heard from Eric, my name is Dr. Amy
7 Heinzerling. I'm a Public Health Medical Officer with
8 the California Department of Public Health Occupational
9 Health Branch where I lead our Emerging Workplace Hazards
10 Unit.

11 I'm here today on behalf of the California
12 Department of Public Health to share updates about
13 silicosis among about engineered stone countertop
14 fabrication workers in California and to urge your
15 support for the proposed revisions to the silica
16 regulation that are before you for a vote today.

17 The CDPH Occupational Health Branch has been
18 tracking cases of engineered stone silicosis since we
19 identified the first cases in 2019. This slide shows the
20 number of engineered stone-related silicosis cases by
21 year identified. As you can see, the rate of case
22 identification continues to accelerate. This year alone
23 we've identified more than 100 cases, an average of more
24 than two cases per week.

25 To frame it another way, at the time of the

1 Standards Board vote on the Western Occupational and
2 Environmental Medicine Association Petition for an
3 emergency temporary standard for silica in July of 2023,
4 CDPH had identified 52 cases of silicosis among
5 California engineered stone countertop fabrication
6 workers, including at least ten deaths and three lung
7 transplants.

8 Now, a year and a half later, the number of
9 cases has more than quadrupled. As of this past Monday,
10 December 16th, we had identified 230 cases of engineered
11 stone silicosis, including at least 14 deaths and 27 lung
12 transplants and in the few days since I finalized these
13 slides, these numbers have already changed. We've
14 learned of an additional death and two additional lung
15 transplants, bringing the total to at least 15 deaths and
16 29 lung transplants among these workers.

17 As alarming as these numbers are, we're
18 concerned that these cases are just the tip of the
19 iceberg. To date, we've identified more than 800
20 countertop fabrication shops in California, likely
21 representing 5,000 or more workers.

22 In a prior study at one employer here in
23 California, we found that 12 percent of their workers who
24 were screened for silicosis using chest X-ray had
25 silicosis.

1 In Australia where screening programs use more
2 sensitive chest C.T. scans, they found greater than
3 20 percent of countertop fabrication workers have
4 silicosis.

5 If you apply these rates to the estimated 5,000
6 workers in California, that would represent somewhere
7 between 600 and more than 1,000 workers with silicosis,
8 which is three to five times those more than those that we know
9 about already. These additional cases may be in workers
10 who have not yet been screened or not sought medical
11 care, whose diagnosis has not yet been recognized by
12 providers or whose diagnosis has not yet been reported to
13 Public Health.

14 Almost all of the affected workers we've
15 identified in California are young Latino men with a
16 median age at diagnosis of 46. These are not workers
17 with minor recoverable work-related injuries. These are
18 young workers like Leobardo Segura Meza, pictured here at
19 age 27, who spoke to the Standards Board last July with
20 an incurable, disabling, and ultimately life-limiting
21 disease.

22 Silicosis occurs when silica dust is inhaled
23 deep into the lungs, causing inflammation and
24 irreversible scarring which makes it harder and harder
25 over time for the lungs to take in oxygen. As the

1 disease progresses, it leaves these leaves these workers
2 too short of breath to walk down the street or to play
3 with their children, let alone to continue working and
4 supporting their families.

5 Silicosis is a devastating disease, but it is
6 also entirely preventable with reduction or elimination
7 of silica dust exposure. Engineered stone, however, with
8 its very high silica content makes it very challenging,
9 meaning that multiple levels of controls, as you just
10 heard, are needed to adequately protect workers.

11 Engineering controls like water-fed tools and
12 appropriately installed ventilation are necessary to
13 reduce dust levels, but as you just heard very clearly
14 from Dr. Houlroyd, their effectiveness is typically
15 dependent on being correctly installed and used.

16 As I pointed out when I spoke to you previously
17 back in October, the data that the stone industry
18 presented to you in September showed that even with wet
19 methods in use, a quarter of the air samples from their
20 shops still exceeded the action level for respirable
21 crystalline silica. The numbers from Dr. Houlroyd's
22 shops are even worse with over 50 percent of samples
23 exceeding the permissible exposure limit, even with wet
24 methods.

25 As in the current emergency temporary standard,

1 the proposed revisions to the permanent permanent silica
2 standard significantly strengthen engineering control
3 requirements as well as Cal/OSHA's enforcement abilities
4 which are essential components of reducing exposure, but
5 because engineering controls alone do not guarantee
6 adequate risk reduction, appropriate respiratory
7 protection is also needed. Cal/OSHA's proposed revisions,
8 with which strengthen respirator requirements for high-risk
9 workers, would help ensure that workers are adequately
10 protected.

11 You'll likely hear from the stone industry today
12 that for responsible employers with engineering controls
13 in place, respirators are not needed; but as I just
14 mentioned, their own data show that even with wet methods
15 in place, a quarter of workers in their own trade
16 association members' shops remained exposed; and as you
17 heard from Dr. Houlroyd today, workers' exposures can
18 vary dramatically from day to day depending on the task
19 being performed and the material being fabricated. So
20 even if exposure monitoring data on one day show worker
21 exposures below the action level, that does not guarantee
22 that exposures are always well controlled.

23 Cal/OSHA has already appropriately addressed
24 this concern from the industry by including a provision
25 in the proposed regulation for responsible employers.

1 In the regulation before you today for a vote,
2 if employers can demonstrate strict compliance with the
3 standards requirements, workers can wear lower-level
4 respirators with an assigned protection factor of 10 or
5 greater rather than a full-faced, tight-fitting PAPR with
6 an assigned protection factor of 1,000 or greater.

7 We believe that this proposal strikes an
8 appropriate balance adjusting respirator requirements
9 based on controls that are in place while ensuring that
10 workers continue to have a necessary additional level of
11 protection.

12 The proposed revisions also significantly
13 improve medical surveillance requirements in the
14 standard. Under the current silica regulation, employers
15 must offer silica-exposed workers a medical surveillance
16 examination at baseline and then three years. This exam
17 includes a chest X-ray and other components that screen
18 for silicosis. Unfortunately, however, chest ray chest
19 X-ray has been shown to be an inadequate tool for
20 detecting silicosis in engineered stone countertop
21 workers.

22 In Australia, where they've done extensive
23 screening of current and former workers in the industry,
24 they found that about 40 percent of cases of engineered
25 stone silicosis are missed on chest X-rays. They instead

1 recommend the more sensitive chest C.T. scans, which are
2 much better at detecting silicosis, particularly in its
3 early stages.

4 CHAIR ALIOTO: Doctor, could I interrupt you briefly?

5 DR. HEINZERLING: Sure.

6 CHAIR ALIOTO: We have interpreters and a
7 transcribers --

8 DR. HEINZERLING: Slow down?

9 CHAIR ALIOTO: -- and some of this is fairly
10 technical. You are doing a fabulous job, but if you
11 could just slow it down a little bit, I'd appreciate it.
12 Thank you.

13 DR. HEINZERLING: I'm happy to. No problem.

14 So as I was just saying, in Australia, they're
15 now recommending chest C.T. scan rather than chest X-ray
16 for screening for silicosis, which is a much more
17 sensitive tool.

18 The proposed revisions to the silica regulations
19 would, therefore, require low-dose chest C.T. instead of
20 chest X-ray for initial and periodical medical
21 examinations for workers exposed to high-exposure trigger
22 tasks. CDPH strongly supports this change, which will
23 help improve detection of silicosis for high-risk
24 workers.

25 Early detection of silicosis in these workers is

1 crucial, as it both can help prevent additional silica
2 exposure going forward as well as ensure that these
3 workers are receiving the appropriate medical care.

4 I want to end today with a reminder of the
5 workers behind the numbers I've presented to you.

6 Pictured here are Juan Gonzalez on the left and
7 Gustavo Reyes on the right, two California countertop
8 fabrication workers who became ill with silicosis in
9 their early thirties. They were both featured in news
10 stories about this issue in late 2022. At the time these
11 photos were taken, both were awaiting lung transplant.

12 Gustavo, on the right, later received a lung
13 transplant and is doing well, though he, like other
14 workers who've undergone lung transplant, still faces a
15 limited life expectancy and the need to take powerful
16 immunosuppressant medications for the rest of his life.

17 Juan, on the left, passed away in the intensive
18 care unit before a donor lung became available, leaving
19 behind four children.

20 Workers should not be dying or needing lung
21 transplants for the sake of our kitchen countertops.
22 Artificial stone is a uniquely hazardous material and it
23 should be regulated as such. The proposed revisions to
24 the permanent silica regulation that are before you today
25 for a vote do exactly that.

1 You'll likely hear from the stone industry that
2 more time is needed for Cal/OSHA to work with industry
3 and other stakeholders to amend the proposed regulation,
4 but Cal/OSHA has already been doing exactly that for the
5 past year. CDPH has been part of many of those
6 discussions and Cal/OSHA has already made changes in the
7 proposal in response to industry concerns.

8 We certainly look forward to continuing to work
9 with partners at Cal/OSHA and in the industry on how best
10 to keep workers safe, but this should not prevent moving
11 forward with today's regulation.

12 If you do not approve the proposed revisions
13 today, the emergency temporary standard that is currently
14 in place will lapse at the end of the year. It cannot be
15 extended any further. These workplaces would revert to
16 being regulated only by the general silica standard,
17 which does not give Cal/OSHA the tools it needs to ensure
18 these workplaces are safe.

19 With new cases of this disabling and incurable
20 but preventable disease being identified every week,
21 these workers cannot afford that lapse in protection nor
22 could they afford any more delays.

23 You have before you today the opportunity to
24 take necessary and historic action to protect them. On
25 behalf of the California Department of Public Health, I

1 urge you to vote in favor of the proposed revisions.

2 Thank you very much for your time and I'm happy
3 to answer any questions.

4 CHAIR ALIOTO: Doctor, thank you very much. I'm
5 going to start with one.

6 DR. HEINZERLING: Sure.

7 CHAIR ALIOTO: Do you still believe that the
8 regulation that allows for the use of a half mask if a
9 manufacturer has complied with certain engineering
10 controls is sufficient to keep workers safe?

11 DR. HEINZERLING: So that -- and I'll let my
12 colleagues from Cal/OSHA correct me if I'm wrong here,
13 but that provision only applies if a workplace can show
14 that they've conducted air monitoring every three months
15 showing levels below the action level, that all of their
16 workers have participated in their medical surveillance
17 program, and that there are no current or former workers
18 who've been diagnosed with silicosis.

19 I think that those three criteria together, you
20 know, are a reasonably good level of insurance that those
21 employers are doing the right thing. I think, you know,
22 there's always going to be some uncertainty remaining,
23 but I think that's, you know, an appropriate compromise.

24 CHAIR ALIOTO: Questions from the Board?

25 BOARD MEMBER THOMAS: So you mentioned -- well, my

1 question is are there any current shops that apply all
2 those controls to make workers I guess as safe as you can
3 make them?

4 DR. HEINZERLING: I think you'll hear in the
5 presentation from the stone industry about some of those
6 shops. I think that there are certainly shops out there
7 who go above and beyond to apply controls and protect
8 their workers, but I think that's a very small fraction
9 of this industry and I think even with all of those
10 controls in place, based on what we know based on what
11 you just heard from Dr. Houlroyd, it's very challenging
12 to guarantee that workers are sufficiently protected 100
13 percent of the time to go without any respiratory
14 protection.

15 BOARD MEMBER THOMAS: And do you believe that the
16 full respirator, the full mask, a scuba gear type, is
17 really the safest way to work in that industry?

18 DR. HEINZERLING: I think it provides a necessary
19 additional level of protection; right? We're all
20 familiar with the hierarchy of controls. You know,
21 ideally we'd be up at the top talking about using safety
22 products and ideally we'd have engineering controls in
23 place that would sufficiently reduce exposures, but I
24 think with all the data that Dr. Houlroyd presented and
25 what we're seeing in these cases of silicosis that we

1 keep identifying tells us that this is a material that's
2 very challenging to work with safely, even if even if
3 you're trying to do all the right things.

4 BOARD MEMBER THOMAS: Thank you.

5 CHAIR ALIOTO: Any other questions for
6 Dr. Heinzerling?

7 Thank you, Doctor.

8 DR. HEINZERLING: Thank you.

9 MR. BERG: Thank you. Thank you very much,
10 Dr. Heinzerling.

11 And then now we'll have the DOSH presentation.
12 I'll do the first three slides and then Dr. Michael
13 Wilson will do the rest of the slides.

14 Thank you very much.

15 All right. The goal of the permanent silica
16 regulation that would replace the emergency regulation is
17 to stop the silicosis epidemic that Dr. Heinzerling
18 talked about that is going on right now and it's killing
19 workers, permanently and severely disabling workers, and
20 destroying their lives and their families' lives.

21 That is the goal of this proposal and here are
22 some of the topics we'll go over in our presentation: A
23 brief review of the industry and the taking of the market
24 by artificial stone; the special emphasis program we had
25 in 2019 and 2020; the deficiencies in the existing

1 Section 5204 that was in place before the emergency
2 regulation. Silicosis disease projections, I'll skip
3 over that because Dr. Heinzerling already spoke about it.
4 Enforcement inspection update date in this year, 2024;
5 and then the risks and hazards of artificial stone; and
6 also going more into exposure interpretation and then a
7 summary of the proposed revisions to Section 5204.

8 A brief information on the industry: You see
9 these beautiful shiny countertops. They often come from
10 these shops that can be very dusty. I know there's some
11 exceptional ones that are clean, but they can also have
12 high exposures, but we see many shops like this that are
13 very dusty. And just even if you're not working on
14 anything, just walking through this dust can create
15 exposures over the permissible exposure limit. So just
16 having it on the floor and on the surfaces, it can just
17 be dangerous by itself without even counting the cutting.

18 And just some of the processes that create very
19 high exposures: Here's grinding to create the bullnose
20 edge on that countertop, edging, and then polishing.

21 And then as this graph shows, global demand for
22 artificial stone countertops has been steadily increasing
23 5.4 percent per year to 97 million square meters
24 anticipated in 2028.

25 Here's some quotes from a market research firm

1 for the industry that looked at demand for global
2 artificial stone -- or sorry -- artificial stone demand,
3 global demand in this ten-year period, 2013 to 2023.

4 "In 2023, North America accounted for
5 the largest regional share, 32 percent, of
6 global engineered stone countertop demand."
7 So that's here in the United States for the most
8 part.

9 "In 2023, a major global development in
10 the market occurred when Australian
11 authorities imposed a national ban on
12 engineered stone products beginning in mid
13 2024."

14 And so products are being developed with zero
15 crystalline silica as a result of this ban. So this
16 regulation is creating a positive move.

17 And the third bullet, this market research has
18 pointed out that:

19 "New Zealand and the U.S. state of
20 California have also raised concerns about
21 the adverse effects of silica dust, which
22 could possibly lead to wider scrutiny of
23 these products."

24 And we're doing that now. We're help leading
25 the fight to protect workers from this product, this

1 dangerous product.

2 And the last bullet:

3 "Major engineered stone producers such
4 as Cosentino and Caesarstone have been
5 investing in formulation changes to lower
6 the silica content of their products."

7 So positive changes from the industry as a
8 result of these regulations.

9 I'll go over the 2019 and 2020 inspections we
10 did. I've covered this before. We found widespread
11 compliance when we did these inspections with the old
12 Section 5204, which is much more difficult to enforce,
13 but 72 percent of the countertop employers are in
14 violation of Section 5204 at the time.

15 Only 5 percent of the workers received the
16 required medical exam, so very few are actually getting
17 that, and 45 percent of workers reported using wet
18 methods, so almost half.

19 And here was the exposure monitoring we did
20 looking at 47 different companies where we did an
21 exposure monitoring, and over half of the companies had
22 exposure over the PEL and a much larger percent had over
23 the action level PEL and it varied widely. As
24 Dr. Houlroyd pointed out, it can vary widely, the
25 exposures, from day to day.

1 I'll go on to the deficiencies of the 5204 that
2 existed before we had the emergency regulation.

3 It has some pretty large loopholes or exceptions
4 in it. 5204 allows employers to avoid implementing key
5 protections in the regulation by claiming these
6 protections are infeasible. So it simply makes
7 statements infeasible and they're pretty much done. They
8 don't have to do anything unless we come in and then we
9 have to demonstrate that it is feasible, so we gather and
10 approve them.

11 Then objective data: Section 5204 allows
12 employers to exempt themselves from the standard in its
13 entirety by claiming that silica exposures are likely
14 below the action level without conducting exposure
15 monitoring themselves.

16 And thirdly, monitoring: Section 5204 allows
17 employers to conduct air monitoring on a single day and
18 exempt themselves from further monitoring for that task
19 from that point onward, you know, for the rest of time,
20 for forever, if the results show exposures are below the
21 action level. So one exposure monitoring and you could
22 be done forever and ever and never have to do anything
23 ever again. So that is very unprotective.

24 I'll skip over this because Dr. Heinzerling
25 already spoke about it and has more current data.

1 So now I'll go over some of the stats we have
2 for this year's inspections. I had mentioned some from
3 the 2019-2020 Special Offices Program. So here we are
4 also doing the Silica Inspections Program for 2024 and so
5 we have opened 85 enforcement inspections since the
6 emergency regulation came into place at the end of 2023.

7 And so of those 85 inspections, 56 are closed.
8 So they finished the inspections and then issued
9 citations to the employer and then the employer's then
10 required to abate everything.

11 29 of those inspections are still ongoing. So
12 53 of the 56, or 95 percent, had violations, so nearly
13 every single place inspected had violations and had to
14 fix those to come into compliance. So that's a large
15 number of shops that are bad and hopefully are much
16 better now.

17 And 22 of the 85 shops were issued Orders
18 Prohibiting Use, so they were doing something really
19 dangerous like dry cutting or no respiratory protection
20 and so we shut them down until they fixed it and then
21 once they fixed it, then we lift that Order Preventing
22 Use and they can go back to work.

23 Here's some quotes from one of our industrial
24 hygienists, Karen Smith. She says she's averaging about
25 ten citations per countertop inspection. Other CSHOs

1 she's talked to are finding similar results. Even
2 cutting wet, they are still over the PEL.

3 So that corroborates what Dr. Houlroyd was
4 saying and Dr. Heinzerling.

5 "By issuing OPUs without sampling, we
6 can stop exposures immediately. We are also
7 requiring a higher level of protection for
8 those workers once the shops do reopen."

9 So the emergency regulation is making a big
10 difference in being able to protect workers.

11 And then I'll hand it over to Dr. Wilson.

12 DR. WILSON: Okay. Good afternoon, Chair and
13 Members. I'm going to continue to speak to the question
14 of risk, both -- risk as a function of both hazard and
15 exposure, and those are the two elements that come
16 together that determine the likelihood that a worker is
17 going to be harmed.

18 So I'm going to start here. There we go.

19 So as we've heard today, artificial stone, a
20 dangerous, potentially deadly combination of: Very high
21 silica content, 93 percent or greater. Cutting it
22 produces high concentrations of ultrafine particles, less
23 than one micron in diameter; large reactive surface areas
24 that enter the deep lung. Particles have irregular
25 shapes, sharp edges, fractures that increase the rate of

1 cell lysis that leads to lung scarring. And there are
2 also the volatile organic compounds, or VOCs, from the
3 resins that are emitted during the cutting from the
4 material.

5 So I'm going to summarize a few studies among
6 many in the epidemy epidemiology and toxicology literature
7 regarding the hazards of this, of the product.

8 So this is the study from Hoy, et al. last year,
9 who looked at 544 workers. 74 percent were exposed to
10 artificial stone more than 50 percent of the time and dry
11 processing was common. 117 of these 402 workers, or 29
12 percent, were diagnosed with confirmed silicosis. Their
13 median exposure duration was 12 years. Most cases did
14 not experience coughing or shortness of breath and so
15 medical surveillance is, therefore, key.

16 In 2020, Wu, et al. evaluated 18 patients with
17 artificial stone-associated silicosis. The median
18 exposure duration was just six years. 22 percent of
19 these patients experienced rapid deterioration in six to
20 12 months, 40 percent required lung transplant and 28
21 percent died, which was five of those 18. Wu compared
22 these patients against 63 patients with natural
23 stone-associated silicosis and the median exposure
24 duration was 30 years. Only 3 percent required lung
25 transplant and there were no deaths.

1 In 2020, Leon-Jimenez, et al. evaluated 106
2 workers with confirmed silicosis resulting from exposure
3 to artificial stone dust. They were all removed from
4 exposure. 35 workers, or 33 percent, with simple
5 pneumoconiosis advanced to progressive massive fibrosis
6 over a mean of just four years, compared to granite
7 workers and former coal miners, where 10 percent advanced
8 to pulmonary massive fibrosis over a mean of 22 years.

9 The investigators concluded that silicosis from
10 exposure to RCS and artificial stone is aggressive and
11 exhibits rapid disease progression in a high proportion
12 of affected individuals.

13 So two more. This is Ramkissoon from last year,
14 pointing to the hazards of the volatile organic compounds
15 that are released during cutting, grinding, polishing,
16 and other tasks during fabrication of artificial stone
17 products.

18 These VOCs included phthalic anhydride, styrene,
19 benzene, ethylbenzene and toluene. Phthalic anhydride
20 made up 26 to 85 percent of the total VOC content.
21 Phthalic anhydride and styrene are respiratory irritants
22 and the others are carcinogens.

23 And finally, in 2022, Ramkissoon looked at
24 artificial stone again, finding that 80 percent of the
25 mass of the dust consisted of respirable crystalline

1 silica and when he compared that against natural stone
2 showed that 40 to 30 percent of the mass of the dust
3 consisted of respirable crystalline silica.

4 So they found that 90 percent of dust particles
5 in both artificial and natural stone ranged from point 19
6 to point 83 microns, so they penetrate into the deep
7 lung, but essentially what we're seeing is a very large
8 proportion of the respirable dust in artificial stone is
9 respirable crystalline silica for, you know, 80 percent
10 versus 4 to 30.

11 I want to -- I have one other finding from last
12 year from colleagues at the School of Public Health at
13 Monash University in Melbourne, where they summarized the
14 current state of knowledge on the hazards of artificial
15 stone, stating that, and I quote:

16 "There is now global evidence of high
17 incidence of silicosis associated with
18 workers processing artificial stone with a
19 pattern of relatively short exposure times,
20 four to ten years, with severe disease
21 emerging in young workers."

22 Chair?

23 CHAIR ALIOTO: Would you mind if I interrupted you
24 briefly?

25 DR. WILSON: Of course.

1 CHAIR ALIOTO: Are you aware of any studies that have
2 in any way duplicated or looked at or that would perhaps
3 not replicate but reflect the conclusions of
4 Dr. Houl--

5 DR. WILSON: Houlroyd?

6 CHAIR ALIOTO: Yes. Thank you -- regarding the
7 presence of silica dust in -- using the wet methods?

8 DR. WILSON: I do and I'll speak to those. In
9 addition to Dr. Houlroyd's work, NIOSH has demonstrated
10 this as well.

11 CHAIR ALIOTO: Okay. If you could at some point
12 during your presentation talk about those, the presence
13 of the dust and then perhaps the percentages of whatever
14 else when using the wet method, that would be helpful.

15 DR. WILSON: Great.

16 CHAIR ALIOTO: Thank you. Sorry to interrupt.

17 DR. WILSON: No. Of course.

18 Okay. So I'd like to move on to the exposure
19 interpretation and this is important in the proposed
20 revisions to Section 5204 which allow for less protective
21 respiratory protection if the employer evaluates
22 exposures every six months using a qualified person and
23 shows that those exposures are below the action level for
24 RCS of 25 micrograms per cubic meter.

25 In addition, the question of exposure is also at

1 the heart of the argument made by the fabricated stone
2 industry, which has continued to seek relief from the
3 worker protections required for high-exposure trigger
4 tasks if the employer can demonstrate that RCS exposures
5 are below the action level.

6 So what does it mean to conduct sampling for RCS
7 and show that exposures are indeed below the action
8 level?

9 So this is picking up from Dr. Houlroyd and
10 Dr. Heinzerling's presentation. With picking up on this
11 key point that they made that even among similar exposure
12 groups, so these are people who are sort of doing the
13 same tasks, worker exposures vary widely. They vary day
14 to day for the same worker, they vary across different
15 workers and tasks, and they vary over time. So
16 conducting representative samples -- sampling is really
17 challenging.

18 So this slide shows individual eight-hour
19 time-weighted average exposure levels for 250 workdays or
20 one year for a worker performing the same task. The
21 horizontal axis represents the day the sample was taken
22 and the vertical axis shows the exposure concentration
23 that day. So each red dot represents an eight-hour
24 time-weighted average daily exposure concentration.

25 The red horizontal line represents an

1 occupational exposure limit or an action limit and you
2 can see that exposures vary more than sixfold essentially
3 from 0 to nearly 6.5. Most exposures are below the OEL
4 line.

5 And I want to thank Dr. John Mulhaussen for this
6 slide and a few others I'm going to present. He
7 presented this work at the California Industrial Hygiene
8 Conference earlier this month and he generated these
9 exposure profiles based on his work as Director of
10 Industrial Hygiene at 3M.

11 Yes, Dr. Kennedy? Please

12 BOARD MEMBER KENNEDY: I'm interested since there are
13 no units on concentration, but do you know what the
14 average of all those values was? I mean, is it the red
15 line?

16 DR. WILSON: No. The red line is an -- so this
17 is an --

18 BOARD MEMBER KENNEDY: It's there.

19 DR. WILSON: So this is generated data that
20 Dr. Mulhaussen produced to demonstrate the fact of
21 variability across the --

22 BOARD MEMBER KENNEDY: Yes, I understand that. I'm
23 just curious what the average level was since
24 time-weighted averages represent a 40-hour workweek over
25 a lifetime. I'm curious what the average level is over

1 this variability and then what the units are for
2 concentration.

3 DR. WILSON: Yeah. Well, let's see if I answer that
4 question --

5 BOARD MEMBER KENNEDY: Okay.

6 DR. WILSON: -- as we get into it.

7 BOARD MEMBER KENNEDY: Thank you.

8 DR. WILSON: So the concentration that's on the
9 vertical axis ranges from 0 to 6.5. This is a
10 theoretical distribution.

11 BOARD MEMBER KENNEDY: Do you know what the units
12 are?

13 DR. WILSON: There are -- no units are provided.
14 It's -- the units are from 0 to 6.5, but this is -- he's
15 not demonstrating micrograms per cubic meter or PPM.
16 He's just demonstrating the --

17 BOARD MEMBER KENNEDY: Percentage of an action level?

18 MR. BERG: It's a ratio compared to the occupational
19 exposure limit.

20 BOARD MEMBER KENNEDY: Perfect.

21 DR. WILSON: There's that, yeah.

22 BOARD MEMBER KENNEDY: Thank you.

23 DR. WILSON: So the point of this is you can see what
24 happens if -- if you take samples across -- so a worker
25 who's experiencing this sort of exposure variability

1 overtime. You take samples. You would take five
2 samples and you happened to take them here on these days
3 versus if you take them on these days and so what you can
4 see is that you get a very different impression of the
5 exposures happening to this worker from the blue samples
6 versus the ones from the red samples and it's simply a
7 matter of the days that you took those samples.

8 Now, this sort of problem of variability becomes
9 more extreme when you add more workers into the mix.
10 So this is ten workers with exposure profiles over the
11 course of 250 workdays. If you take five full-shift
12 samples from these ten workers in a similar exposure
13 group, which together worked 2500 days each year, you end
14 up with 0.2 percent of their exposures for that year.
15 Measuring 0.2 percent exposures can in no way reasonably
16 capture the exposure conditions of these workers. So how
17 do industrial hygienists capture and characterize
18 exposures?

19 So studies published since the 1960s, as
20 Dr. Houlroyd described, show that exposure data are
21 lognormally distributed. So if you took all if you took
22 samples from all of those workers over 2500 days and
23 dumped them into a distribution from low to high in their
24 exposure concentration, this is what it would look like.
25 They're lognormally distributed, so they don't follow a

1 standard bell shape normal distribution that characterizes
2 most types of data.

3 So what you see here is exposure concentration
4 on the horizontal axis and measurements or the number on
5 the vertical axis.

6 This profile is typical of worker exposures
7 across multiple types of industries, hazards, time
8 periods, and so forth. So the lognormal distribution is
9 powerful because we can apply exposure measurements to it
10 mathematically as a probability distribution. We can
11 then calculate a geometric mean, standard deviation, and
12 we can illustrate the full-exposure profile using a small
13 number of samples.

14 So we're basically inferring what the true
15 exposures are by applying our sample data to the
16 mathematical properties of this distribution.

17 One other feature of this distribution is that
18 we can calculate the 95th percentile of the exposure
19 distribution and so in good industrial hygiene practice,
20 again, as Dr. Houlroyd mentioned, the upper 95th
21 percentile of the exposure distribution needs to be below
22 the action level. This is showing a theoretical exposure
23 distribution for 2500 samples from ten workers where most
24 samples are down in the low to medium exposure range but
25 some are much higher up in the right tail. We need to

1 pay attention to the tasks that resulted in these high
2 exposure concentrations and protect those workers who are
3 performing those tasks. We do not want the 95th
4 percentile of the distribution to exceed the action
5 level.

6 So what does this all the mean in practical
7 terms? We're taking these samples, estimating from what
8 we looked at, our five samples. We're using knowledge of
9 the underlying shape of the lognormal distribution to
10 generate an exposure profile of these ten workers and
11 this is how you characterize the actual exposure
12 conditions based on a small number of samples. You don't
13 do that by evaluating the small numbers of samples
14 themselves and consider those -- considering those to be
15 true.

16 So I'm just going to do a quick example here.
17 So if we think of the action level as 25 micrograms per
18 cubic meter and we take five samples, and these are in
19 micrograms per cubic meter, and we get 18 micrograms per
20 cubic meter, 3, 12, 17, 22, the arithmetic mean is 14,
21 the geometric mean of 12, the standard deviation of 2.2
22 and a coefficient variation of 51 percent. But you look
23 at those five samples and they're all below the action
24 level. And so the question is: Are these workers safe,
25 just looking at what we have in front of us?

1 So what the American Industrial Hygiene
2 Association has developed is what's called Expostats. It
3 draws on these five datapoints to derive the expected
4 exposure concentration for a one-year period or 250
5 workdays, fit in mathematically to the lognormal
6 distribution. So the sequential plot shown here relies
7 on the five samples to generate the distribution and
8 shows us what it would look like if we obtained
9 eight-hour samples every day for 250 days. This models a
10 full year of exposure.

11 What it shows is that even though the measured
12 data are all below the action level, the likelihood is
13 that nearly 20 percent, or what is showing here as the
14 exceedance fraction of 18.8, nearly 20 percent of days
15 over the course of the year will exceed the action level.
16 That comes to 47 eight-hour days where workers would be
17 exposed over the action level.

18 This program then provides you with the
19 likelihood that based on these samples, what is the
20 percentage likelihood that workers are going to be
21 exposed over the action level? And they use OEL here,
22 but we can also use action level, and it's about 92
23 percent that is the probability that exposures will occur
24 that are over the action level and that -- even though
25 the measured exposures were all below the action level.

1 So what happens then if you get one worker in
2 those five who has -- comes back with a high exposure?
3 So everyone else is below the action level and you get
4 one person who comes back with 50 micrograms per cubic
5 meter. It draws again on these five -- the program draws
6 on these five datapoints and what it shows us is that the
7 likelihood -- it's it's that -- that over the course of
8 the year, 30 percent of the days are going to exceed the
9 action level.

10 Even though, you know, we're looking at samples
11 that you might think, Well, maybe this worker is an
12 outlier or what have you, that comes to 75 eight-hour
13 days and when you look at the probability that workers
14 are over the action level, it's 99 percent. So you have
15 a high-exposure scenario over the course of those days.

16 So the point of this is to clarify that the
17 first point being that exposures are highly variable for
18 the same worker and among different workers across
19 different days. Sampling a small fraction of days is not
20 able to capture this variability and show actual exposure
21 conditions. If you take exposure measurements for RCS
22 and they happen to show that exposures are below the
23 action level, this does not mean that workers are
24 actually exposed below the action level. In fact, some
25 portion of them will likely exceed the action level

1 significantly over the course of a year and it's
2 essential that our regulation protects those workers.

3 For these reasons and given that exposure to RCS
4 from artificial stone has proven to be disabling and
5 lethal, worker protections for high-exposure trigger
6 tasks in our proposed regulation are required in the
7 revisions regardless of employee exposures, exposure
8 assessments or objective data. We do not want to make
9 the health and potentially the life of workers in this
10 industry dependent on highly variable, often
11 misinterpreted exposure measurements. In fact, we
12 believe it would be unethical to reduce worker
13 protections based on exposure assessments when those
14 exposures could result in permanent disability or death
15 to the affected workers.

16 Finally, when the industry asks for relief from
17 high-exposure trigger-task requirements based on their
18 own exposure measurements, we encourage the Board to keep
19 these elements of exposure assessment and interpretation
20 front of mind.

21 Okay. Come on back. John?

22 MR. BERG: There we go.

23 DR. WILSON: Thank you.

24 So I'd like to turn now to the proposed
25 revisions to Section 5204 and I'll summarize the final

1 regulatory text as it compares to the preexisting
2 section.

3 Okay. So overall, the proposed revision that
4 you have in front of you extends the protections of the
5 ETS into a permanent rule. It improves medical
6 surveillance and exposure assessments. That is by
7 requiring the involvement of a qualified person
8 independent of the employer. It improves silicosis and
9 lung cancer reporting and adds new definitions and a new
10 "Medical Removal" subsection.

11 So as you recall, if a stone fabrication shop
12 handles artificial stone with more than 0.1 percent
13 silica or other silica-containing products, including
14 natural stone that contain more than 10 percent silica,
15 they fall under the requirements of high-exposure trigger
16 tasks and all of these new requirements apply.

17 All other stone products end up falling under
18 the preexisting 54 5204 requirements.

19 So under the Scope and Application, there are
20 exceptions with some caveats. The high-exposure trigger
21 task requirements do not apply to: geologic field
22 research; quarries, mines and concrete and cement
23 manufacturing facilities; manufacturer of fired ceramic
24 or fired porcelain tiles or panels; and the fabrication
25 of finishing or fabrication or finishing of natural stone

1 tombstones, monuments and so forth.

2 There are new definitions which we can go into
3 if you're interested. These are for: artificial stone,
4 for confirmed silicosis, employee exposure, high-exposure
5 trigger task, qualified person, suspected silicosis, and
6 wet methods.

7 Subsection (d) under Exposure Assessment
8 requires that all high-exposure trigger tasks shall be
9 monitored by a qualified person at least every 12 months,
10 or more frequently as required in this section.

11 This is an exception for high-exposure trigger
12 tasks to the existing language at (d)(3)(B) which states
13 that if initial monitoring indicates that employee
14 exposures are below the action level, the employee -- the
15 employer may discontinue monitoring for those employees
16 whose exposures are represented by such monitoring that
17 Eric Berg referred to earlier.

18 In subsection (e) and the Regulated Area, (e)(1)
19 requires that all trigger tasks shall be conducted in a
20 regulated area.

21 This is simply an area demarcated by signage
22 where respirators are required and access is limited to
23 certain persons, and respirators are not required for
24 exposures less than five minutes in an eight-hour period
25 where exposures are less than the action level, as

1 demonstrated through air monitoring conducted every six
2 months by a qualified person. Employer is required to
3 encourage voluntary use of filtering face-piece
4 respirators during these five-minute entries. So that's
5 also known as an N95.

6 So under subsection (f) Methods of Compliance, a
7 substantial improvement in the worker and worker
8 protections. Subsection (f) corrects a key weakness in
9 the existing language of 5204, which requires employers
10 to use engineering and work practice controls to reduce
11 and maintain employee exposure to respirable crystalline
12 silica to or below the PEL unless the employer can
13 demonstrate that such controls are not feasible. That's
14 in the preexisting Section 5204. "Feasible" is not
15 defined. So under the existing language, the cost of
16 installing engineering controls could be used as an
17 argument for not installing them. That is, the controls
18 are not feasible because they're too expensive.

19 We've closed that off-ramp with language
20 requiring engineering and work-practice controls for
21 high-exposure trigger tasks regardless of exposures,
22 exposure assessments or objective data, without
23 exception.

24 This section requires proper containment of dust
25 and debris from these tasks. High-exposure trigger-task

1 dust debris must be cleaned up using wet methods or HEPA
2 filter vacuuming. Again, the preexisting section only
3 requires this if it's feasible. There are prohibitions
4 on the use of compressed air, dry sweeping, use of
5 employee rotation as a means of reducing exposure and
6 prohibitions on walking or moving through debris.

7 And, again, in the preexisting section, the
8 prohibitions on compressed air and dry sweeping are again
9 based on feasibility.

10 And then, finally, there are additions to the
11 written exposure control plan that include five new
12 requirements that we can go over if there is interest in
13 that.

14 Subsection (g) is our Imminent Hazards provision
15 and makes the issuance of an Order Prohibiting Use, or an
16 OPU, very efficient for our compliance officers. This is
17 essentially red tagging, if you will, the facility and
18 requiring abatement of imminent hazards before the shop
19 or equipment can be reopened. And as Eric noted, OPUs
20 have been issued for 26 percent of the shops visited by
21 Cal/OSHA this year.

22 Coming back here, I'll just describe this.

23 So just one other thing on the Imminent Hazards,
24 if dry methods are being used, it's a mandatory OPU and
25 then there are other OPUs that it's up to the discretion

1 of the CSHO whether to issue them with violations related
2 to respiratory protection, the reporting requirements,
3 and the carcinogen reporting violations.

4 So I'm going to turn to respiratory protection,
5 try to here. This is subsection (h). So subsection (h),
6 Respiratory Protection, requires a tight-fitting powered
7 air-purifying respirator with Assigned Protection fracture
8 Factor of 1,000 with a HEPA N100, R100 or P100 filter.

9 So this is the baseline requirement for all
10 workers in this industry. In the Australian paper from
11 November 2024 published last month that I mentioned
12 earlier, investigators found that 87 percent of more than
13 a thousand workers they studied began wearing respirators
14 as required after the providence of Victoria passed a new
15 regulation for this industry in 2019. These respirators
16 were half or full-face PAPRs or non-PAPRs as well as
17 soft-top hood or helmet PAPRs. The proportion of workers
18 using these masks prior to the regulation was 45 percent.

19 We believe that this finding helps to support
20 the conclusion that the use of PAPR and non-PAPR-type
21 respirators is feasible in this industry, even if it can
22 be difficult or inconvenient at times to do the work
23 while wearing one.

24 Now, the respiratory protection requirements
25 have two exceptions.

1 Under -- exception number 1: A loose-fitting
2 PAPR or a half-face PAPR or full-face nonpowered
3 air-purifying respirator with a HEPA filter is
4 permissible if exposures to RCS are below the action
5 level through representative air sampling taken by a
6 qualified person at least once every six months.

7 There's a second exception that a respirator
8 with an APF of only 10 with a HEPA filter is permissible
9 if all of those above conditions are met and all employee
10 all employees are participating in the medical surveillance
11 program and there are no silicosis or suspected silicosis
12 cases, and that exception does not apply if the physician
13 or licensed healthcare provider recommends a more
14 protective respirator.

15 And then a supplied air respirator is required
16 for workers with suspected silicosis or as recommended by
17 the PLHCP.

18 So why require respiratory protection when wet
19 methods are also required?

20 And getting to your point, Chair, studies from
21 NIOSH and Georgia Institute of Technology, Dr. Jenny
22 Houlroyd, show that weth wet methods are not sufficient by
23 themselves to protect workers from RCS exposure while
24 cutting, grinding or polishing artificial stone.

25 So I'm going to show you just a couple of

1 examples of videos from NIOSH, who did work similar to
2 Dr. Houlroyd and found similar results. So this is a
3 water stream that's an internal stream that's intended to
4 suppress dust. You can see that the water stream is
5 misdirected away from the blade.

6 Second video -- there we go. Oops. I'm
7 going to go back -- so here you have what's going on here
8 John -- now we have not enough water, causing exposed dry
9 sections of countertop. You can see dust being emitted here.
10 So technically a wet method but clearly insufficient for
11 controlling dust. What NIOSH demonstrated was that flooding
12 the surface and using an internal tool stream was more
13 effective.

14 Go ahead and play that one, John.

15 So they're basically flooding water across the
16 surface with a hose. Okay.

17 CHAIR ALIOTO: But if Dr. Houlroyd's data is correct,
18 even that would be not be sufficient.

19 DR. WILSON: That's right.

20 CHAIR ALITO: Okay.

21 So then under subsection (i) under Housekeeping,
22 the existing Section 5204 includes feasibility exemptions
23 or loopholes, if you will, that allow employers to
24 sidestep essential dust controls during housekeeping
25 tasks such as using wet sweeping methods and not using

1 compressed air on clothing and surfaces. The revision
2 closes these feasibility exemptions for high-exposure
3 trigger tasks.

4 So now I'm going to turn to Medical
5 Surveillance. We've added a number of provisions. So
6 initial and periodic exams must be made available at no
7 cost at a reasonable time and place. An initial exam
8 within 30 days is required for employees who are exposed
9 to high-exposure trigger tasks if they if they're exposed
10 at least 30 days each year. And that's, again, regardless
11 of the exposure assessments or objective data, as it's
12 called, unless the employee has received an exam that
13 meets the requirements of the section within the last
14 year.

15 So does that make sense? If they've received --
16 yeah. If they've received an exam in the last year that
17 meets the requirements of this section, they don't need
18 an initial exam.

19 CHAIR ALIOTO: Could I interrupt you briefly?

20 DR. WILSON: Yes.

21 CHAIR ALIOTO: We have to take a break soon.

22 DR. WILSON: Yes.

23 CHAIR ALIOTO: I'm wondering if this might not be a
24 good hold in your presentation. Is that okay with
25 everybody? Take 15? Let's go ahead and just take --

1 because we're going to have to come back and go again for
2 another couple hours after this. Let's -- go ahead.

3 Okay.

4 MS. BARAJAS: We could just take the lunch now.

5 CHAIR ALIOTO: What's the technical requirement for
6 that?

7 Folks, let's take ten minutes right now, a quick
8 recess. We'll come back to you to finish up your
9 presentation.

10 DR. WILSON: Okay.

11 CHAIR ALIOTO: Thank you.

12 (Recess)

13 DR. WILSON: Okay. So I think what we'll do is --
14 sorry. Chair?

15 CHAIR ALIOTO: Oh, we're good. Oh, we're on. Okay.
16 Perfect. Go ahead. Sorry, Mike, Dr. Wilson.

17 DR. WILSON: I will I will, I think what I'll do is
18 touch on these topics and we can come back for questions
19 and I'll sort of just hit the highlights, if you will.

20 So there's -- so Medical Surveillance has both
21 an initial and periodic exam requirement and the initial
22 exam is required for any worker who performs a
23 high-exposure trigger task more than 30 days per year and
24 if you're not performing a high-exposure trigger task,
25 it's required only if the RCS levels are over the action

1 level for more than 30 days per year. So there's a
2 little distinction there.

3 These are the elements of the -- both the
4 initial and periodic exam, and what's been added here is
5 the chest -- about halfway down, the chest X-ray,
6 B Reader, or a C.T. scan if deemed appropriate by the
7 physician or licensed healthcare provider.

8 And then as Dr. Heinzerling noted, a chest X-ray
9 scan at the lowest -- C.T. scan. Sorry. The chest C.T.
10 scan at the lowest dose possible shall be substituted for
11 a chest X-ray in both the initial and periodic exams for
12 the following, and that's as deemed appropriate by the
13 physician or licensed healthcare provider for any
14 employee with suspected silicosis or any employee who
15 performs high-exposure trigger tasks for at least 30 days
16 each year.

17 And as Dr. Heinzerling pointed out, what Hoy, et
18 al. have found was that 37 percent of engineered stone
19 silicosis cases are missed by chest X-ray. So this is a
20 C.T. scan to solve that problem.

21 Okay John, we've gone dark again here.

22 Okay. So now there are information
23 requirements. This is information that's provided to the
24 physician or licensed healthcare provider by the
25 employer. There's written -- and then the physician's

1 written report to the employee and then there's a
2 physician's written medical opinion for the employer.
3 And in the end, the physician or licensed healthcare
4 provider is required to provide a referral, if it's
5 appropriate, to a specialist based based on their
6 evaluation.

7 The final element of Medical Surveillance is --
8 has to do with additional exams, and where the -- sorry.
9 For any additional exams. So referral to a specialist
10 within 30 days if requested by the physician or a
11 licensed healthcare provider and the employer's required
12 to ensure that specialist reports, those results, come
13 back to the employee within 14 days, and the employer is
14 required to obtain the opinion from the specialist within
15 14 days.

16 And the PLHCP then is also required to report to
17 CDPH not only confirmed cases of silicosis or fatalities,
18 but their written silica medical exam to the Occupational
19 Health Branch within 14 days, and this is a way for for
20 Occupational Health Branch to closely track the
21 development of silicosis. So it's a leading indicator,
22 whereas confirmed cases and deaths are lagging
23 indicators.

24 Okay. So then we have Medical Removal, which is
25 a new section. Sorry.

1 There we go.

2 So the employer is required to modify work or
3 transfer the employee if the PLHCP recommends exposure to
4 RCS be reduced. Earnings, seniority, and benefits are
5 maintained for six months or until the employee is able
6 to return to work or the employee is permanently disabled
7 essentially and unable to return to work. If there's a
8 workers' compensation claim filed, wages continue for up
9 to six months during the claim processing. Here we go.
10 Wages and benefits may be reduced based on payments from
11 public or employer-funded compensation programs or income
12 from another employer.

13 And then there's an Independent Medical Review
14 requirement designated -- the Independent Medical Review
15 is designated by the employee to review findings and
16 conduct tests with costs covered by the employer, and the
17 determination of the second opinion is binding on all
18 parties.

19 Okay. So then moving on to subsection (l), the
20 new sections require that training and communications be
21 in a language that's understood by employees at an
22 appropriate level of education and literacy that's
23 appropriate for the workforce, and we've added the
24 globally harmonized system for classification and
25 labeling, a health hazard legend which I'll show you in a

1 second, and the phrase is "Causes permanent lung damage
2 that may lead to death" in place of the existing language
3 where it says, "Causes damage to lung lungs."

4 The employee information and training must
5 include symptoms of RCS exposure and how to prevent RCS
6 exposure during high-exposure trigger tasks.

7 This is the warning sign at the entrance to the
8 regulated area:

9 "Danger. Respirable crystalline silica
10 causes permanent lung damage that may lead
11 to death. May cause cancer. Wear
12 respiratory protection in this area.
13 Authorized personnel only."

14 "Peligro. Silice cristalina
15 respirable. Provoca dano permanente a los
16 pulmones que podria causar la muerte. Puede
17 provocar cancer. Usar proteccion
18 respiratoria en esta area."

19 Subsection (m) -- Okay, where did we go? Okay.

20 The communication requirements also include
21 measures implemented by the employer to prevent employee
22 exposure to RCS including for high-exposure trigger tasks
23 and -- let's see.

24 So these are training requirements, the use of
25 engineering controls, work practices and respiratory

1 protection; the increased risk of death from smoking and
2 RCS exposure and the increased risk of latent TB
3 infection becoming active due to RCS exposure.

4 And then finally, the communication subsection
5 now requires the employer to encourage employee reporting
6 of symptoms related to exposure to RCS without fear of
7 reprisal. There's an explicit prohibition against taking
8 or threatening adverse action against employees who
9 report symptoms or who suffer from a silica-related
10 illness.

11 And then there's final section on Reporting of
12 Silicosis. So within 24 hours of receiving information
13 regarding a confirmed silicosis or lung cancer case
14 related to RCS exposure, the employer's required to
15 report that information and there's information items A
16 through K, both to Cal/OSHA and to CDPH. And then within
17 24 hours of identifying confirmed silicosis or lung
18 cancer cases, health practitioners and specialists must
19 report the case to Cal/OSHA and must comply with
20 silicosis reporting requirements for CCR Title 17, and
21 that has to do with lung cancer and, again, there are
22 information Items A through G that are required in the
23 regulation.

24 The last -- it is the last subsection that
25 employers -- the addition here from the existing language

1 is that employers must record the specific product or
2 materials that are the source of respirable crystalline
3 silica, including the crystalline silica content of any
4 such products or materials.

5 Okay. So we want to thank our colleagues for
6 their efforts and collaboration in protecting vulnerable
7 immigrant workers in this industry. Specifically, the
8 Occupational Health Branch at CDPH, NIOSH, U.C.
9 San Francisco, UCLA, the Georgia Institute of Technology,
10 U.C. Berkeley and the Los Angeles County Department of
11 Public Health, and we want to offer our special thanks to
12 the leaders in labor, community-based organizations,
13 professional associations, and industry who have offered
14 their expertise in developing the revisions to the
15 section.

16 So thank you, Chair and Members, for your
17 attention and leadership in this rapidly evolving worker
18 safety crisis. We'd be happy to take any questions.

19 CHAIR ALIOTO: Excellent. Thank you so much for your
20 presentation. It was very informative and thorough, as
21 usual.

22 Let's take questions from the Board. Thoughts,
23 questions? Ms. Dr. Kennedy.

24 BOARD MEMBER KENNEDY: Yeah. I have a question. Of
25 course the hope of doing all of this is that we're going

1 to stop seeing these cases. When do we expect to be able
2 to see that? I mean, you know -- and so when can we say,
3 okay, we have had an impact? And I'm assuming maybe four
4 years from what's been presented as far as onset times,
5 but I don't know.

6 DR. WILSON: Maybe I'll -- maybe I'll join the table
7 here and we'll --

8 CHAIR ALIOTO: Sure.

9 DR. WILSON: -- answer questions as a panel.

10 CHAIR ALIOTO: Sure.

11 BOARD MEMBER KENNEDY: Okay. Thanks.

12 DR. HEINZERLING: Yeah. I think no matter what
13 happens here today, we're going to continue to see cases
14 for some years to come based on exposures that have
15 already happened. I think based on what we know about
16 exposure duration of workers in this industry, my hope
17 would be within five to ten years, we would start seeing
18 decreases in cases.

19 BOARD MEMBER HARRISON: So I know we chatted a little
20 bit during the break, but I just want to ask on the
21 record, do you know of any action that's being taken at
22 the fed OSHA level, because -- and the reason I ask, the
23 action we take here, if we force employers to move across
24 the border to an unregulated state, what effect have we
25 had on those workers? And so I would ask, is there any

1 action being taken at the federal level that you're aware
2 of?

3 MR. BERG: I'm not aware of any action on the federal
4 level.

5 DR. WILSON: Yeah. I think did an emphasis program.

6 MR. BERG: No. Regulatory changes.

7 DR. WILSON: Oh, yeah.

8 MR. BERG: I'm not aware of any regulatory changes
9 that are planned by federal OSHA. As Mike was saying --
10 sorry. Dr. Wilson was saying, they did have a special
11 emphasis program, our site employers, but they're using
12 the old standards that's hard to enforce and is not very
13 protective, but they're doing that.

14 BOARD MEMBER HARRISON: Thank you.

15 BOARD MEMBER CRAWFORD: Just a couple of quick
16 questions. Is there anything in the legislature right
17 now regarding eliminating engineered stone from the
18 marketplace in California?

19 MR. BERG: None that we're aware of, any such
20 legislation.

21 BOARD MEMBER CRAWFORD: And here's a really
22 in-the-weeds question not related to that. For the 24
23 hours for reporting in subsection (m), is that business
24 24 hours or like if -- is that -- is it 24 hours from the
25 moment that you have that information? So is there a

1 hotline or something set up?

2 DR. WILSON: Sorry. It's 24 hours without any
3 qualification. So in other words, it's not three
4 business days, for example. It's 24 hours by the clock.

5 And I'd just note in response to your first
6 question, we -- in our response to the Western
7 Occupational Environmental Medicine Association for an
8 emergency rule, we stated that if we continue to see
9 cases and we continue to see the kinds of noncompliance
10 that we've seen in our special emphasis program that we
11 should take steps to form an advisory process to consider
12 prohibiting the use of this product in California.

13 MR. BERG: And then Cal/OSHA has the ability to take
14 calls and reports 24 hours, seven days a week, in
15 enforcement offices.

16 CHAIR ALIOTO: Any other questions from the Board?
17 Questions? Comments? Thoughts?

18 BOARD MEMBER CRAWFORD: I have a question.

19 CHAIR ALIOTO: Yes. Go ahead.

20 BOARD MEMBER CRAWFORD: So, Eric, can I have just a
21 clarification on the ETS? How many times can the current
22 ETS be renewed?

23 MR. BERG: It can be renewed twice and it has been
24 renewed twice. It expires December 23rd.

25 Is that right, Millie?

1 I think it's December 23rd and it cannot be
2 extended anymore. So it will cease to exist if we don't
3 approve this today.

4 BOARD MEMBER CRAWFORD: Thank you.

5 CHAIR ALIOTO: Nola?

6 BOARD MEMBER KENNEDY: So these are just questions of
7 curiosity. In the special emphasis program that has been
8 undertaken, I think you said about 85 shops were visited,
9 which is about 10 percent of the estimate of shops in
10 California. How were those shops selected? Do you know?

11 MR. BERG: I don't know. I'd have to ask
12 enforcement.

13 BOARD MEMBER KENNEDY: You may not know. Okay.
14 Thank you.

15 CHAIR ALIOTO: Anyone else?

16 BOARD MEMBER KENNEDY: Oh, I did have one other
17 question.

18 Because silica is a carcinogen and many of the
19 additives in the engineered stone products have been
20 identified as carcinogens, are we seeing any cases of
21 cancer? And I recognize that the silicosis is a much
22 faster moving disease and overwhelms, but I'm still
23 curious.

24 DR. HEINZERLING: Right. And I would say the
25 surveillance that we are doing for that is not -- is not

1 the same, so I don't think we really know the answer to
2 that question. There isn't, you know, statewide
3 surveillance for lung cancer and then even if we are
4 aware of cases, that requires investigation to determine
5 whether or not someone works in this industry.

6 So my guess would be that we -- they're probably
7 out there or will be in the coming years, but right now
8 we don't have a good way of seeing that.

9 CHAIR ALIOTO: Anyone else?

10 Okay. I have a couple.

11 Two takeaways from today for me: Number one,
12 wet methods don't work and, number two, periodic testing
13 that shows that the shop is within the permissible limit
14 is not indicative of a safe environment. Do you agree
15 that those two things are true that I just said?

16 MR. BERG: Wet method does reduce exposure, so it's
17 helpful, but it's not sufficient on its own.

18 CHAIR ALIOTO: Right.

19 MR. BERG: Yeah.

20 CHAIR ALIOTO: Part two?

21 MR. BERG: Yeah. We agree with part two. I agree
22 with part two.

23 CHAIR ALIOTO: All right. So the current regulation
24 that we're voting on today, number one says in subsection
25 (g) that -- subsection (g)(1) that a violation of the

1 subsection (f)(2) wet methods is a mandatory OPU, which
2 is to say that if you see somebody doing dry work, then
3 you can automatically red tag them; right? And I'd just
4 suggest that based on the data that's been presented to
5 us today through Dr. Houlroyd and through yourselves and
6 through the NIOSH study that it sounds to me like
7 applying wet methods is not is not a salve even even even
8 then. So it strikes me that that subsection is already
9 obsolete before we've even voted on it. Would you agree
10 with that?

11 MR. BERG: Well, it's not obsolete. It's just it
12 needs to include other things. Like we say, respiratory
13 protection, not having the proper respiratory protection
14 is an Order Prohibiting Use, but we do leave it at the
15 discretion of Cal/OSHA enforcement to make that decision
16 on the spot. So I guess if we could go back in time,
17 we'd move that into, You have to issue an OPU no matter
18 what.

19 CHAIR ALIOTO: That's what I'm saying.

20 The second thing is subsection (h) on the
21 exception, the exception one is that you can wear a
22 loose-fitting PAPR or a half-mask PAPR under certain
23 circumstances and one of them is if exposures are below
24 the AL through representative air sampling by qualified
25 person, at least once every six months. That's one

1 exception.

2 We saw from your data, Dr. Wilson, that if you
3 take one measurement -- one every six months, you have no
4 idea whether that's going to be an accurate assessment of
5 the crystalline silica airborne in in that area anyway.

6 So I would propose that this in my opinion is
7 also obsolete even before we've voted on it, which is to
8 say that strikes me as something that should not be an
9 exception.

10 My point, which is not -- which is probably
11 obvious, is that we'll vote on this today, but I'm going
12 to ask the Board, and I don't know whether I'll have
13 agreement on this because I haven't talked to anybody
14 about it, to send you back and start working again on
15 this, for what it's worth.

16 MR. BERG: No. We agree with you completely that
17 there's -- we met with industry and had lots of meetings
18 with the industry in trying to make compromises, but
19 there's -- yeah. It's not safe enough. You're right.

20 CHAIR ALIOTO: Please.

21 BOARD MEMBER LASZCZ-DAVIS: I should have asked a
22 little bit earlier, but should we vote on this
23 affirmatively, what is the effective date?

24 MR. BERG: I don't know if I should -- Millie, do you
25 want to answer that or do you want me to answer that?

1 The effective date would be February 5th, I guess.

2 BOARD MEMBER LASZCZ-DAVIS: Of 2025?

3 MR. BERG: Yeah, the latest possible. It could be
4 earlier if we all approved it.

5 BOARD MEMBER LASZCZ-DAVIS: Well, the follow-up
6 question is this: You know, one of the prerequisites in
7 implementation is monitoring by a qualified person.
8 There are not enough people, not enough professionals in
9 California, to even take the edge off of that. So
10 implementation has to be curtailed by virtue of the fact
11 that the competency doesn't exist here, nor will
12 employers be able to secure them.

13 MR. BERG: Yeah. Hopefully it incentivizes more
14 people to become competent in industry hygiene practice.

15 BOARD MEMBER LASZCZ-DAVIS: Well, that's not an
16 overnight cure. You know that, Eric.

17 MR. BERG: But it's an incentive. You know, it'll
18 take time, but hopefully it works.

19 MR. WILSON: Well, and one consequence of your point
20 is sort of to what the Chair mentioned, which is that it
21 precludes the ability of the employer to reduce the
22 respiratory protection requirements. So the powered
23 air-purifying respirator is required with an Assigned
24 Protection Factor of 1,000 and it can only be reduced if
25 air sampling demonstrates that the exposure less than the

1 action level as conducted by a qualified person every six
2 months.

3 If there's a shortage of qualified persons, it's
4 really difficult to implement that provision and so we
5 are left at step one, which is a powered air-purifying
6 respirator as the baseline requirement.

7 CHAIR ALIOTO: Any other question?

8 BOARD MEMBER URWIN: Yeah. So just a clarifying
9 question. Being new to the Board, when you say, Chair,
10 to send them back with additional work to do, does --
11 what's the implication for that insofar as existing
12 protections for workers and what happens after
13 December 23rd?

14 CHAIR ALIOTO: My understanding -- and we can hear
15 from the lawyers on this maybe later perhaps -- is there
16 would be a vote on it and then we could also -- we'll
17 talk about the procedures for this and Autumn might be
18 able to chime in on how we would go about doing this, if
19 it can be done at all, which would be to suggest to go
20 back and start looking at this anew in light of certain
21 new data that have arisen, new studies that have come
22 out, including the one that Dr. Houlroyd presented to us
23 today and which would also give time for that, that data
24 that she selected, to be peer reviewed, so among other
25 things.

1 BOARD MEMBER URWIN: So just a following question to
2 that, because the state of the science is always
3 advancing --

4 CHAIR ALIOTO: Right.

5 BOARD MEMBER URWIN: -- whether it's in industrial
6 hygiene science, chemistry, what have you, right, and so
7 this goes to the point of worker protection rules in
8 general. Once they're put into place, do we have the
9 option to revise them as new information comes along and
10 not allow for lapses in protections to happen? I'm just
11 looking for clarification on that because, you know,
12 fast-forward two to three years from now and we may yet
13 learn something new --

14 CHAIR ALIOTO: Yeah. Right.

15 BOARD MEMBER URWIN: -- and we don't want to always
16 have to go back to the drawing board and start from zero;
17 right? In other words, the option to revise and update
18 to maintain worker protections and update them or approve
19 them as we go as we learn more.

20 CHAIR ALIOTO: Very important point. Extremely
21 astute point. Can you bring that up when we discuss it,
22 when we have the Board discussion on the vote?

23 BOARD MEMBER URWIN: Okay.

24 CHAIR ALIOTO: Any other questions or comments for
25 the Division?

1 All right. Thank you very much. Thank you for
2 your very informative presentations.

3 Okay. We are now going to hear a presentation
4 from the Silica Safety Coalition and that's going to be
5 presented by Glenn Farrel.

6 All right, folks. Good afternoon. I want you
7 to know something. I've been watching you and I've been
8 admiring your observational powers. I I I know that
9 you're -- I know you see -- I know you're observing
10 what's happening in this room. I want you to know
11 something, that you are both welcome here and it's really
12 important to hear from you and it's really important to
13 have your voices be heard. I want you to know that
14 everything you tell us will be considered. We will think
15 about your positions. They are very, very important. I
16 don't want you to be discouraged about anything that
17 you've heard. I want you to go ahead and give us your
18 view and then we'll have some questions for you at the
19 end. All right?

20 MR. FARREL: I very much appreciate that, Mr. Chair.
21 Very generous of you. Glenn Farrel. I'm with G.F.
22 Advocacy. I'm here on behalf of the Silica Safety
23 Coalition. The coalition as represented includes stone
24 manufacturers, distributors, fabricators, and I really
25 appreciate the opportunity again to be before you today

1 and just kind of share some perspectives.

2 You're right, Mr. Chair. I mean, a lot of new
3 information today and I really appreciate kind of the
4 thoughts about, you know, perhaps starting to reevaluate
5 and look at this and give it a little more time, you
6 know, post today's action by the Board to just look at
7 things going forward again. So I really appreciate that.

8 I'm going to step aside and yield to my very
9 esteemed colleague, Marissa Bankert. She's with the
10 International Surface Fabricators Association. She has a
11 lot more expertise on this topic than I do and so she's
12 going to kind of walk through some of our perspectives on
13 it. Thanks.

14 MS. BANKERT: Thank you all so much, Mr. Chair. I
15 really appreciate the introduction in that way and I
16 appreciate your time. I know that we've heard a lot of
17 information not just today but over the course of the
18 past year and so I really want to be thoughtful of your
19 time and really, you know, kind of just provide some
20 additional perspectives that some of you may be familiar
21 with but that we feel is really important to bring to
22 light here again today.

23 So I will be brief, but I also have some
24 additional things kind of based on what we've heard today
25 that I'm happy to answer kind of based off of some of the

1 questions that came before you earlier.

2 Let's see here. Nope. Let me see if I can get
3 it to work. One more time.

4 MR. ROENSCH: It has a delayed response.

5 MS. BANKERT: It does? Thank you so much. There we
6 go.

7 So we want to acknowledge what has happened
8 during the ETS process. Specific to some of the things
9 that have been alluded here earlier, the dry methodology,
10 kind of that immediate like easy button, "Hey, we see
11 that this is dry cutting. We want to make sure that we
12 stop that immediately." We really do support that.

13 And I would be remiss if I didn't say
14 specifically at this juncture I represent fabricators.
15 That's who I represent when I stand before you. We also
16 don't want people to be ill. We also don't want people
17 to succumb to conditions that are not appropriate for
18 their working environment. So I think that that's an
19 important distinction as I present to you today, just so
20 that everyone is on the same page about what the
21 motivation is, because I think that sometimes that can be
22 clouded through other presentations.

23 We recognize the public awareness. That's been
24 a great, you know, part of this entire thing. The
25 increased number of visits by Cal/OSHA and the

1 development of that productive working relationship
2 including Public Health, ourselves as the industry,
3 regulation and enforcement, and community groups who
4 represent employees overall.

5 What has not worked? We're still seeing these
6 shops that are not compliant; right? And creating more
7 rules is not going to help those people. That's a very
8 clear fact that we know to be true. So it's really
9 important that we acknowledge that moving forward and I
10 think that a lot of those things that you've seen in some
11 of the previous presentations when they refer to "at-risk
12 workers" are specifically referring to completely dry
13 shops and that needs to be noted as you think about some
14 of the previous presentations and the data that was
15 presented there.

16 We noticed this increasing trend for workers at
17 compliant shops leaving for noncompliant shops and
18 putting themselves at significant health risk. This is a
19 real thing. We're talking about real life, not theory
20 here, where someone says, "I don't want to wear that
21 thing all day." They don't want to do that and they know
22 that they can go to a noncompliant shop and that they're
23 not going to be found out and that they're going to
24 continue working. That's a simple fact that we all have
25 to acknowledge and that's a part of what you're you're

1 tasked with here today.

2 We note that the Cal/OSHA Consultation Division
3 is approximately eight months behind, going to the
4 previous mention that you just had, right, where these
5 people can't even get the information in order to become
6 better because they don't know exactly what it is that
7 they're missing. When you're talking about not only do
8 you not have enough industrial hygienists, you also don't
9 have enough people who are already reaching out to ask
10 for help and are not being serviced, and small
11 fabrication shops are still not sending workers for
12 medical surveillance; right? Like this really remains
13 one of the most crucial steps in identifying silicosis
14 symptoms.

15 So our request, as was noted several times, is
16 that we would encourage a pause. Right? We would
17 encourage a pause in this. This would enable us to find
18 a solution on issues such as the respirator requirements
19 that are comfortable to regulation and that those are a
20 part of those high-exposure trigger tasks. We think that
21 there's a happy medium to be found here and we don't
22 necessarily agree with some of the data that's been
23 presented here and we have data of our own that
24 completely contradicts that. So I think that that's an
25 important note as well.

1 We also ask you to consider amending the
2 Section 5204 and to provide this kind of TSA pre-check.
3 You've heard us kind of talk about this before, but what
4 we really mean is these rigorous air quality monitoring
5 and we can work together on how many times this is
6 conducted, as we've heard the concerns surrounding annual
7 kind of examination in regards to this; full compliance
8 with the Cal/OSHA silica regulations that were in place
9 prior to the ETS; and full compliance with the new
10 medical surveillance training and employee notifications.

11 Wet methods are not the only engineering
12 controls that need to be in place. We often talk about
13 it in those simplistic terms, but that -- as you've heard
14 today, that's not a hundred percent of what makes or
15 breaks a safe shop and we're highly aware of that. So
16 it's in working together that we can establish those
17 things to ensure that employees are safe.

18 I would also note that when we talk about this
19 pre-check style model, we're not talking about a rubber
20 stamp. We're not like, "Oh, looks good. Here's your
21 stamp," moving along. We're talking about the
22 development of a rigorous system that qualifies the
23 organizations in the fabrication manufacturing space who
24 are doing things correctly. We would welcome the
25 opportunity to continue to develop that with Cal/OSHA

1 overall and I think that there is a real opportunity for
2 us to consider that.

3 Our concern is the one-size-fits-all approach.
4 The proposed regulations really kind of put this blanket
5 over everyone and we know that there are people that are
6 doing it right. We know that they have that, and
7 shouldn't we take some time to investigate how it is that
8 they're doing it right and help people with resources and
9 education to enable them to get to that place? That's a
10 stronger way to kind of consider this when you think
11 about an overall approach. I would urge you that this is
12 this Board's opportunity to continue to get it right by
13 facilitating a working group who can really work on a
14 process and ensure worker safety surrounding everything
15 that's involved here.

16 In regards to the regulations that, you know,
17 are thinking about bad actors, this has been made easier
18 with that dry-to-wet metric, but it's not that
19 be-all/end-all approach to something. This is nuanced
20 and we need to address it as such.

21 If past today we worry about those who are most
22 in need of education and resources, will not believe that
23 moving forward to compliance is achievable, that's again
24 real life talking where people are afraid of the barriers
25 now that you've imposed and, therefore, will just not

1 move forward. They'll either move out of the state,
2 they'll close their business and those people will lose
3 their jobs, or at worst, they will continue to do
4 operations in in noncompliant ways and they'll just move
5 around and evade. That's exactly what will happen.

6 This is our kind of model that we've designed,
7 that mandatory AQ monitoring, the frequent -- more
8 frequent monitoring and sampling, the establishment of
9 parameters, periodic random verification and reporting of
10 all data to Cal/OSHA. So we're very, you know, eager to
11 kind of work on this model and bring it to fruition.

12 In thinking about this, if air quality is below
13 the action level, here's what would happen on your
14 screen; and if there is no air quality testing or results
15 are above the action level, then they are in this bucket
16 as well where they have that full compliance aspect in
17 addition to the first two listed above.

18 Someone asked earlier about legislation. And so
19 there is a legislative effort currently in the Senate in
20 regards to the supply chain provision and also a
21 fabricator certification. My ask of you is to consider,
22 as the Chair alluded to, that there's already probably
23 going to have to be a rework on this, that we are
24 provided more time to allow for legislative efforts to
25 coincide with this continued work and create a more

1 comprehensive solution because it's not just about the
2 controls. It's also about access to those products.
3 It's also about having the ability -- the ability to kind
4 of monitor those things and to prohibit supplying slab
5 products to uncertified fabricators. That's where we're
6 talking about supply chain. That might help eliminate
7 some of those things that were alerted alluded to earlier.

8 I believe that this is a real opportunity to
9 kind of pause and to think about whatever the scope is
10 that you're allowed, because I think that we've learned
11 here today that a third ETS is off the table, but is
12 there something within your scope that would allow
13 industry worker groups, regulation, Public Health, and
14 others to continue to work on solutions that consider all
15 involved?

16 We think that there might be an opportunity to
17 do this and our suggestion might be a work group
18 dedicated to meeting over the next six months to create a
19 pathway forward in a truly collaborative effort.

20 If you choose to amend the pre-check, I think
21 that this -- and provide for this pre-check-style model,
22 I think that this allows for a great way to show those
23 great actors who are doing everything right and to really
24 use them as an example moving forward and then you have a
25 comprehensive list of what it is that they're doing,

1 where they are, and how they could model that for other
2 fabricators in the industry.

3 I am disheartened that we might pass something
4 that then has those unintended consequences of people
5 moving around and not engaging in the education portion
6 of understanding why they are being asked to wear
7 respirators, why they're being asked to change the way
8 that they have been working for several years, and I
9 think that we just owe it to ourselves to take some extra
10 time to evaluate that across everyone's varied
11 perspectives.

12 I would add that we want to ensure that industry
13 in California is safe and that we have effective
14 information to make decisions on permanent regulations.

15 As I mentioned earlier, the data that we have
16 learned and and have been participating in does not
17 necessarily support the other data that was presented
18 here today. If you allow us more time, we can jointly
19 work with Public Health on some medical surveillance data
20 and the collection to better understand the denominator
21 of this issue and not just focusing on the numerator of
22 the issue as well.

23 A pause also allows for immigrant and migrant
24 workers to better understand the issue and for industry
25 to continue to engage in groups on outreach, which I

1 think is a pretty critical part to this entire issue.

2 I would also, going back to an earlier point,
3 note that I think that we need to evaluate the
4 effectiveness of the ETS and I think that that has some
5 time associated with it as well.

6 That concludes my presentation, but I did want
7 to answer a couple of questions that have come up during
8 the presentation overall.

9 Earlier, it was asked about fully enclosed
10 machining and does it exist. It does, in fact, exist and
11 so there is that opportunity to think about that as an
12 engineering control moving forward.

13 As I mentioned before, our data was collected by
14 the Yale School of Medicine and it's not consistent
15 necessarily with the presentation and we have several
16 examples contrary to the exposures listed.

17 And we are concerned as well in regards to a
18 February 5th start date and the actual, you know, ability
19 for people to be compliant.

20 CHAIR ALIOTO: Thank you so much for your
21 presentation.

22 MS. BANKERT: Thanks.

23 CHAIR ALIOTO: Any questions?

24 BOARD MEMBER URWIN: I'll start. You mentioned that
25 there's data that was record or gathered by the Yale School

1 of Medicine. Is that available in like a conference
2 presentation, in any format that's been presented
3 publicly or in the scientific forum?

4 MS. BANKERT: We did present in September in regards
5 to that. It hasn't been finalized yet, but we do have
6 data that we can provide and that has been provided to
7 the Board before.

8 CHAIR ALIOTO: I'm I'm going to -- do you mind if I jump
9 you in the line?

10 So just to follow up on that, are the results of
11 that analysis that you said that they're contradictory to
12 some of the data that we heard about today, is that from
13 the presentation by Dr. Houlroyd?

14 MS. BANKERT: It is.

15 CHAIR ALIOTO: Okay. So is there a conclusion that
16 that is in sum or substance that wet methods will -- using
17 wet methods properly will entirely control the spread of
18 aerosol, of --

19 MS. BANKERT: I think "entirely" is a strong word.

20 CHAIR ALIOTO: Okay. Fair.

21 MS. BANKERT: Yeah.

22 CHAIR ALIOTO: But under the action level?

23 MS. BANKERT: Yes, that's correct. Yes.

24 CHAIR ALIOTO: Okay. And that's a Yale study?

25 MS. BANKERT: That's correct.

1 CHAIR ALIOTO: Okay. If you have -- do you have a
2 cite for that by chance or any -- do you have a citation
3 for it available?

4 MS. BANKERT: So like Dr. Houlroyd's presentation, I
5 don't believe that it has been submitted for peer review
6 yet.

7 CHAIR ALIOTO: Okay.

8 MS. BANKERT: And so I think that we're in the same
9 kind of boat and it goes back to your earlier point in
10 regards to let's see what the data yields so that that
11 way we can make an informed decision.

12 CHAIR ALIOTO: Okay. Thank you.

13 MS. BANKERT: You're welcome.

14 BOARD MEMBER LASZCZ-DAVIS: Real quick question and
15 refresh my memory. Who do you represent?

16 MS. BANKERT: So I'm the International Surface
17 Fabricators Association, so I solely represent the
18 fabricators that are involved in the fabrication
19 manufacturing industry.

20 BOARD MEMBER LASZCZ-DAVIS: How many? How big?

21 MS. BANKERT: So our association is comprised of
22 about 300 fabricators across across the United States and that's
23 a difficult metric and I think that that was just
24 discussed at an earlier meeting as well in regards to how
25 many actual fabricators are there, how many shops are

1 there. It's a very moving target and difficult for us to
2 kind of understand.

3 I also represent, in speaking here today, the
4 Natural Stone Institute, which also has about 800
5 fabricators that are a part of their membership as well.

6 BOARD MEMBER LASZCZ-DAVIS: And does that include
7 small, medium and large?

8 MS. BANKERT: It does.

9 BOARD MEMBER LASZCZ-DAVIS: Thank you.

10 MS. BANKERT: You're welcome.

11 BOARD MEMBER HARRISON: So I just want to thank you
12 for your presentation and also for the reference to
13 S.B. 20, Senator Menjivar -- so while you were speaking,
14 I'm Googling it because that's the first I've heard of
15 it -- came out with a press release on December 2nd and
16 the last sentence or last paragraph in her press release
17 says that:

18 "Cal/OSHA will soon approve converting
19 their current ETS into permanent standards.
20 However, the severity and catastrophic
21 effects of the issue necessitate stronger
22 and decisive legislative action."

23 Thank you for that. It looks like there's a
24 movement afoot legislatively.

25 MS. BANKERT: Yeah, and we're a big part of that in

1 regards to really supporting that legislation from an
2 industry perspective and really wanting to see those
3 things happen because, again, we want people to be safe;
4 and candidly, we want to curtail the bad actors that are,
5 you know, really producing a lot of these issues overall.

6 BOARD MEMBER HARRISON: And something else you asked
7 for was a pause --

8 MS. BANKERT: Yes.

9 BOARD MEMBER HARRISON: -- in your presentation and I
10 think you're aware that you heard from the Division that
11 we are up against a wall.

12 MS. BANKERT: I did.

13 BOARD MEMBER HARRISON: December 23rd is our
14 drop-dead date. If we do nothing, then everything kind
15 of goes away. So I respect your request, but hopefully
16 you understand where we're at.

17 MS. BANKERT: I do. Thank you.

18 CHAIR ALIOTO: Anyone else? Yes.

19 BOARD MEMBER URWIN: Just a follow-up, an
20 observation, because we're talking a lot about, you know,
21 environmental measurements and inconsistencies in
22 datasets based off of environmental measurements.

23 When you want to quantify a health hazard, you
24 sort of have to at least measure three things, right,
25 what contaminants are present in the environment, what

1 the human exposures are, and what ultimately the
2 biological effects are on the human being; right? And,
3 you know, when it comes to environmental sampling, often
4 you're taking a device that's like the size of this or
5 the sampling media is like the size of a water bottle or
6 a coffee cup and you put it in this corner here or you
7 put it in that corner there and this is where
8 inconsistencies in data come up.

9 Ultimately, though, the marker of effect is the
10 people who get sick in the end or what they get sick
11 with, right, and obviously we're seeing the effect,
12 right, in the numbers of silicosis cases that are out
13 there and the number of deaths that have occurred. So
14 it's evident that there's something that needs to be
15 addressed. So being that environmental sampling -- and
16 this is an observation -- is obviously creating debatable
17 inconsistencies, let's call it, you know, you then in the
18 spirit of protecting the worker have to say, "Okay.
19 Well, if we can't quite get the measurements right
20 between Group A and Group B and Group C, then we have to
21 take measures to protect the workers because we've
22 already seen the effect." Right?

23 And a key point here is a lack of enforcement
24 capacity that results in bad behavior among bad actors is
25 not a reason to discard an enforceable framework that

1 could protect workers if the enforcement capacity is
2 there.

3 So just an observation there to take into
4 consideration; right? I mean, like you can talk about
5 the effectiveness of a particular engineering control by
6 itself or a particular type of PPE by itself, but in
7 reality, what needs to happen to be effective at
8 protecting workers is if you can't be 100 percent certain
9 in your environmental measurements is, okay, I have to
10 use some combination of the two or don't do the action,
11 period, right, to do the best that you can.

12 So just an observation based off of everything
13 that we've discussed and seen so far today.

14 CHAIR ALIOTO: Very good. Thank you.

15 Yes, Chris?

16 BOARD MEMBER LASZCZ-DAVIS: Just in terms of process,
17 and I'm not sure who responds to this, but let's say we
18 don't endorse the silica regulation as proposed and it,
19 if you will, disappears December 23rd. What are we left
20 with and what process is in place within the Standards
21 Board to enable it to keep moving warp-speed and dealing
22 in a triumviri fashion to come to solutions that might be
23 better than what we have presently? Are we bound by the
24 process that is typically our Standards Board process?

25 MR. BERG: Yeah. We'd have to restart regular

1 rulemaking, so we would be a couple years I would think
2 before, at least a year. I mean, once you start, it's
3 about a year. So we'd have to redo things and once we
4 then restart, it's I would say about two years.

5 BOARD MEMBER LASZCZ-DAVIS: There's nothing that
6 would move it along much faster?

7 MR. BERG: I mean, another emergency? I guess we
8 could do another emergency regulation, but I don't know
9 if that would work. I don't think OAL -- I don't know.
10 Maybe Autumn knows. I don't think we can do a second
11 emergency regulation.

12 BOARD MEMBER URWIN: Just maybe another procedural
13 question here, again being new to the Board and trying to
14 understand the process. Once a rule goes into effect, is
15 there not the option to revise that rule without going
16 through the rulemaking process all over again?

17 MR. BERG: It has to be revised through the
18 Administrative Procedures Act, yeah.

19 BOARD MEMBER URWIN: And so if a rule is passed, it
20 could, though, be revised.

21 MR. BERG: Yeah. It would be --

22 BOARD MEMBER URWIN: Like if you need to pass a rule
23 and say, "Oh, there's something here we need to fix.
24 Let's start rulemaking again."

25 MR. BERG: Yeah. Like our Outdoor Heat Standard, I

1 think we've revised it like three times, so it's not that
2 uncommon.

3 CHAIR ALIOTO: Okay. Any other questions for our
4 speaker? Is it Ms. Bankert?

5 MS. BANKERT: Yes, it is.

6 CHAIR ALIOTO: Anyone else? All right.

7 MS. BANKERT: Thank you all again for your time.
8 Thank you.

9 CHAIR ALIOTO: Thank you so much for your time.

10 All right, folks. We are going to go to public
11 comment on this issue. Before we do, I just want to make
12 sure that everybody's aware that if you would like to
13 obtain a copy of any of today's presentations, please
14 send a request for those presentations to
15 oshsb.pra@dir.ca.gov.

16 All right. Before you begin, Amalia, would you
17 just please announce to the Spanish-speaking audience
18 that they can make comments on this safety item. They'll
19 have four minutes if there's a contemporaneous
20 translation.

21 (Instructions given in Spanish)

22 CHAIR ALIOTO: Very good. Let's have our first
23 speaker. Good afternoon.

24 MR. SCHINSKE: Great. Thank you, Mr. Chair and
25 Members. I promise to be brief. My name is

1 Don Schinske. I'm here on behalf of the Western
2 Occupational and Environmental Medical Association. We
3 are physicians who work in public health. We work as
4 company medical directors. We work up and down the
5 workers' compensation system. Essentially wherever
6 medicine and the workplace intersect, you'll you'll find
7 us.

8 We were the original Petitioners for the ETS
9 about a year and a half ago. We certainly appreciate the
10 Board's timely response. We do think the ETS has saved
11 lives.

12 That said, as you heard today, the number of
13 cases has doubled over the past year. We do have some
14 doctors on the line who will probably talk to some
15 specific points. We certainly wholeheartedly endorse the
16 Board taking action again today. Regarding the S.B. 20
17 Menjivar bill, obviously it was just introduced. It's a
18 certification bill for shops. We think it's a lovely
19 idea. We'll be happy to support that.

20 That said, legislation last year, that kind of
21 traveled the same path, stalled, owing to lack of funds
22 available or funding mechanism. Unless we have a banner
23 budget year or we start talking about things like a tax
24 on slabs, I'm not sure a piece of legislation is going to
25 provide any relief on this issue.

1 So with that, thank you for your work and good
2 luck.

3 CHAIR ALIOTO: Thank you for your comments.

4 Do we have any other in-person speakers on this
5 topic?

6 Yes. Good afternoon. Welcome back.

7 MS. MURCELL: I'm a lot shorter.

8 Good afternoon. Pamela Murcell, President of
9 the California Industrial Hygiene Council. I actually
10 wasn't going to make any comments, but some things came
11 up during the presentations that I just wanted to weigh
12 in on.

13 First of all, the frequency of the monitoring.
14 There was a lot of information presented today and it's
15 all correct in terms of, you know, a-point-in-time
16 monitoring and the variability, but one thing I think
17 that we cannot do in regulation is to try to discuss data
18 quality. It's way too complicated and it would -- it's
19 just way too complicated, but it should be assured by
20 having the right people doing the air sampling and doing
21 the evaluations for exposure.

22 But the way it's stated now in 5204, the
23 frequency of the monitoring is pretty much the same
24 wording as is stated in other substance-specific
25 regulations that Cal/OSHA already has. So from that

1 standpoint, I think it's probably the way it should stay.

2 As far as other engineering controls, I am not
3 an expert on enclosures for silica fabrication for those
4 slabs. However, I am familiar in seeing in certain
5 industries where there's all types of equipment
6 enclosures for control of other problems, such as noise
7 exposures, and so I'm almost certain there's got to be a
8 way out there to do some type of enclosures for the slabs
9 with the equipment that's going to work on it, very
10 different than negative negative pressure containments,
11 which puts the worker in there with the work. So I don't
12 think that was the goal of that requirement and I personally
13 am glad that it was taken out. But enclosures definitely
14 could have a place. Albeit, they're very expensive, I'm
15 sure.

16 And then the last thing is they talked about a
17 ban on the product, the artificial stone. I don't think
18 that Cal/OSHA has the authority to ban substances. So
19 that might be an avenue for additional legislation.

20 Thanks.

21 CHAIR ALIOTO: Thank you so much. You nailed the
22 timing. That was a perfect ten.

23 We'll have our next speaker, please.

24 MR. SMITH: Hello, everyone. I'm Dave Smith.

25 CHAIR ALIOTO: Good afternoon.

1 MR. SMITH: I'm a safety consultant. So I'll follow
2 your model, Mr. Chair, in that, short and sweet.

3 The stats are appalling. Action is needed. I
4 also learned that just because you're below the action
5 level means you're not below the action level; right? So
6 why even sample, you know, if you have no confidence in
7 that data.

8 So the question -- and Member Laszcz-Davis, I
9 appreciate you bringing up the whole issue of how do we
10 get this done? Where are the qualified people? You
11 know, they don't exist. We already have other health
12 standards that go into effect in two weeks that require
13 CIHs, frankly. There aren't enough of them. There's
14 5,000 shops and I believe I heard before there were about
15 800 CIHs in California. So no matter what happens,
16 people are going to be out of compliance, period, because
17 they just don't have the people to do such sampling.

18 So thinking about implementation stuff, why
19 didn't this happen a year ago, you know? And this has
20 been the problem with a lot of these standards is we get
21 to, you know, the end of the road and you have to do
22 something; ran out the clock and then you've got a
23 problem. So that's where it seems to be.

24 I think the silica coalition has some great
25 ideas. I particularly like focusing on bad actors;

1 they're the ones who have done nothing. And I also like
2 the idea of licensing and fabricator certification.

3 Anybody who's done safety in the field knows
4 people that don't like to wear PPE, so that is a problem.

5 And then looking further up the supply chain,
6 looking at, you know, how do we reduce the amount of
7 silica in the product in itself; if we can solve that, we
8 solve a lot of these downstream problems.

9 Thank you very much.

10 CHAIR ALIOTO: Thank you.

11 Is there anybody else in person that would like
12 to make a comment?

13 All right. I think we've exhausted the comments
14 here. Let's go online. We are going to have to take a
15 break soon. How many people do we have?

16 MR. ROENSCH: It looks like we have ten.

17 CHAIR ALIOTO: Ten?

18 MR. ROENSCH: We do have one person online who's only
19 available until 3:00.

20 CHAIR ALIOTO: All right. Let's go ahead.

21 Folks, I'm going to ask you, we are up against a
22 time line for a lunch break that we are required to
23 provide, so I want to make sure that we are respectful of
24 that. I'm going to ask everybody to please comply with
25 the two minutes and if you see the clock ticking down, if

1 you could wrap it up and if you can even do it earlier
2 than that, we would much appreciate it.

3 Go ahead. Thank you.

4 MR. ROENSCH: All right. Mr. Chairman, we have
5 Adam Harper with the California Construction and
6 Industrial Materials Association online. He's our first
7 commenter.

8 Mr. Harper, if you'd unmute your microphone, you
9 can address the board.

10 MR. HARPER: Chair, Members of the Board, Adam Harper
11 with the California Construction and Industrial Materials
12 Association.

13 I first want to thank Board staff and the Board
14 for the changes made during the 15-day comment periods
15 that properly categorized and excepted mining from the
16 requirements of the high-exposure trigger tasks. I also
17 want to apologize for not raising the same feasibility
18 challenges that apply to mining as they apply to the
19 recycling of asphalt and concrete in our initial
20 comments.

21 Our industry is committed to the safety and
22 well-being of our employees and want to ensure feasible
23 control methods apply to our operation. An exception
24 from the requirements of the high-exposure trigger task
25 was requested during the second 15-day comment period for

1 the asphalt and concrete recycling industry.

2 In the Final Statement of Reasons, it was
3 recognized that the Board is not aware of any cases of
4 silicosis among workers at asphalt and concrete recycling
5 and, further, that the purpose of the revisions to
6 Section 5204 is to prevent further cases of silicosis in
7 the workers in the artificial stone and fabrication
8 industry. However, our request for the exception of the
9 asphalt and concrete recycling industry was not granted.
10 Again, due to the infeasibility of the high-exposure
11 trigger-task requirements and absence of silicosis cases
12 among workers in asphalt and concrete recycling industry,
13 we are asking for an exception from the high-exposure
14 trigger task definition for these activities.

15 The FSOR recognizes that asphalt and concrete
16 recycling industry facilities are provided an exemption
17 from (f)(2) so long as employee exposures are below the
18 action level. We would note in cases where asphalt and
19 concrete recycling operations were to exceed the action
20 level, the methods of compliance in section (f)(2) would
21 be mandatory and some are not feasible at these
22 facilities. We are, therefore, asking the Board to
23 recognize that like mines, asphalt and concrete recycling
24 operations that include crushing, screening and conveying
25 of materials containing crystalline and silica on sites

1 covering several acres would find the compliant methods
2 in subsection (f)(2) infeasible.

3 Please grant this exception, and thank you for
4 your consideration, and our apologies for not recognizing
5 the full scope of applicability sooner. Thank you.

6 CHAIR ALIOTO: Thank you very much, Mr. Harper.

7 Mr. Roensch?

8 MR. ROENSCH: Our next online commenter is Alice
9 Berliner with the L.A. County Department of Public
10 Health.

11 Ms. Berliner, if you'd unmute your microphone,
12 you can address the Board.

13 MS. BERLINER: Great. Thanks for having me.

14 Good afternoon. My name is Alice Berliner and I
15 am the Director of L.A. County Department of Public
16 Health's new office of Worker Health and Safety.

17 Today we want to express our permanent strong
18 support for the permanent general industry standard for
19 exposure to respirable crystalline silica. When we last
20 addressed the Board in June to express our support for the
21 permanent standard, there were 154 confirmed cases of
22 silica -- of silicosis in California with 60 percent of
23 those or 92 cases in L.A. County.

24 As of November 20th -- and I understand that the
25 CDPH colleagues just provided a more recent update, but

1 as of November 20th there were 219 cases of silicosis in
2 California, 127 of which are in L.A. County, and this
3 sharp increase really signals just how important and
4 needed a permanent standard is and how deeply our county
5 is impacted by this emerging and deadly disease.

6 We believe that the cases we're seeing are only
7 the tip of the iceberg and that many more workers have
8 silicosis across the state and in our county as a result
9 of ongoing and unregulated cutting and fabrication of
10 engineered stone.

11 Through our coordinated silicosis prevention
12 initiative and partnership with our L.A. County Board of
13 Supervisors and other county departments and two
14 contracted organizations, IDEPSCA and Pacoima Beautiful,
15 we see how otherwise young, healthy men who are parents,
16 siblings, friends, children are getting sick and dying.
17 We see how preventable this disease is and yet how
18 employers continue to break the law, fail to provide
19 necessary PPE, fail to implement wet methods or screen
20 their workers, and we understand it can be costly to do
21 this work safely, but we also believe that human lives
22 are worth the cost.

23 And I know I'm just at about time, so I'll close
24 and just say today on behalf of L.A. County Department of
25 Public Health, we support the passage of this standard

1 and see this action as a part of a larger, multi-prong
2 strategy in taking a vital step towards addressing this
3 urgent and life-threatening issue while setting a
4 precedent for other states to follow. Thank you.

5 CHAIR ALIOTO: Thank you very much, Ms. Berliner.

6 We are going to take a 30-minute -- how long do
7 I have to do? 30?

8 We are going to take a 30-minute lunch break.
9 Folks online, I'm sorry that we can't get to you right
10 now. We'll have to be in recess until 3:35. Thank you.

11 (Lunch recess)

12 CHAIR ALIOTO: All right, folks. Thank you very much
13 for coming back. It's -- I guess maybe not everybody
14 did, but we did. We're here.

15 All right. We're going to get under way again
16 with the meeting.

17 We're taking public comment currently from folks
18 online regarding the silica standard that's been
19 presented.

20 Mr. Roensch, you want to call the next speaker,
21 please.

22 MR. ROENSCH: Yes. Thank you, Mr. Chairman.

23 Renee Guerrero Deleon with SoCalCOSH is our next
24 line online commenter.

25 MS. DELEON: Hello, everyone. I want to start off by

1 thanking staff and interpretation in receiving our
2 comments today as well as Dr. Houlroyd and those on the
3 panel from KYR and CDPH for providing valuable
4 information to the public.

5 I'm Renee from the Southern California Coalition
6 for Occupational Safety and Health. Our organization is
7 founded on the principle that all workplace deaths,
8 injuries and illnesses are preventable.

9 We want to align our comments with those you'll
10 hear today from IDEPSCA, an organization that works
11 directly with stone cutters, particularly around methods
12 of compliance, but I'll leave them to speak to that.

13 I just wanted to say that every worker should be
14 able to return home at the end of the day. They
15 shouldn't have to worry or have the constant anxiety
16 around long-term illnesses developing from occupational
17 hazards, but unfortunately for those who work with
18 fabricated stone, that is the reality they are facing
19 when working with crystalline silica.

20 Silicosis caused by exposure in the worksite can
21 occur even in low-quantity exposure, as we've learned
22 today, and is something I believe we should consider more
23 when discussing permissible exposure levels. This is an
24 illness in which we know there is no cure and while
25 medical treatments may prolong the worker's life, it

1 cannot ultimately save it.

2 It is important that we ask ourselves if
3 crystalline silica is even something that any worker
4 should encounter at the job at all, especially given what
5 was presented today by Dr. Houlroyd on how exposure
6 limits were not able to be consistently lowered.

7 We should look to countries such as Australia
8 that have gone as far as banning fabricated stone. The
9 work on crystalline silica is not finished today, but
10 today at this Board, you do have the ability to change
11 how this hazard is approached in the meantime. The Board
12 has the opportunity to vote on a silicosis standard that
13 will mitigate the risks of fatal disease and we implore
14 you to do that. Please do not let these protections
15 lapse. Thank you.

16 CHAIR ALIOTO: Thank you very much.

17 MR. ROENSCH: Our next online commenter is Mr. David
18 Harrington. He's retired with Cal/OSHA.

19 Mr. Harrington, if you'd like to address the
20 panel, please.

21 MR. HARRINGTON: Yeah. Chair Alioto and other
22 members of the Standards Board, I'm David Harrington. I
23 recently retired from Cal/OSHA consultation. I'm
24 speaking to you today in support of the permanent
25 adoption of the ETS silica standard, 5204.

1 In my capacity as a CSHO in the Bay Area, I had
2 the lead responsibility to conduct Cal/OSHA consultation
3 visits to countertop shops that had a high-experience
4 modification rating due to injuries. However, in all
5 cases, overexposure to silica was really their biggest
6 problem. These shops had a wet bridge saw for major
7 cutting out of counters followed by the use of hand power
8 tools, both dry and wet. All these shops were way above
9 the permissible exposure limit.

10 For those shops who were committed to addressing
11 the silica dust issues, it meant many changes from
12 improving or purchasing the latest CNC saws with the best
13 controls or water jet cutting saws, purchasing CNC
14 routers, and doing a lot less power hand tool work,
15 keeping all the surfaces in the shop wet, instituting a
16 Respiratory Protection Program, a silica medical program,
17 and conducting extensive training.

18 Respirators were prior to my arrival were just
19 passed out and there was no Respiratory Protection Program.
20 Then they hired a consultant to conduct air sampling and
21 find that they now are sometimes below and sometimes
22 above the PEL and sometimes above and sometimes below the
23 action level.

24 As this emergency temporary standard does
25 require that workers be provided PAPRs for respiratory

1 protection might seem extreme to some, but when it is so
2 difficult and costly to have consistently effective
3 engineering controls, then it becomes the only backstop
4 to protect workers.

5 Finally, this product is inherently toxic and a
6 dangerous product, which if the silica content cannot be
7 greatly reduced, it needs to be banned. There's no doubt
8 in my mind about this, having been in lots of shops and
9 what it takes to control the dust. These are not
10 countertop shop workers but hazardous materials workers
11 and they should be protected accordingly.

12 If and until this happens, if we follow the
13 hierarchy of controls, we would eliminate the hazard or
14 reduce it. This regulation protects the workers and
15 sends a message to the manufacturers that they need to do
16 something about their toxic product. Thank you.

17 CHAIR ALIOTO: Mr. Harrington, thank you very much
18 for sharing your experiences.

19 MR. ROENSCH: Our next online commenter is Mr. Jim
20 Hieb with the Natural Stone Institute.

21 MR. HIEB: Yes. Good afternoon. My name is Jim
22 Hieb, CEO for the Natural Stone Institute, and I want to
23 thank you for the warm reception that you provided my
24 industry colleague Marissa earlier.

25 We are one of several key trade associations who

1 have collaborated with Cal/OSHA, Public Health, and so
2 many other stakeholders on this subject and we appreciate
3 the opportunity to collaborate with all of you.

4 For our part, we have brought to the industry
5 much training. We've produced guidance documents as was
6 referenced, much of it with the support of the Yale
7 School of Medicine, and we have scientific reports that
8 are yet to be published. In fact, our most recent study
9 on several fabrication shops is going to print in a few
10 days. But most importantly, we appreciate the warm
11 working relationships that we've had with the Cal/OSHA
12 staff and so many in the Public Health community.

13 We want to applaud you for the steps you've
14 taken with the ETS, especially the part where you can go
15 in and shut down dry shops, but we must also consider the
16 shops that are compliant. This one-size-fits-all, I want
17 to join Marissa in encouraging you to direct your staff
18 to bring together trade associations like ISFA and the
19 Natural Stone Institute, Public Health.

20 At this point, we've worked together. We've had
21 many meetings together and we really need to look at this
22 TSA pre-check because we have data that we believe will
23 help us understand how to interact with these companies.

24 You know, we can look at this as the half glass
25 half full or the glass half empty. As was said earlier,

1 wet methods may not be the total solution, but when coupled
2 with good housekeeping, routine monitoring, medical
3 surveillance and so forth, so Chairman, we stand ready to
4 work and I encourage you to direct your staff, Let's get
5 us all together. Let's look at the TSA pre-check
6 concept. We want to work together and we will do so much
7 together.

8 One last comment, if I may. The licensure stuff
9 that was proposed last year that failed, as you all know,
10 there's a new bill. What caused it to fail was there was
11 no budget assigned to it. We are working actively to
12 help present a budget that would be a combination of
13 fabricator registration and also an assessment on the
14 slab material. So we're coming to the table ready to
15 work. Please direct your staff to continue working with
16 us on the TSA pre-check.

17 Thank you for the extra time. Happy holidays.

18 CHAIR ALIOTO: Thank you, Mr. Hieb. Happy holidays
19 to you. It's nice to see you, and thank you for your
20 optimism and for your kind words.

21 MR. HIEB: Thank you.

22 CHAIR ALIOTO: Mr. Roensch?

23 MR. ROENSCH: All right. Our next online commenter
24 is Dorian Kenleigh. She's an M.D., MPH and FACOEM, and
25 she's with the Desert Occupational Medicine Group.

1 Go ahead, Dorian. If you would like to unmute
2 your microphone, you can address the Board.

3 Dorian Kenleigh, if you are near your WebEx
4 connection, you can unmute your microphone and address
5 the Board.

6 CHAIR ALIOTO: Mr. Roensch, let's go to the next
7 speaker, please.

8 MR. ROENSCH: Okay. The remaining preregistered
9 commenters are not showing on WebEx, but if I may, I'll
10 call their names and if they can unmute their
11 microphones, they can make their comments.

12 The next commenter is Ayan Ortega from
13 SoCalCOSH.

14 MR. ORTEGA: Hi. Good afternoon, Jeff. Good
15 afternoon, Chair and Members of the Board.

16 My name is Ayan Ortega. I am with the Southern
17 California Coalition for Occupational Safety and Health
18 and we're here today because we believe that all workers
19 deserve safe working conditions.

20 The proposed changes to the silica section in
21 Title 8 provide much better responses to this incredibly
22 dangerous and harmful material and I do hope that the
23 Board passes the proposed changes, as they present
24 another step towards protecting workers from the
25 silica-based illnesses and death deaths, but while it

1 presents a step forward, I would like us to consider
2 taking even stronger measures to ensure the worker
3 safety.

4 Just as it was mentioned earlier, if these
5 protections were to be put into place today, there might
6 be the possibility of workers or sorry companies going to
7 a neighboring state. I do think that this argument is
8 particularly weak considering that the implication is
9 that workers here in California will have to keep bearing
10 the brunts of these dangers with silica and then it also
11 implies that workers and advocates and other stakeholders
12 will not stand up and fight for the protection of workers
13 when this happens in other states as well. So I do think
14 that we must act on this. It's incredibly important.

15 In regards to the action level, I think even if
16 a person is exposed to a low amount, a low amount of
17 silica over many years can still lead to irreversible
18 damage, so illness or death, even illness or death in the
19 long run. So what we're seeing with silicosis is an
20 extreme and terrible consequence of exposure, but
21 exposure at any level would have done damage to a
22 person's airway.

23 So, again, while I do hope that a proposal is
24 accepted by the Board, we do have to readjust what our
25 goal is. The best way to eliminate this danger to

1 workers would be to eliminate the use of engineered
2 stone. And I realize that may not be within the scope of
3 the Board today, but I do hope that that is part of the
4 long-term goal. Anything less is merely blunting this
5 completely preventable damage done to workers. Thank
6 you.

7 CHAIR ALIOTO: Thank you for your comments.

8 MR. ROENSCH: Our next commenter or preregistered
9 commenter is Dr. Sally Sadaghiani and she's with WOEMA
10 Legislative Committee.

11 Dr. Sadaghiani, if you are online with us, you
12 can unmute your microphone and address the Board.

13 This commenter does not appear to be in WebEx,
14 so we'll move on.

15 Nate Kolenski with Block Tops is our next online
16 commenter.

17 Nate, if you are online with us, you can unmute
18 your microphone and address the Board. Nate Kolenski.

19 Okay. We'll move on to the next commenter,
20 which is Dr. Robert Blink with WOEMA.

21 Dr. Blink, if you're online with us, you can
22 unmute the microphone and address the Board.

23 Mr. Chairman, if I may, I'll move on to the
24 hands that are raised online.

25 Maegan Ortiz with IDEPSCA has raised her hand.

1 MS. ORTIZ: Thank you. Good afternoon. Oh, sorry.

2 MR. ROENSCH: Go ahead. That's all right. Thank
3 you.

4 MS. ORTIZ: Yes. Thank you. Good afternoon.

5 Maegan Ortiz, Executive Director of IDEPSCA.
6 We're one of the partners with LADPH that has been going
7 with Spanish-speaking staff to different shops across
8 L.A. County to talk to those stone cutters and we believe
9 that the current proposed regulation is a step in the
10 right direction and we don't think there should be a
11 pause.

12 There are always questions and concerns, but I
13 will say that a lot of the shops that we meet where there
14 are unprotected workers, contrary to what we heard today,
15 these are not all dry shops.

16 Immigrant workers are being informed of what
17 their rights are, but employers hold a lot of power,
18 especially over a predominantly undocumented workforce,
19 and we can't erase or act like that power differential
20 doesn't exist when we're talking about the implementation
21 of an emergency standard or a permanent standard.

22 We also have yet to meet workers who were
23 working in compliant shops and moving to noncompliant
24 shops as has also been stated. You know, as
25 Dr. Houlroyd's presentation demonstrated, there really is

1 no distinction between small and large shops when it
2 comes to exposures and we're really concerned that the
3 industry's insistence on this dichotomy is really more
4 about the industry's bottom line than worker health.

5 We feel like the medical surveillance section
6 and engineering controls have really been firmed up and
7 we really like DLHCP's authority over workers' comp and
8 medical surveillance.

9 We are concerned about capacity, but we hope to
10 get there, and we do not agree that loosening any
11 controls for "good" employers will help eliminate risk.
12 You know, in a recent listening session that IDEPSCA
13 held, stone cutters, including those who were managing
14 oxygen tank tanks and small children, shared with us that the
15 artificial stone causing this damage should be banned.
16 They don't think this product can be safely regulated and
17 there are conversations in Sacramento about looking at a
18 ban, although that bill has not formally yet been
19 introduced.

20 I will say that we have seen S.B. 20, which is
21 really a copy of last year's failed bill, and it includes
22 regulations that are actually irrelevant to the actual
23 workforce doing the stone cutting. So that's why worker
24 advocates such as IDEPSCA are not supporting this bill as
25 written.

1 Delaying the vote is a gift to industry and it
2 means more death and illness to workers. Pass the
3 standards and let's let legislators work on a ban. Thank
4 you.

5 CHAIR ALIOTO: Thank you, Ms. Ortiz.

6 MR. ROENSCH: Mr. Chairman, we have no further
7 preregistered commenters and there are currently no hands
8 raised for this topic.

9 CHAIR ALIOTO: Okay. Great. Let me just make one
10 more announcement. Anybody here in person who would like
11 to comment on this proposal? I see no hands.

12 Anybody, last chance if you're online to raise
13 your hand, if you would like to make a comment, public
14 comment, on this silica regulation?

15 DR. SADAGHIANI: Yes. May I comment, please?

16 CHAIR ALIOTO: Yes, please.

17 DR. SADAGHIANI: Yes. Hi. I'm sorry. I had my
18 technical difficulties. I was called up, but couldn't
19 speak, so I am on the phone now.

20 CHAIR ALIOTO: No problem.

21 DR. SADAGHIANI: I am Dr. -- thank you.
22 Mr. Chairman, dear Board, thank you for the opportunity
23 to speak. I am Dr. Sadaghiani. I am the Chair of the
24 Legislative Committee of the Western Occupational and
25 Environmental Medicine Association, the committee who

1 originally petitioned for these standards.

2 Our doctors have found that since the last time
3 the Legislative Committee looked at this, the numbers of
4 the diseased people have more than doubled. We have gone
5 from about 100 people to more than 230 only in
6 California. For us doctors, it is the most devastating
7 to look at a patient and tell them, "There is really
8 nothing else we can do for you" and speaking about real
9 lives, it doesn't get any more real than hearing that
10 your days are counted.

11 As the doctors, we believe that it is our duty
12 to protect the workers. As inconvenient as it may be,
13 this is a very lethal disease. It is very dangerous to
14 handle this material and we would like to support a
15 permanent standard. This is like the new asbestos and
16 more dangerous. We have to make precautions to protect
17 the workers, and thank you for your time.

18 CHAIR ALIOTO: Doctor, thank you very much for your
19 comments.

20 Any other comments online, Mr. Roensch?

21 MR. ROENSCH: There are none.

22 CHAIR ALIOTO: All right. This closes the public
23 comment period on the proposed standard. Let's open it
24 up for discussion among the Board. Thoughts? Comments?

25 BOARD MEMBER LASZCZ-DAVIS: I mean, just thinking out

1 loud here, it would make some sense to consider the
2 provisions of this proposed regulation with an advisory
3 committee that would immediately be set up to look at
4 possible solutions for implementation. And I don't know
5 what that looks like, but, you know, listening to
6 Marissa's comments certainly suggested that the two
7 coupled together could be very enabling in terms of
8 mitigating the risk that we have presently.

9 BOARD MEMBER URWIN: I guess just going back to the
10 procedural question, just for all of our benefit on the
11 Board insofar as understanding how things can work
12 insofar as the outcome of a vote and subsequently
13 addressing things that might need to be fixed in a rule.
14 So this goes to a vote momentarily here, if I understood
15 correctly.

16 CHAIR ALIOTO: Correct. Yeah.

17 BOARD MEMBER URWIN: And then from there, you know,
18 pass or not pass, the motion could then be made to go to
19 rulemaking to whether this passes or doesn't pass to say,
20 okay, go and address this Issue A or Issue B, like what
21 you brought up insofar I believe it was subsection (h) on
22 the respiratory protection standard. Is that
23 procedurally how the process can go?

24 CHAIR ALIOTO: Yes. So procedurally right now we're
25 looking at and doing one thing and one thing only and

1 that is voting on this regulation and we can have any
2 kind of discussion that we want on this regulation and
3 then we vote it up or down and if there's any subsequent
4 business related to it, then we can take it up at that
5 time.

6 BOARD MEMBER URWIN: And then the time for a motion,
7 would that be subsequent to the vote like say, Hey, I
8 propose that there's rulemaking to address, you know,
9 whatever concerns or issues there might be like with
10 subsection (h) as it relates to respiratory protection?
11 That would happen after the vote?

12 CHAIR ALIOTO: Yes, unless there's a notice issue
13 that the lawyers tell us about. There's not, so yes.
14 All right?

15 Okay. Mr. Thomas.

16 BOARD MEMBER THOMAS: Yeah. I was just going to
17 suggest that what we do is vote on what we have before us
18 and then I think probably the best thing to do, since we
19 know that there's some issues with that, is set up an
20 advisory committee to be formed to go over whatever
21 issues are going to come up with this that may be
22 lacking. The regulation may be lacking a little bit, so
23 if we set up an advisory committee, we can handle those
24 issues as they come up.

25 CHAIR ALIOTO: Yeah. This is I guess probably a good

1 time for me to -- I'm going to be voting for this
2 regulation. There's no question about it. This is a
3 devastating disease. The evidence of of of its cause is
4 overwhelming and there's something that we can do about
5 it right now and I'm going to participate in doing
6 something about it. I know many of you are going to join
7 me in that effort.

8 I also think and I'm concerned that the
9 regulation in some respects does not go far enough. I
10 think that the -- some of the provisions, based on at
11 least some of the preliminary data that we've heard about
12 today, it it it tends to demonstrate to me that we might be
13 offering exceptions for wearing PAPR when that exception
14 might not be scientifically sound where if wet methods
15 are being used and testing is being conducted once every
16 six months, that that that might provide us with false hope
17 that there is no danger, the PAPR is removed, and then that
18 opens up the possibility for a lot of people to become
19 very, very sick.

20 I am very concerned about that and those are
21 issues that I think arose today really to the forefront
22 probably for the first time over the last six months that
23 we've been talking about this. I know there there have been
24 some discussions and some thoughts, but these are really
25 the first time that I think it was presented in the

1 manner that it was by our -- by Dr. Houlroyd from Georgia
2 Tech and the issue that I have is not just the fact that
3 the small and large companies can be -- have shown
4 equally potential danger, but this idea that the wet
5 method which I have been presuming was the safe way to do
6 it might not be safe at all is massively concerning for
7 me.

8 So I'm going to vote for this, and then I think
9 I agree with Dave that I would propose and support of
10 convening another advisory committee to consider
11 additional manners and ways to strengthen this regulation
12 but also to consider some of the ideas that I think are
13 valid that have been presented by the silica the silica safety
14 coalition. I don't know whether those ideas are valid or
15 not.

16 I want to emphasize, too, that I don't know -- I
17 think there needs to be some work done in validating the
18 data that was presented to us in many forms. So I think
19 there's still work to be done. I think that there's no
20 work to be done on this regulation and I think that it
21 must be passed. So that's my position.

22 Anybody else? Please.

23 BOARD MEMBER KENNEDY: To sort of follow up, I think
24 it looks like after we vote, we are going to be
25 requesting further work to refine the regulation. My

1 concerns -- and I'm saying these now because as we move
2 into that process, I'm hoping we'll have another
3 opportunity to talk about what we think should be
4 approached, but my concerns with it are I don't like the
5 reliance on respirators as the safety net at the bottom
6 after engineering controls.

7 Recognizing that wet methods may not always
8 work, I think it's -- is it only me hearing the echo?
9 You know, my training and my belief is that respirators
10 are not the way to protect employees on an eight-hour
11 day, day-after-day basis. And so I would like to see
12 more emphasis on how engineering controls other than wet
13 methods can be used. These include -- this includes
14 local exhaust ventilation, chambered operations, glove
15 boxes. There are many ways to approach this problem that
16 are -- and we all know the value of engineering controls
17 over respiratory protection.

18 So as it moves forward, which I think is going
19 to be the request, I would like to see a focus on that,
20 as opposed to using respirators as a safety net, because
21 I don't know how many people in this room have worn a
22 respirator all day for numerous days. It's a miserable
23 way to work and that's why workers aren't. I mean,
24 that's one of the reasons that contributes to the problem
25 is that these are people that are doing hot, heavy,

1 manual work, and wearing a respirator is no fun.

2 CHAIR ALIOTO: Are there any other comments? Yes.

3 BOARD MEMBER KENNEDY: A follow-up comment, and this
4 is just because I was so confused. If it goes to a
5 reworking, the -- this regulation applies to this person
6 and then the numerous exceptions throughout, if there's a
7 way to clarify who's covered by the regulation in a very
8 simple, easy format up-front -- I know that's not always
9 easy because certain parts are -- different people are
10 excepted from different parts, but that's a confusing
11 part of the regulation. That's it.

12 CHAIR ALIOTO: Any other comments? Last chance.

13 All right. Is there a motion?

14 BOARD MEMBER THOMAS: I'll make a motion that we
15 adopt the regulation.

16 BOARD MEMBER CRAWFORD: I'll second.

17 CHAIR ALIOTO: Ms. Crawford? Okay.

18 There's been a motion to pass the regulation by
19 Mr. Thomas, seconded by Ms. Crawford.

20 Ms. Money, will you please call roll.

21 MS. MONEY: So I have Dave Thomas for the motion and
22 Kate Crawford as the second. Correct?

23 CHAIR ALIOTO: Correct.

24 MS. MONEY: Kathleen Crawford?

25 BOARD MEMBER CRAWFORD: Aye.

1 MS. MONEY: Dave Harrison?

2 BOARD MEMBER HARRISON: Aye.

3 MS. MONEY: Nola Kennedy?

4 BOARD MEMBER KENNEDY: Aye.

5 MS. MONEY: Chris Laszcz-Davis?

6 BOARD MEMBER LASZCZ-DAVIS: Aye.

7 MS. MONEY: Dave Thomas?

8 BOARD MEMBER THOMAS: Aye.

9 MS. MONEY: Derek Urwin?

10 BOARD MEMBER URWIN: Aye.

11 MS. MONEY: Chairman Alioto?

12 CHAIR ALIOTO: Aye.

13 The motion passes and the regulation succeeds.

14 Let me just take a second to say thank you to
15 everybody who participated with this. There have been
16 people that have been coming to public comment for many
17 months. There have been people that have been spending
18 many days closed -- lots of hours behind closed doors at
19 the Division, on the staff, folks in all of their various
20 roles that they've played in this in this process, and I just
21 want to extend to all of you a thanks and an appreciation
22 for all of the input. And thank you.

23 Yeah. Is there another -- any other thoughts?

24 Yes, Ms. Laszcz-Davis?

25 BOARD MEMBER LASZCZ-DAVIS: My supplemental thought

1 is that on the heels of that, I'd like to propose that an
2 advisory committee be set up to explore further
3 refinement to strengthen the regulation and to make it
4 more implementable.

5 CHAIR ALIOTO: Is there a second?

6 BOARD MEMBER URWIN: I'll second.

7 CHAIR ALIOTO: All right. We have Dr. Urwin second.

8 Before we go to the roll call, any discussion on
9 this issue? Any further discussion?

10 All right. Ms. Money, will you please call
11 roll.

12 MS. MONEY: Yes. So I have Chris Laszcz-Davis as the
13 motion and Derek Urwin as the second; correct?

14 CHAIR ALIOTO: That's correct.

15 MS. MONEY: Kathleen Crawford?

16 BOARD MEMBER CRAWFORD: Aye.

17 MS. MONEY: Dave Harrison?

18 BOARD MEMBER HARRISON: Aye.

19 MS. MONEY: Nola Kennedy?

20 BOARD MEMBER KENNEDY: Aye.

21 MS. MONEY: Chris Laszcz-Davis?

22 BOARD MEMBER LASZCZ-DAVIS: Aye.

23 MS. MONEY: Dave Thomas?

24 BOARD MEMBER THOMAS: Aye.

25 MS. MONEY: Chairman Alioto?

1 CHAIR ALIOTO: Aye.

2 And the motion passes and an advisory committee
3 has been approved. Please make sure, obviously, to reach
4 out to all the folks that have played any kind of role in
5 this discussion, including the folks from industry and
6 all the other variety of people that we've spoken to, and
7 we'll be really interested to see what you all come up
8 with through this advisory committee process.

9 All right. Thank you very much. We're going to
10 move on in the agenda here. I think we're on to
11 variances. Am I right?

12 MS. BARAJAS: Yes.

13 CHAIR ALIOTO: Okay.

14 We're moving on to the proposed variance
15 decisions for adoption. They're all listed in the
16 consent calendar.

17 Michelle Iorio, will you kindly brief the Board.

18 MS. IORIO: Thank you, Chair Alioto and Board
19 members.

20 On the consent calendar this month, we have
21 proposed decisions 1 through 82 for your consideration
22 and possible adoption.

23 CHAIR ALIOTO: Thank you. Do I have a motion?

24 BOARD MEMBER THOMAS: I'll make a motion -- oh,
25 sorry, Dave.

1 BOARD MEMBER HARRISON: Please.

2 BOARD MEMBER THOMAS: I'll make a motion to adopt the
3 Variance --

4 CHAIR ALIOTO: All right.

5 BOARD MEMBER THOMAS: -- 1 through whatever, 80- --

6 CHAIR ALIOTO: Mr. Thomas proposes to move to adopt
7 the consent calendar, and we have a -- do we have a
8 second from Mr. Harrison?

9 BOARD MEMBER HARRISON: Second.

10 CHAIR ALIOTO: We have a second from Mr. Harrison.

11 Ms. Money, will you please call roll.

12 MS. MONEY: I know we heard it loud and clear, but
13 I'm going to repeat it just in case. So I have a motion
14 from Dave Thomas and second from Mr. Harrison; correct?

15 CHAIR ALIOTO: Yes.

16 MS. MONEY: Kathleen Crawford?

17 BOARD MEMBER CRAWFORD: Aye.

18 MS. MONEY: Dave Harrison?

19 BOARD MEMBER HARRISON: Hi.

20 MS. MONEY: Nola Kennedy?

21 BOARD MEMBER KENNEDY: Aye.

22 MS. MONEY: Chris Laszcz-Davis?

23 BOARD MEMBER LASZCZ-DAVIS: Aye.

24 MS. MONEY: Dave Thomas?

25 BOARD MEMBER THOMAS: Aye.

1 MS. MONEY: Derek Urwin?

2 BOARD MEMBER URWIN: Aye.

3 MS. MONEY: Chairman Alioto?

4 CHAIR ALIOTO: Aye.

5 And the motion passes. Thank you, folks.

6 We're going to move on to reports. We're going
7 to start with the Executive Officer's report.

8 Millie, would you kindly brief the Board.

9 MS. BARAJAS: Yes. Thank you. I have one update this
10 afternoon. It's regarding an update on the Fall Protection
11 Trigger Heights for Residential Construction. This was
12 approved by the Office of Administrative Law and Department
13 of Finance and the effective date for this will be July 1st,
14 2025. Thank you.

15 CHAIR ALIOTO: Great. Thank you very much, Millie.

16 Any questions for Millie about that update?

17 All right. We had planned to have a short
18 discussion both of a recap of all of the regulations and
19 the great successes of this Board and its staff and the
20 Division over the course of the last year and also what
21 to look forward to the next year, but this meeting was
22 very, very long. So we decided to postpone those updates
23 and we'll be conducting -- doing those updates in the
24 beginning of next year.

25 So we'll get a move on then to the Cal/OSHA

1 update.

2 Eric Berg, will you kindly brief the Board.

3 MR. BERG: Yeah. Thank you.

4 We sent out a notice for an advisory committee
5 on January 24th for the Workplace Violence Proposal, so
6 that'll be an online-only advisory meeting. So we'll
7 have the agenda and more details coming out soon. That's
8 what's coming up, and that will be to implement S.B. 553,
9 which is Labor Code 641.9, but the proposal is similar to
10 that bill and adds some additional details. So the
11 advisory committee will go through that and discuss all
12 the possible changes.

13 CHAIR ALIOTO: Okay. Great. Thank you.

14 Any questions about -- anything else, Mr. Berg?

15 MR. BERG: No. That's it. Thanks.

16 CHAIR ALIOTO: Any questions for Mr. Berg? No?

17 All right. Thank you for your updates.

18 We're going to move on to public comment,
19 non-agenda public comment. This is the time when you get
20 to comment -- I'm going to hang on a minute -- regarding
21 any issue of occupational safety and health and, however,
22 I would ask during this period that there not be any
23 comment on issues that have already been discussed or
24 have been agendized otherwise.

25 The Board is not going to entertain comments

1 regarding any variance matters because the Board's
2 variance hearings are administrative hearings where
3 procedural due process rights are carefully preserved.

4 Would you care to begin.

5 MR. LITTLE: I would. Thank you.

6 CHAIRMAN ALIOTO: Please proceed.

7 MR. LITTLE: I will not discuss any of the many
8 things you've already discussed because --

9 CHAIRMAN ALIOTO: Thank you.

10 MR. LITTLE: -- you've already discussed them
11 ad nauseam and they don't need to be relitigated, and
12 also try not to add any more than necessary to your
13 already very long day.

14 CHAIRMAN ALIOTO: Thank you.

15 MR. LITTLE: I'm Bryan Little with California Farm
16 Bureau. I think most of you know me. I've been here
17 many, many times before. I just wanted to offer one
18 thing is happy holidays and thank you to all of you,
19 Board staff, Agency staff and Board Members.

20 You Board Members do this job on a voluntary
21 basis and all of us appreciate all the time and energy
22 and effort that you put into this and so I just wanted to
23 offer that brief thanks.

24 I want to associate myself with some comments
25 that Bruce Wick made earlier about the need to work and

1 the work that Katie's doing to make sure that the agency
2 is fully staffed because having credible enforcement
3 alongside compliance assistance, robust compliance
4 assistance, is the way that we're going to continue to
5 make California workplaces safer.

6 I want to thank you for your decision last month
7 to empanel an advisory committee to start looking at how
8 the agency can or should regulate or change its
9 regulations around the use of autonomous agricultural
10 equipment. I think all of you have been, seen
11 demonstrations of autonomous agricultural equipment and
12 you know that it's already being used and is going to be
13 used more in the future than it's being used now.
14 However, we have regulations on the books that are
15 interfering with the use of some of that autonomous
16 agricultural equipment and that's a problem that we need
17 to try to deal with as soon as we can.

18 I just wanted to mention that when that advisory
19 committee goes forward and starts doing its work, we need
20 to be looking at the issues around the use of autonomous
21 agricultural equipment not in comparison to a perfect
22 world where accidents never happen because that's not the
23 world we're in now. Human operators of agricultural
24 equipment unfortunately make mistakes, have accidents,
25 injure themselves, injure other people, and sometimes

1 unfortunately die in those accidents.

2 An autonomous tractor, just as an example, is an
3 opportunity to completely remove the human being from the
4 risk of having an accident that could result in an injury
5 or a fatality. To the extent that we miss the
6 opportunity to be able to take that opportunity and
7 remove that person from that hazard altogether, that will
8 be a huge mistake and I think that's how we need to be
9 looking at how we evaluate the use of autonomous
10 agricultural equipment. I hope to be asked to
11 participate in that effort and that's a message I will
12 bring to that when that starts to happen.

13 So thank you and have a wonderful holiday
14 season.

15 CHAIR ALIOTO: Thank you very much. Thank you very
16 much, Mr. Little, for your comments. Happy holidays to
17 you as well.

18 MR. GRUBB: Good afternoon, Chairman Alioto and
19 Members of the Board. My name is Ron Grubb and I'm
20 speaking today on behalf of the Phylmar Group.

21 My comments today are based on feedback from the
22 Phylmar stakeholders concerning the California COVID-19
23 Prevention Nonemergency Standard.

24 Managing requirements such as reporting, contact
25 tracing and identifying the source of infections,

1 challenges faced during the COVID-19 pandemic, present
2 significant administrative burdens, particularly if these
3 efforts are extended to Influenza or other respiratory
4 illnesses in the workplace.

5 There's a clear need for practical, streamlined
6 measures that prioritize employee health while avoiding
7 excessive tracking and reporting obligations that strain
8 employers' resources. From an employee perspective,
9 imposing strict requirements like contact tracing,
10 especially when definitions of close contact include
11 broad interpretations such as shared indoor airspace, may
12 be seen as excessive or unreasonable.

13 Employers emphasize the importance of sharing
14 general guidance with employees, encouraging them to stay
15 home when symptomatic, and providing clear and
16 commonsense measures to prevent the spread of illness.
17 This approach fosters employee acceptance and aligns with
18 workplace culture while still protecting health and
19 safety.

20 Further, stakeholders also expressed interest in
21 understanding whether Cal/OSHA plans to engage with task
22 forces or advisory groups as part of the development
23 process for the new standard that will replace the
24 nonemergency regulations. Such a collaborative approach
25 would help ensure the financial standard -- the final

1 standard reflects practical, real-world considerations
2 from industry experts balancing feasibility and
3 effectiveness.

4 Finally, questions were raised about the current
5 status of the new Infectious Disease Standard and its
6 priority within Cal/OSHA's broader regulatory agenda.
7 Stakeholders request clarification on the next steps in
8 the drafting and rulemaking process as well as
9 opportunities for ongoing input to help shape the
10 standards development. Thank you so much.

11 CHAIR ALIOTO: Thank you, sir. Thank you very much,
12 and thank you for your patience and for waiting.

13 MR. GRUBB: Of course.

14 CHAIR ALIOTO: Anyone else in person? Okay. Great.

15 MS. CLEARY: Good afternoon. I'll make it quick.

16 My name is Helen Cleary and I am a safety and
17 regulatory compliance consultant.

18 I just wanted to highlight today that we are
19 still waiting for general industry guidance on the lead
20 amendments and it's going into effect January 1st, and I
21 understand that that's out of the Board's purview right
22 now, but it was integral to the conversations we had in
23 January and February when employers asked for an
24 extension because of the complexity of the regulation.

25 So that conversation was about the Division was

1 confident they would have the support and the education
2 in place and as of today -- I checked about 30 minutes
3 ago -- there's one document for general industry. It's a
4 two-page document, and there are three that say "coming
5 soon."

6 So just highlighting as maybe a lesson learned
7 for 2024 and make you all aware, you know, that these are
8 these challenges that employers are dealing with when
9 they are trying to become in compliance.

10 So thank you. Happy holidays to everybody.
11 It's great to see everyone and I will see you next year.

12 CHAIR ALIOTO: Thank you so much.

13 Mr. Wick, good afternoon.

14 MR. WICK: Good afternoon. We first testified in
15 good morning and now it's afternoon.

16 CHAIR ALIOTO: Yep. It's evening. It's good
17 evening.

18 MR. WICK: Oh, boy. Bruce Wick, Housing Contractors.
19 Merry Christmas. Happy holidays, everyone.

20 I just want to touch on two things.

21 One, there's a lot of hardworking people in
22 Cal/OSHA. I want to recognize one person who brought an
23 advisory committee to successful conclusion today,
24 Maryrose Chan. She does a great job. She's been doing
25 the Walking Working Surfaces, which is an enormous

1 regulation with a whole lot of very technically smart
2 people and she keeps it rolling and, you know, it's just
3 taking years, but she keeps at it. She finds consensus
4 when you have a lot of, you know, disparate opinions. So
5 I just want to commend her for that work.

6 The other part, I want to follow up a little on
7 Helen's comment. We did finally get construction lead
8 information December 12th. That basically gave us six
9 days to try and implement an enormous reg. That wasn't
10 isn't going to happen. It takes effect January 1.

11 The Division took 13 years before we -- to work
12 on that reg and we gave construction employers six days,
13 basically. General industry, I looked at some federal
14 information. Construction nationally is seven and a half
15 percent of elevated blood lead levels. General industry
16 is most of the rest. They don't have their information
17 today. There's no way they can possibly be implemented
18 and I appreciate Eric has followed up in asking. We
19 asked for a delay in enforcement. I mean, that would be
20 the right thing to do now and I'm sure Eric would have
21 let me know if there was a positive response to that yet
22 and there's not.

23 So that's a very bad message Cal/OSHA's sending.
24 You all did your job. You asked the Division, "Will you
25 have this information available for people to implement

1 this reg?" And it didn't happen. And, again, the
2 appropriate thing would be to delay. So here we are.
3 We're trying.

4 And thank you for all your efforts this year.

5 CHAIR ALIOTO: Thank you very much.

6 Let's go online and Amalia, would you be kind
7 enough to announce to the Spanish-speaking audience that
8 they can make comments on any non-agenda item and they'll
9 have four minutes to do so if they require a translation.

10 (Instructions given in Spanish)

11 CHAIR ALIOTO: Thank you very much.

12 Mr. Roensch, do we have any online commenters?

13 MR. ROENSCH: We have six preregistered commenters
14 and with your permission, Mr. Chairman, I'll begin with
15 those that we can identify are on WebEx at this time.

16 CHAIR ALIOTO: Please do. Thank you.

17 MR. ROENSCH: Our first online WebEx commenter is
18 AnaStacia Nicol Wright with Worksafe.

19 MS. WRIGHT: Hello. Can you guys hear me?

20 CHAIR ALIOTO: Yes. Hello.

21 MS. WRIGHT: Hi. Okay. One second. Let me just
22 find my light. Okay.

23 Hi, everybody. This is AnaStacia with Worksafe.

24 CHAIR ALIOTO: AnaStacia, we can hear you and see you
25 and you're doing fine. Just start your time over.

1 MS. WRIGHT: Okay. Sorry. Thank you.

2 CHAIR ALIOTO: Start her time over.

3 MS. WRIGHT: Thank you.

4 CHAIR ALIOTO: Go ahead.

5 MS. WRIGHT: So hi, everybody. Hi, everybody. I'm
6 here today to express my strong support for the
7 establishment of a heat standard for corrections as soon
8 as possible.

9 As we find ourselves in the midst of winter,
10 it's easy to forget the extreme heat that California has
11 to deal with in the summer months. This issue has become
12 increasingly pressing as we see with schools, nursing
13 homes, assisted living facilities. They're all
14 struggling to protect their students and residents from
15 heat exposure due to the inadequacies of buildings that
16 were constructed long before California's temperatures
17 began to skyrocket.

18 This challenge is especially severe in our
19 state's correctional facilities. While we recognize the
20 cost is a is a significant concern for stakeholders, the
21 SRIA for the General Indoor Heat Standard highlighted that
22 approximately 1,500 State-run correctional institutions
23 would be regulated by the proposed regulation; but
24 importantly, around half of those facilities are likely
25 exempt from the indoor heat requirements due to location

1 or existing climate control measures.

2 The SRIA also points out that the business costs
3 associated with implementing these standards are minimal
4 as far as businesses, business expenses go. Moreover,
5 investing in heat safety measures can lead to long-term
6 savings by reducing the likelihood of heat-related
7 lawsuits.

8 In conclusion, we urgently need Heat Standard
9 the Heat Standard rulemaking process to move as fast as
10 possible so that we can protect California's correctional
11 workers and the inmate workers before the arrival of another
12 summer marked by searing heat temperatures. Timely
13 action on this action is critical for ensuring safety the
14 safety and health of the correctional facilities and for saving
15 lives within our correctional facilities. Thank you.

16 CHAIR ALIOTO: Thank you very much.

17 MR. ROENSCH: Mr. Chairman, our next online commenter
18 is Robert Moutrie with the California Chamber of
19 Commerce.

20 MR. MOUTRIE: Good evening, Mr. Chairman, Rob
21 Moutrie, California Chamber of Commerce. Can you hear me
22 all right?

23 CHAIR ALIOTO: Yes. Thank you.

24 MR. MOUTRIE: Okay. I am home sick, but I appreciate
25 the opportunity to comment. Sorry I can't be there with

1 you. I'm would echo the thanks to everybody, Board
2 Members and staff, for the work this year. I know many
3 of you have been away from your families a lot for this
4 Board and for the critical work here, so I hope you get
5 to see them soon; for the next couple of weeks, a little
6 bit more.

7 I want to flag -- echo the comments of Bruce
8 Wick regarding the need for guidance for employers in a
9 timely manner in lead but also more broadly. I think
10 it's just an important issue to raise.

11 And I echo the comments of Bryan Little
12 regarding moving to update our outdated autonomous
13 tractor regulation.

14 I have one practical question that is unique to
15 me, which is looking towards the Workplace Violence
16 Advisory Committee in January, I've been advising
17 inquiring stakeholders to check the Board's website for
18 that regulatory process and I noticed that that advisory
19 committee is not on the Board's website for Workplace
20 Violence Prevention in General Industry. I'd just ask
21 that it be updated as soon as possible so that the
22 stakeholders I've advised to watch that page, you know,
23 can stay apprised.

24 Thank you and happy holidays to everyone.

25 CHAIR ALIOTO: Thank you, Mr. Moutrie. I hope you

1 feel better.

2 MR. ROENSCH: Our next online commenter is Ayan
3 Ortega with SoCalCOSH.

4 Mr. Ortega, are you still with us?

5 I'll move on to Renee Guerrero Deleon with
6 SoCalCOSH. Renee Guerrero Deleon.

7 Our next is Ruth Lopez with Valley Voices.

8 Ms. Lopez, if you are online, please unmute your
9 microphone and address the Board.

10 MS. LOPEZ: Hi. I'm here. I'm just unmuting myself.
11 Thank you so much.

12 Good afternoon. My name is Ruth Lopez. I'm the
13 Executive Director of Valley Voices, a community-based
14 organization serving Kings County and the unincorporated
15 areas of Tulare and Fresno Counties.

16 Today I'm here to address the California
17 Occupational Safety and Health Standards Board and the
18 California Division of Occupational Health and Safety
19 regarding the urgent public crisis posed by the H5N1 flu.

20 Once again our region finds itself on the front
21 lines of public health or emergency. Kings and Tulare
22 Counties is California's significant percentage of
23 California dairies and many of our local leaders are
24 dairy and cattle ranch owners directly impacted by this
25 outbreak.

1 We are deeply concerned by the lack of a unified
2 response to this crisis. As an organization dedicated to
3 supporting workers with workplace issues, we have found
4 that workers are not being provided enough information
5 about worker protections related to the avian flu. There
6 is no centralized source where the public or local health
7 departments can access data on which dairies have been
8 affected by H5N1. The lack of transparency leaves
9 communities vulnerable to misinformation and limits our
10 ability to advocate for the implementation of
11 necessary personal protective --

12 MS. BARAJAS: Can you please slow down for our
13 interpreters?

14 MS. LOPEZ: Yes. I apologize for that -- and safety
15 procedures to keep workers safe.

16 As you know, dairy workers, many of whom live
17 with their families on-site at the workplace, face unique
18 challenges. Their living arrangements increase their
19 exposure to health risks from the avian flu; however,
20 they have not been briefed on the dangers of H5N1 or the
21 precautions needed to protect themselves and their
22 families.

23 Many workers have reported not having the proper
24 training to identify the symptoms of H5N1 in animals or
25 humans. Employers have failed to provide PPE or

1 implement safety procedures.

2 And I only have ten seconds left, so it is
3 critical that the Board establish clear and consistent
4 and enforceable safety standards. These standards should
5 include transparency on the locations where workers are
6 at risk of infection, increased information sharing
7 amongst the relevant regulatory factors, require the use
8 of appropriate PPE, and require worker protections for
9 workers who miss work because of infection testing and
10 medical monitoring.

11 Thank you so much for your time.

12 CHAIR ALIOTO: Thank you very much, Ms. Lopez.

13 MR. ROENSCH: Our last preregistered commenter -- we
14 do have a hand raised, but our last preregistered
15 commenter is Jorge Luna Monterrey with Valley Voices.

16 Mr. Monterrey, if you are online with us, you
17 can unmute your microphone and address the Board.

18 All right. If I may, I'll move to the single
19 hand that we have raised, which is from Maegan Ortiz with
20 IDEPSCA.

21 MS. ORTIZ: Hi. Yes. Good evening. Last time
22 you'll hear from me today and this year. Thank you,
23 Board Chair and Board Members, for all your work this
24 year. I really appreciate the conversation and learning.

25 I just want to echo the comments of AnaStacia

1 Wright from Worksafe regarding the need to move forward
2 as quickly as possible on the Indoor Heat Standard
3 process for correctional facilities, especially given the
4 fact of new laws and regulations that will be going into
5 effect. We actually expect prison populations to
6 actually rise, meaning more people, including
7 incarcerated workers will be exposed to heat illness.

8 I want to also echo Ruth Lopez's comments on
9 H1N1. You know, there's -- COVID is also still an issue
10 and some of the most vulnerable workers are not getting
11 enough information. Their employers are not providing
12 the adequate PPE. You know, right now our outreach staff
13 are going back to Malibu tomorrow where we have been
14 already in the middle of a small wildfire where even with
15 smoke, a wildfires smoke hazard standard, we are seeing
16 employers not providing the adequate PPE, the adequate
17 respirators, as they're calling employees, including
18 domestic workers and day laborers, to come and clean up.

19 So I just want to note that as well.

20 Thank you so much. Have a happy holiday and see
21 you all in January.

22 CHAIR ALIOTO: Thank you so much. Happy holidays to
23 you as well.

24 MR. ROENSCH: Mr. Chairman, there are no further
25 online commenters.

1 CHAIR ALIOTO: All right. Mr. Smith?

2 MR. SMITH: Hello again, everyone. Dave Smith,
3 Safety Consultant, staying to the bitter end.

4 CHAIR ALIOTO: It's not over yet.

5 MR. SMITH: First, I want to compliment the Board
6 staff for this excellent rulemaking timeline that was in
7 the November meeting packet. Communication builds
8 transparency and trust in this process. Down in the
9 footnotes -- always read the footnotes -- I see "First
10 Aid Kits." That's right, First Aid Kits.

11 I'm the author of Petition 483, First Aid Kits,
12 submitted in 2006. The iron workers were complaining.
13 I've got them beat. Now, 18 years -- soon to be 19
14 years -- have passed and we still can't tell California
15 employers which first aid kit to buy. A first aid kit
16 proposal before the Board last year had no opposition.
17 It was pulled for I don't know why and then the
18 regulatory clock ran out.

19 Advisory committees: As the chair observed when
20 launching the advisory committee review process, many
21 issues could be worked out earlier in the
22 standard-setting process and I think we had a good
23 illustration of that today on a variety of issues. If
24 people don't understand what to do, they're not going to
25 do anything, which protects no one. Ambiguities or

1 unclear provisions then get resolved in litigation,
2 either before the Cal/OSHA Appeals Board or in court.
3 This is not an efficient or collaborative way to protect
4 California workers, so we need to solve more stuff
5 up-front.

6 Let's try to work together on implementation
7 issues so that people can actually do these standards as
8 part of the standards-writing process instead of passing
9 the standard and then expecting everybody to figure out
10 really complicated things.

11 So 2025 resolutions: transparency, involvement,
12 practicality, and finally, pass the first aid proposal.

13 Thank you and happy new year.

14 CHAIR ALIOTO: Thank you very much.

15 Any other speakers who would like to make a
16 comment that are here present? Yes.

17 MS. MURCELL: One more time. Pamela Murcell,
18 President of the California Industrial Hygiene Council,
19 and I will be brief. I had several things, but I just
20 want to focus on two.

21 The wildfires smoke regulation was passed --
22 basically, the emergency temporary standard into
23 permanent language -- back in 2019 and we were promised
24 that work would be done on a permanent standard, which
25 was started also in 2019. In August, there was an

1 advisory committee held to seek input on developing that
2 permanent standard. We really would like to see that
3 moved forward. The wildfire smoke regulation really does
4 need some work.

5 In my own practice, actually working, as opposed
6 to volunteering, I have gotten a lot of input from the
7 regulated communities, employers specifically, that they
8 feel that the AQI requirements for respiratory protection
9 are too high and that the workers would be better suited
10 with some different definitions as far as relevant to the
11 AQI levels. So that's just one level. Anyway, I'd like
12 to see that moved forward.

13 Another item is something that you probably
14 haven't heard for awhile is the naturally occurring
15 asbestos in construction petition, which was Petition
16 Number 568. I happened to be the primary author of that
17 petition, so I have a little self-serving process here as
18 well, but it was granted in 2018 that we should have an
19 advisory committee. We're still waiting and we would
20 like for that to get a little higher on the docket. The
21 feeling is that it should be a fairly straightforward
22 regulation effort and it just needs to get forward going
23 forward on NOA projects related to the asbestos regulations
24 because what we have currently is unworkable in that
25 regard. So I will leave that and thank you all. Happy

1 new year. See you soon.

2 CHAIR ALIOTO: Thank you. Happy holidays to you.
3 Thank you.

4 Is there anybody else online who would like to
5 make a non-agenda public comment?

6 MS. GONZALEZ: I have four comments to read.

7 CHAIR ALIOTO: Okay.

8 MS. GONZALEZ: All right. So the first one is from
9 Ayan Ortega from the Southern California Coalition for
10 Occupational Safety and Health:

11 "Good afternoon. My name is Ayan
12 Ortega with SoCalCOSH. I want to align my
13 comments with others who are speaking on the
14 need for an indoor heat standard for workers
15 in correctional facilities, be it
16 incarcerated or otherwise. Incarcerated
17 workers deserve safe working conditions just
18 like any other worker.

19 "I would also like to align my comment
20 with those speaking on the need for a
21 response to the increasing cases of H1N1.
22 Thank you."

23 All right. The next comment is from Renee
24 Guerrero Deleon, also from Southern California Coalition
25 for Occupational Safety and Health:

1 "Hello. I was unable to stay online
2 during the entire duration of today's OSHSB
3 meeting. I know I am not alone in this
4 experience and it is unfortunate that worker
5 advocates and workers may not have
6 accessibility to a State meeting that
7 ultimately governs health and safety in the
8 workplace.

9 "I would like to submit public comment
10 as written below: Hello, everyone. Thank
11 you to staff and interpretation in receiving
12 our comments today. I am Renee with the
13 Southern California Coalition for
14 Occupational Safety and Health.

15 "As mentioned previously, our
16 organization's founding principle is that
17 worker fatalities, injuries, and illnesses
18 are preventable. We stand in solidarity
19 with comments you will and have heard today
20 from organizations like IDEPSCA, Worksafe,
21 and Valley Voices on worker health and
22 safety issues.

23 "On indoor heat, we urgently request
24 that this Board prioritizes drafting and
25 implementing a heat standard for

1 incarcerated workers. These workers are
2 covered by the California Labor Code and
3 deserve the same protections, if not better
4 than the ones passed earlier this year. We
5 hope that the Board takes into account the
6 conditions these workers are in and work as
7 quickly as possible to prevent heat-related
8 fatalities in California's prison system.

9 "Yesterday, the Governor declared a
10 state of emergency due to the rise in H5N1
11 cases. California should prioritize and
12 lead the way on worker protections for
13 infectious disease. If there has been any
14 lesson we have learned from the COVID
15 pandemic, it is that protecting workers mean
16 means protecting our communities. We need a
17 stronger and clearer zoonotic ATD. Right
18 now, agricultural workers in dairies are at
19 the forefront of H5N1 exposure and the Board
20 should be doing everything in its power to
21 help mitigate and prevent further spread.

22 "Thank you for receiving our comments,
23 even in written form, and I hope that the
24 Board finds a more accessible way for the
25 public to speak on issues they are facing

1 directly at work."

2 All right.

3 Nope. I already read that one.

4 Okay. This comment is from Jorge Luna Monterrey
5 with Valley Voices:

6 "My name is Jorge Luna Monterrey and I
7 am here representing Valley Voices, a
8 community-based organization serving Kings
9 County and the unincorporated areas of
10 Tulare and Fresno Counties. Today I am
11 addressing the California Occupational
12 Safety and Health Standards Board and the
13 California Division of Occupational
14 Safety" -- "Health and Safety regarding the
15 urgent public health crisis posed by H5N1
16 avian flu.

17 "King and Tulare Counties, home to a
18 significant percentage of California's
19 dairies, are at the epicenter of this
20 outbreak. Despite this, there is no
21 centralized source of information for the
22 public, local health departments or
23 community organizations to access critical
24 data on affected dairies. This lack of
25 transparency leaves our communities

1 vulnerable to misinformation and hinders our
2 ability to respond effectively. Without
3 accurate public data, organizations like
4 ours cannot adequately advocate for the
5 implementation of necessary safety
6 procedures or ensure that workers and their
7 families are informed about the risks.

8 "Dairy workers, many of whom live with
9 their families on-site, face unique
10 challenges that increase their exposure to
11 H5N1. Unfortunately, the absence of clear
12 and consistent guidance has forced local
13 public health departments to develop their
14 own strategies, leading to inconsistencies
15 in outreach and gaps in communication.
16 Valley Voices has partnered with our local
17 public health department to fill this gap by
18 providing public outreach and coordinating a
19 vaccine effort; however, a more unified
20 statewide approach is urgently needed.

21 "We urge the Standards Board and
22 Cal/OSHA to establish a centralized public
23 database to track outbreaks at affected
24 facilities. Clear guidance and resources
25 must also be provided to ensure consistency

1 and transparency in public health responses
2 across the countries. Additionally,
3 collaboration with community organizations
4 is essential to enhance outreach and worker
5 education. By prioritizing open access to
6 data, we can protect vulnerable workers and
7 their families while strengthening community
8 resilience against this ongoing public
9 health crisis. Thank you."

10 And this is the last comment. This is from
11 Alejandro Garcia, also with Valley Voices:

12 "My name is Alejandro Garcia and I am
13 here representing Valley Voices, a
14 community-based organization serving Kings
15 County and the unincorporated areas of
16 Tulare and Fresno Counties.

17 "Today I am here to share the voices of
18 workers who face the daily realities of the
19 H5N1 avian flu outbreak. Their experiences
20 reveal troubling gaps in workplace
21 protections and underscore the urgent need
22 for stronger regulatory action.

23 "Dairy workers, many of whom live with
24 their families on-site, have reported
25 alarming conditions. They have not been

1 briefed on the danger of H5 H5N1 or the
2 precautions needed to protect themselves and
3 their families. Many workers reported not
4 having the proper training to identify the
5 symptoms of H5N1 in animals or humans.
6 Employers have failed to provide personal
7 protective equipment or implement safety
8 procedures and there has been no systemic
9 investigation or inspection of high-risk
10 facilities, leaving workers exposed to
11 significant health risks.

12 "California has reported 34 human cases
13 of H5N1 this year, all linked to cattle
14 exposure, but the actual spread is likely
15 far greater. The pathogen has been detected
16 in over 500 dairy herds, yet workers report
17 a lack of urgency from employers and
18 insufficient enforcement of existing safety
19 regulations.

20 "We are also concerned about the lack
21 of a unified response from public officials.
22 Workers have told us that the State has not
23 prioritized enforcement of existing
24 regulations, leaving local health
25 departments to fill the gap with

1 inconsistent and fragmented approaches.

2 "To address these issues, we urge the
3 Standards Board to take immediate action,
4 strategic inspections of high-risk
5 facilities and workplaces experiencing
6 outbreaks." Excuse me. "Employers should
7 be mandated to provide training and
8 protective measures for workers handling,
9 culling, transporting or disposing of
10 infected animals. Additionally, enforcement
11 of existing safety standards must be
12 strengthened and enforceable. Clear and
13 enforceable safety standards are critical to
14 protect workers and their families."

15 CHAIR ALIOTO. Thank you very much, Autumn.

16 All right. The Board appreciates everybody's
17 testimony. The public meeting is now adjourned and the
18 record is now closed.

19 BOARD MEMBER HARRISON: Excuse me.

20 CHAIR ALIOTO: Dave, it's fine. I consider it a
21 compliment. I consider it a compliment.

22 BOARD MEMBER HARRISON: Hello? Did you close public
23 comment? Because I wanted to make a comment and address
24 one of the speakers.

25 CHAIR ALIOTO: Please do.

1 BOARD MEMBER HARRISON: Thank you.

2 CHAIR ALIOTO: Sure, but we also have comments by
3 Board Members in the next section.

4 BOARD MEMBER HARRISON: Okay. Then I'll --

5 CHAIR ALIOTO: So public comment is closed, but we're
6 now going to move on to comments by Board Members.
7 Mr. Harrison I think has a comment, Joe Harrison.

8 BOARD MEMBER HARRISON: Joe?

9 So I just want to make a -- address the comments
10 that were made in regards to the Lead Standard and
11 several months ago we passed the updated Lead Standard
12 and I was -- I spoke actually in support of a delayed
13 implementation and I believe we asked for July 1 of 2025,
14 as opposed to January 1, and to no avail, and it was
15 reassured that there would be plenty of support through
16 guidance documents with the Division, and I I have a
17 feeling that that delayed implementation is too late, but
18 I am going to just state for the record that if there's
19 enforcement in in this particular area around -- with an
20 employer that requested help through guidance documents,
21 I'm going to be very disheartened and discouraged by the
22 process and I would really hope that the Division works
23 diligently with those employers to help them comply, so
24 thank you.

25 MR. BERG: Yes. The lead regulations, as you know,

1 were approved February 15th of this year and then
2 approved by the Office of Administrative Law on
3 April 8th, 2024, and it would have been effective
4 July 1st and we requested Office of Administrative Law to
5 delay it six months, and then Cal/OSHA consultation has
6 been available to assist employers with the updated lead
7 regulations and they continue to provide assistance
8 whenever requested.

9 I know someone mentioned there's an eight-month
10 backlog, but consultation just recently hired 50 people,
11 so they have they've increased quite a bit. So they're
12 really working on filling a lot of the ranks and they're
13 doing very well. So we're working hard on that, making
14 sure that consultation can reach all the employers that
15 request assistance. And the backlog's for, you know,
16 on-site visits; and I am not aware of the eight-month
17 backlog, but that's true that's for the online one. They
18 also provide, you know, online support and also telephone
19 support.

20 And as you mentioned, there were there were --
21 documents weren't posted until December for construction
22 in general industry. Right now, only one is posted and
23 they're still working on the other ones, so that's still
24 coming.

25 And if an employer's unable to come into

1 compliance with the regulation by its effective date,
2 which would be January 1st, they can apply for a
3 temporary variance and then instructions are in Labor
4 Code 6450 through -- sorry -- 6450 through 6457. And
5 also, on our website, we have instructions if employers
6 want to ask for a temporary variance because they can't
7 comply by the effective date.

8 So hopefully we'll have those remaining guidance
9 documents online, but we've had, you know, resources
10 available to help people when they they've asked.

11 CHAIR ALIOTO: Please.

12 BOARD MEMBER LASZCZ-DAVIS: Eric, just a question to
13 follow up on Dave's. I know you indicated that there's
14 certainly the hope that the guidance documents are
15 forthcoming. Do you have any sense as to when they might
16 be posted?

17 MR. BERG: Oh, the remaining guidance documents?

18 BOARD MEMBER LASZCZ-DAVIS: For lead.

19 MR. BERG: Yeah. They should be posted before the
20 end of the year is my is my understanding, so hopefully that
21 happens.

22 CHAIR ALIOTO: Anything else?

23 BOARD MEMBER KENNEDY: I'll just throw something in
24 here. So we had a couple of people requesting indoor
25 heat for corrections facilities since that was an

1 exception to the standard we adopted. I I don't know if
2 that's still a hot potato topic or not, but do we have
3 any data about incidents of heat-related illness in the
4 corrections industry in California to inform that?

5 MR. BERG: I mean, I know there's incidents and it's
6 a serious problem and we are working on language and
7 getting it posted so then we can schedule an advisory
8 meeting.

9 BOARD MEMBER KENNEDY: Okay.

10 MR. BERG: So that's in process and part of that will
11 be getting more data.

12 BOARD MEMBER KENNEDY: Thank you.

13 MR. BERG: And then if I may comment on bird flu real
14 quick, we have a very robust regulation on bird flu.
15 Someone mentioned the Aerosol Transmissible Disease
16 Standard, Zoonotic, from 2009, we've had guidance
17 documents on that for years.

18 They're very thorough, so there should be -- I
19 mean, we have to do a better job of getting the guidance
20 documents into people's hands, but I have met with -- you
21 know, I'm meeting with every single local health
22 department where I've explained this this regulation and
23 its requirement for all the dairy dairy farms and much more
24 stringent requirements once they have any infected cows.
25 But it does require quite in-depth training, you know,

1 complete PPE like coveralls, gloves, goggles, respiratory
2 protection. It requires medical surveillance.

3 It's a very robust, protective standard. So I
4 think enforcement of that standard -- and understanding
5 that employers -- Consultation's been doing a lot of
6 outreaches as well, you know, with the Department of
7 Agriculture and the Health Department, trying to reach
8 out to dairies. But consultations taking more of a lead
9 trying to get the word out before before we enforce it. So
10 they've been doing most of the work for now, trying to
11 get all the dairy owners aware of it and hopefully they
12 do the right thing and comply.

13 CHAIR ALIOTO: All right. Thank you, Mr. Berg.

14 Any other comments from the Board? Anything at
15 all?

16 I had intended to go into closed session, but I
17 understand that we need to leave here by 5:00. Am I
18 right? That means that I literally have no time to do
19 that. Autumn, I'm sorry if you prepared. We'll do it
20 We'll have to do it in January. All right?

21 That means that this long but very valuable
22 meeting is coming to an end. So the next Standard Board
23 regular meeting is scheduled for January 16th. It's
24 going to be in Sacramento, California, and it will be via
25 teleconference and videoconference. Please visit our

1 website. Join our mailing list to receive the latest
2 updates. I want to thank you, all of you, for your
3 attendance, especially those who stayed until the very
4 end.

5 And there being no further business to attend
6 to, this meeting is adjourned.

7 (Proceedings adjourned at 4:58 p.m.)
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1 REPORTER'S CERTIFICATION

2
3 I, the undersigned, a Certified Shorthand
4 Reporter of the State of California, do hereby certify:

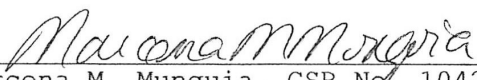
5 That the foregoing proceedings were taken before
6 me at the time and place herein set forth; that any
7 witnesses in the foregoing proceedings, prior to
8 testifying, were duly sworn; that a record of the
9 proceedings was made by me using machine shorthand, which
10 was thereafter transcribed under my direction; that the
11 foregoing transcript is a true record of the testimony
12 given.

13 Further, that if the foregoing pertains to the
14 original transcript of a deposition in a federal case,
15 before completion of the proceedings, review of the
16 transcript was not requested.

17 I further certify I am neither financially
18 interested in the action nor a relative or employee of any
19 attorney or party to this action.

20 IN WITNESS WHEREOF, I have this date subscribed
21 my name.

22 Dated: January 15, 2025

23 
24 Marcena M. Munguia, CSR No. 10420
25 Certified Shorthand Reporter
For The State Of California