



Lead Rule Advisory Group Meeting Minutes Friday, May 17, 2024, 9-11am, Zoom

Attendees:

Linda Pressnell, Oregon OSHA	Steve Patterson, Clarios	Dave Dreher, Oregon Health Authority
Jennifer Stewart, Oregon OSHA	Angie Marsh, Oregon OSHA	Chris James, Oregon OSHA
Dr. Nicholas Reul, Washington Department of Labor and Industries	Lisa Appel, Oregon OSHA	Tim Icalia, ODOT
Dave McLaughlin, Oregon OSHA	Brian Williams, PGE	Steve Eversmeyer, NW Natural
Tim Icalia, ODOT	Jennifer Ekdahl, Oregon OSHA	Eric Juarez, SAIF
Ryan Barker, Oregon Health Authority	Robert Snyder, ODOT	Brian Hauck, Oregon OSHA
	Jason Dunton, Hoffman Construction	

Linda Pressnell started the meeting at 9:05am.

Linda: The agenda today is really “Old Business” with continued discussion. Last meeting, it was mentioned that we could file at the end of June, following our June RAG meeting. Others are still welcome to join our June meeting. We’re still on this timeline. This is ultimately pending approval by our administration.

-Next on the Agenda: Adoption of these as Oregon Administrative Rules (OAR) is likely

This is more for internal purposes; but it is likely.

Shared on screen: Proposed language that does not change obligation.
Reminder that here we’re looking at the General Industry rule, 29 CFR 1910.1025, which came out in about 1980. Many of these are minor corrections.

Lisa (Oregon OSHA Rules Coordinator): This is consistent with the codebook.

Linda: Minor Corrections, such as here in 29 CFR 1926.62, is actually rulemaking. Federal OSHA finds errors within rules, so we have to go through rulemaking to make these changes, which are typically typos, sometimes clarifications.

-Next on the Agenda: Our proposed language is:

- * Removal from work at BLL of 30 ug/dL(1x) or 20 ug/dL (2x) for both General Industry and Construction

- * Return to work at 15 ug/dL

Comment on screen: Need additional information from PLHCP and/or published reference. Will share anything that's discovered before the next meeting.

Note: Linda is trying to get in touch with a doctor at UW about this.

Robert Snyder: Do we not have anyone at OHSU?

Linda: We did have a physician from OHSU at one of our meetings, Dr. Horowitz, who wasn't quite the right fit.

Robert Snyder: I think we need to hear equally from different positions. I'd like to see some balance in representation.

Linda: I agree—I'd like to see a range. In California, they worked with physicians and toxicologists, so we're looking at their findings. Also, I can reach out anyone the RAG recommends.

Dave M.: There's a large amount of scientific data that shows allowable BLL is too high. It's not agenda-driven, it's science-driven.

Linda: I'm continuing to try to obtain input from healthcare professionals. Federal OSHA is moving toward using the 15 micrograms number.

- * Remove requirement for ZPP test

Oregon Health Authority's investigative guidelines for lead exposure don't recommend this test.

- * Ensure employees have access to hand washing facilities

Linda: In our description of lavatories, they typically have to have: running water, soap, towels/air dryers. As per last month's discussion: remove allowance for using transportation to a nearby washing facility. I've updated the language based on that discussion It now reads:

*Ensure employees have access to hand washing facilities in work areas where employees **may** come into contact with lead. Hand washing facilities must include **hot and cold running water or tepid running water**, hand soap or a similar cleansing agent, and individual hand towels of cloth or paper, or air blowers. Hand washing facilities must be maintained in sanitary condition.*

Questions for the RAG: Any comments about the word “may” in this text? Any comments about water language in this text? (both highlighted here)

Robert Snyder: “May” could be “likely” or “reasonably anticipated exposure.” And I’d like the water language to just be “tepid.”

Linda: We’re looking for a temperature that’s not ice-cold. I’d like to stay away from the word “exposure”—I went with “come into contact” language because it relates to touching something.

Robert Snyder: Any new training requirement should cover inhalation and skin.

* Construction Standard.

Linda: Specify language to reflect what’s in the General Industry rule, adding:

(4)(iii)Where showers are not provided the employer shall assure that employees wash their hands and face at the end of the work shift.

Chris James: Make sure showering remains required for a lead abatement project.

Linda: I’m not proposing change to an original rule, just clarifying in this one.

Linda: With no further comments, I’m going to go ahead and update this language.

* Standard 1910.1025

This is proposed language with no change to obligation; replace with employee information and training from 1926.62, starts with Hazard Communication, then Training program

Linda: This just switches the order to put Haz Com logically before Training (with Appendix A and B).

-proposed language specifying Haz Com

-An example of this is electrical soldering, where there may be lead in the work environment.

*The employer shall include lead in the program established to comply with the Hazard Communication Standard (HCS)(1910.1200). The employer shall ensure that each employee who may come into **contact** with lead has access.*

Linda: I’ve used the word “contact” again—does it seem reasonable here?

Chris James: What about “exposure”?

Linda: Exposure could be many different routes, which may not be clear to employers.

Chris: As long as “contact” is synonymous with “exposure,” I’m good with it.

Robert Snyder: Spelling it out is always better. Include inhalation and ingestion of lead?
This would clarify. Dave M. agrees.

Linda: Yes, this could address comments from prior meetings about those who work with lead parts, such as computers.

Next on Agenda: Potential Economic Impacts from proposed changes

These include:

- Reduce BLL for removal from work and return to work
- Removal of ZPP testing
- Hand hygiene
- Training

Linda: Think about: cost per employee; cost for your industry; cost for materials/equipment/supplies to meet hand hygiene requirements; cost of further hiring (labor) for training.

Linda: I originally thought there were forms to send to you to figure out cost, but those forms are actually for me to tally. The questions for me to answer are:

What kind of financial impacts could result, related to the following:

- Reporting, recordkeeping, or other admin activities required for compliance
- Cost of equipment, supplies, labor and administration required for compliance
- Other costs not otherwise accounted for, such as outside service providers, consultants, medical, etc.

Robert: Add: IH sampling, lap analysis, reports, travel, increase in Workers Comp for additional medical treatment

Jennifer Ekdahl, OSHA: I’m working with an employer who’s having trouble getting a BLL lowered. They’re having to hire temps to cover the work.

I’d like to see more studies that have been done before we adopt this.

Linda: Resources/references can be found on our website, bottom of this page:

<https://osha.oregon.gov/rules/advisory/leadPEL/Pages/default.aspx>

Sometimes it’s exposure in people’s personal lives, such as remodeling an old house and increasing their lead exposure.

Robert Snyder: We had an employee working on a bridge project whose BLL was high—there was follow-up with the employee, and we found out they shoot firearms at an older indoor range. So the situation is both recreational and work exposure. How do we separate employment protection in a case like this? It gets to be a debacle.

Chris James: Reporting level to OHA is 5, correct?

Linda: At one time it was 10; then it was 5; it may be 3.5 now. I'm talking about the ABLL (Adult Blood Lead Levels).

Dave Dreher, OHA: Any BLL is supposed to be reported to us, regardless of age. OSHA gets reports of these employees. There's a separate form for anyone above 5. Sometimes we find out from electronic lab reporting.

I send data to Oregon OSHA of those with employers, who are at 5 or higher.

Chris James: High exposures are in bridge blasting, but aren't represented by anyone participating in this RAG.

Jennifer E.: I have a consultation scheduled with a bridge company next week and will invite them to join us.

Dave D.: I have contacts in this bridge work we're talking about that I can forward to Linda.

Robert: Our project inspectors (at ODOT) go into containment areas to verify quality compliance with contracts. This includes medical surveillance. We routinely ask about hobbies, and this is when we've heard about firearms.

Dave D.: I can pull a percentage of people in bridge abatement and their levels, and share with Linda. They can help us quantify the number exposed in this field.

Linda: We did go through the ABLES report from OHA early in this process. I recall a few from construction, and some from general industry/shooting ranges.

Next: Hand washing units

We'd talked before about portable hand washing units and hand sanitizer. I have a PDF of "Waterless Hand Sanitizer Use in Agriculture –our memo about Requirements (shared onscreen). The rationale for requiring soap and water was exposure to chemical residues, pathogenic organisms, and embedded dirt.

Next: Lead in soil

Linda: This had been brought up in past meetings.

Robert: In Washington state's draft, they'd specifically called out lead in soil. In Oregon, we've tested soil and found lead. How much sampling will we have to do due to changes in this rule? Their exposure is low—if at all.

Chris: I'd say you've done your due diligence if you've already sampled and BLL is low. Variances may come into play.

Linda: We're not touching the PEL, so not reducing it. Removal from work level is 30. The 15 is for the return to work. So 30 mg/dL is the threshold. We're trying to get everyone exposed to wash their hands. We're broadening the requirements in some ways to get protection.

Also, Washington state is not currently active in their lead rulemaking due to their staff vacancies, so their draft from years past may change.

{No further comments or questions}

Linda: More participants are welcome to join these meetings. I will look for more health professionals to join us. Contact me for invites.

Once we move into rulemaking, we'll file and then have public comment.

Also, I appreciate that we're able to have conversations in a professional and productive manner in this RAG.

Meeting adjourned at 10:53am. Next Zoom meeting: Friday, June 21, 9-11am