

## New Logo & New Name ...

*BUT OUR CONTINUED ATTENTION TO GREAT SERVICE  
AND BUILDING LASTING RELATIONSHIPS IS THE SAME*

With the passing of our founder, it has become necessary to make a few technical adjustments. Over the next few months **MJS Safety LLC** will be transitioning to a new company name –

### **MJS Legacy Safety Consulting Services LLC**

All of the services provided to you through **MJS Safety LLC** will remain the same and be available to you through **MJS Legacy Safety Consulting Services LLC** with no interruption. We are committed to carrying on the legacy that Mike envisioned for both the company and our clients, and will continue to make ‘*caring for our client’s needs*’ our top priority.

*The contact information for both Carrie Jordan and Jeremy Jordan will remain the same.*

*Please note a new shipping address: 1026 N. 1<sup>st</sup> Street, Johnstown CO 80534.*

*There is no change to the mailing address: P.O. Box 10, Johnstown CO 80534.*

*Our training facility and offices will not change: 1760 BROAD ST, UNIT H, MILLIKEN, CO 80543.*

It has been our distinct pleasure to serve your business needs for the past 26 years under **MJS Safety**. We look forward to continuing a productive and successful business relationship with you under the **MJS Legacy Safety** brand for many years to come.

[carriejordan@mjssafety.com](mailto:carriejordan@mjssafety.com) — [jeremyjordan@mjssafety.net](mailto:jeremyjordan@mjssafety.net)

Continuing to feel ‘COVID weary’? It’s a topic we still need to think about often, staying informed about restrictions, being safe for our co-workers, our friends and our families. Until we can move on from thinking daily about COVID-19, we’ll do our best to provide you with as much helpful information as possible.

Here are Resource links that will provide the most current information and guidance for your workplace.

- [CDC – Centers for Disease Control](#) – Important info re: **COVID-19 vaccine**
- [CDPHE – Colorado Department of Public Health and Environment](#)
- [WHO - World Health Organization](#)
- [OSHA Guidance](#)
- [DOL Resources](#)
- [Covid19.colorado.gov](https://www.covid19.colorado.gov)

### COVID-19 Resource - Filing Whistleblower Complaints Related to COVID-19

OSHA’s [new fact sheet](#) explains how workers can protect their right to raise workplace health and safety concerns relating to COVID-19 without fear of retaliation.



▶ [Training Summary/Class Schedule](#) • [TRAINING CENTER - 1760 BROAD ST, UNIT H, MILLIKEN, CO 80543](#) • [read more...](#)

→ **Distance Learning & Video Conference classes:** *We are excited to announce that PEC will be allowing us to temporarily offer Safeland and the PEC H2S Clear courses via video conferencing until June 2022. We are also able to offer the 1<sup>st</sup> aid/ CPR classes with an online blended learning option, and remote skills verification – as well as our In-House H2S Awareness Course. Ask about other distance learning opportunities for more information.*

→ **Video Conference Courses Must Be Scheduled Separately and Are Available Upon Request.**

## OSHA / CONSTRUCTION NEWS SUMMARY

▶ [Visit OSHA's COVID-19 Frequently Asked Questions page...](#) [read more...](#)

### ▶ **OSHA's Recordkeeping Requirements During the COVID-19 Pandemic**

OSHA has issued temporary enforcement guidance related to the COVID-19 pandemic for [Recording and Reporting Occupational Injuries and Illnesses](#) required under *29 CFR Part 1904*. [read more...](#)

### ▶ **Drug Testing**

More and more of the 3<sup>rd</sup> Party Auditing companies like NCMS and TPS Alert are requiring drug testing levels slightly above the levels of some of the regulatory levels to ensure drug testing is being completed each quarter. [read more...](#)



### ▶ **Buildings Suffering from Under Ventilation, Toxic Hazards Need Help**

The impetus of the pandemic and the risks associated with where we spend most of our time, will hopefully lead to changes throughout the building industry that will reshape the world beyond COVID. [read more...](#)

### ▶ **Was That Incident Recordable ... or Just First Aid?**

Many EHS professionals wonder whether they are in proper compliance... [read more...](#)

### ▶ **important reminder... Injury Reporting**

US DOL reminds specific employers to submit required 2021 injury, illness data by March 2, 2022 [read more...](#)



### ▶ **Save the Date: National Safety Stand-Down to Prevent Falls — May 2-6.**

Fatalities caused by falls from elevation continue to be a leading cause of death for construction employees, accounting for 351 of the 1,008 construction fatalities recorded in 2020 (*BLS data*). [read more...](#)

### ▶ **OSHA Penalties Increase**

On Jan. 16, OSHA civil penalties increased based on 2022 cost-of-living adjustments. [read more...](#)

### ▶ **All About Welder's Flash or Arc Eye**

A flash burn is a painful inflammation of the cornea... [read more...](#)



### ▶ **Work Zone Safety Awareness**



April 11-15 is [National Work Zone Awareness Week](#) and the [National Stand-Down to Prevent Struck-by Incidents](#). [read more...](#)

### ▶ **Dangers of Overexposure to Ultraviolet, Infrared and High-energy Visible Light**

Exposure hazards to eyes/face associated with specific non-ionizing electromagnetic radiation (EMR) [read more...](#)

### ▶ **Women in Construction Week – March 6-12, 2022**

Women in Construction Week traces the history of women in construction... [read more...](#)



### ▶ **Women In Construction Educational and Empowerment Panel Discussion**

**About this event...** Virtual Event - Wednesday, March 9, 2022, 12:00 PM – 1:30PM EST [read more...](#)

## AGRICULTURAL SAFETY NEWS SUMMARY

### ▶ Welcome To *Stand Up 4 Grain Safety Week*

Join grain safety experts as they share solutions to storage and handling during this year's Stand Up 4 Grain Safety virtual event April 4-8. [read more...](#)

## TRANSPORTATION NEWS SUMMARY

▶ **Reminder** - Revised Federal Drug Testing Custody and Control Form Mandatory... [read more...](#)

### ▶ **FMCSA's Drug Clearinghouse Shows Violations Up By 10% Last Year**

The majority of violations stemmed from positive drug tests [read more...](#)



### ▶ **Proposed UCR Fees to be Reduced for 2023**

**FMCSA** released a Notice of Proposed Rulemaking in the Federal Register (1/24/22) outlining a proposed reduction in Uniform Carrier Registration Plan & Agreement (UCR) fees. [read more...](#)

### ▶ **Veteran Trucking Jobs**

Our nation's veterans are excellent candidates to help address our stressed transportation industry... [read more...](#)



### ▶ **Legislation Introduced to Exempt Canadian, Mexican Drivers from Border Vax Mandate**

*Senator intros TRUCKERS Act to exempt foreign drivers from border vax mandate* [read more...](#)

### ▶ **Truck Operators Are Frustrated, and for Good Reason**

There have been [rumblings](#) about a truck convoy similar to that in Canada traveling across the U.S. [read more...](#)

### ▶ **DOT Publishes Notice of Proposed Rule Making – Oral Fluid Testing and more...**

Published (Feb 28, 2022) in the *Federal Register* is a DOT Notice of Proposed Rulemaking (NPRM). [read more...](#)



▶ **MINE FATALITY** – On September 14, 2021, an individual was fatally injured when an excavated trench collapsed and engulfed him.

**Best Practices...** [read more...](#)

### ▶ **Take Time, Save Lives**

Top priority at **MSHA** is keeping miners safe. We have seen an increase in fatalities and injuries... [read more...](#)

## MSHA NEWS SUMMARY



## MONTHLY SAFETY & HEALTH TIP NEWS SUMMARY

### ▶ **10 Workplace Safety Tips Every Employee Should Know**



Whether you work outside, at a desk or with heavy machinery, there are hazards... [read more...](#)

## **MJS Legacy Safety OFFERS DRUG & ALCOHOL TESTING**

**to comply with DOT/FMCSA, PHMSA & Non-DOT requirements.**

*We offer an in-house drug testing consortium pool with customer service that cannot be beat.*

We also provide assistance with 3<sup>rd</sup> party Drug Testing Compliance Auditing through NCMS, TPS Alert & Veriforce, as well as DISA account management.

“Training Spotlight”

(a different course will be featured monthly)

HANDS-ON FIRE EXTINGUISHER TRAINING

This course covers the basics of fire safety as well as hands-on practice with our Bullex Fire Extinguisher training system. This course is not just for the workplace - it is great for anyone who needs to learn how to use a fire extinguisher, including church groups, Boy and Girl Scouts, 4-H clubs, schools, and community members.

For all of our Course Offerings visit the MJS Legacy Safety website

Schedule of classes March 2022: • TRAINING CENTER - 1760 BROAD ST, UNIT H, MILLIKEN, CO 80543

- \*PEC Safeland Basic Orientation: NEW 2021 SAFELAND: Mar 10, 22; 8 – 4:30; This class available through video conference instructor led distance learning thru 6/30/22 - only upon request
• \*First Aid/CPR/AED/BLOODBORNE PATHOGENS (We offer MEDIC FIRST AID): In Person Classes: Mar 11, 23; 8 – noon; This class is also available for blended learning (online) with remote or in-person skills assessment
• \*Hydrogen Sulfide Awareness [ANSI Z390 -2017 Course]: Mar 11, 23; 12:30 – 4:30; This class available via Instructor Led video conference
• \*Fall Protection Training (4 hour Awareness and 8 hour Competent Person available): Mar 16, 28;
• \*Confined Space Entry Training Attendant, Supervisor, Competent Person & Entrant [NUCA Course]: Mar 17, 29;
• \*Confined Space Rescuer - 2 day course: Mar 18, 30; (Students must complete the Confined Space course to be eligible for the 2nd day Rescue Course)
• \*PEC Core Compliance – 3 day course: Feb 24, Mar 7 & 8;
• \*MEDIC 1ST AID Instructor Development Course: Mar 3;

[ For any last minute schedule updates, go to www.mjslegacysafety.com ]

▶ NEED ANY OF THESE CLASSES IN SPANISH? CONTACT carriejordan@mjsafety.com TO SCHEDULE TODAY ◀

To sign up for one of these classes, or inquire about scheduling a different class Call Carrie at 720-203-4948 or Jeremy at 720-203-6325

▶ MJS Legacy Safety also offers custom classes to fit the needs of your company ◀

— FEATURED TRAINING PROGRAMS —

- Safeland Basic Orientation • Hydrogen Sulfide Awareness • First Aid/CPR
• OSHA 10 Hour for General Industry or Construction • Confined Space for Construction
• Competent Person for Excavations • HAZWOPER 8, 24 & 40 hr Courses

Unable to attend a class?

MJS Legacy Safety offers multiple “ONLINE TRAINING COURSES”

including

OSHA Construction, General Industry, Environmental, Hazardous Waste Public Safety, DOT, Human Resource, and Storm Water & ISO

or you can

Need Help With

- ISNetworld
■ PEC/Veriforce
■ NCMS
■ Avetta/BROWZ
■ TPS ALERT

CALL US!!!

Schedule training at our Training Center in Milliken...or On-Site at your facility

SOURCES FOR THIS ISSUE INCLUDE:

- OSHA
FMCSA
ISHN
US DOL
MSHA
CDOT
USDOT
EHS Daily Advisor
indeed
Rock Products
CHE
Trucker News
Daily Report
ASHRAE
Harvard Business Review
standupforgrains
afety.org
National Today
ATSSA
CPWR
NWZAW
ATA
Overdrive
CMCA



## OSHA / CONSTRUCTION

► MJS Legacy Safety can help guide you through training requirements. Call us! ◀

Visit OSHA's [COVID-19 Frequently Asked Questions](#) page for current information

### OSHA's Recordkeeping Requirements During the COVID-19 Pandemic

OSHA issued enforcement guidance related to the COVID-19 pandemic for [Recording and Reporting Occupational Injuries and Illnesses](#) required under *29 CFR Part 1904*.

For more information see the [Enforcement Memoranda](#) section of OSHA's [COVID-19 Safety and Health Topics](#) page.

## Drug Testing

More and more of the 3<sup>rd</sup> Party Auditing companies like NCMS and TPS Alert are requiring drug testing levels slightly above the levels of some of the regulatory levels to ensure drug testing is being completed each quarter.



MJS Legacy Safety Service conducts both drug testing and Auditing account management for our in-house consortium clients as well as the management of other client drug testing consortium accounts, such as DISA. Many have modified their random selections process to work more effectively when a policy is tied to multiple auditing agencies. In specific situations, this may result in slightly more random selections being generated than clients are previously used to seeing to ensure compliance with both the regulatory requirements as well as client specific requirements.

Drug testing policies typically mirror the requirements of an auditing agency (e.g. DOT, DCC, DISA Monitoring, NCMS, etc.). When customers setup a single policy for more than one monitoring agency, and these auditing agencies require different random percentages, the number of random selections generated may be lower than one of the two agencies requires.

**If you have questions on the selection process,  
need assistance with the management of your TPS Alert, NCM, or  
other drug testing audit accounts,  
or need to sign up for a consortium, give us a call!**

# Buildings Suffering from Under Ventilation, Toxic Hazards Need Help

In 1969 the Cuyahoga River in Ohio [caught fire](#). This would have been a **big news story** at the time, had it not been for the fact that the river had **caught fire numerous times** in the past, in fact **13 times since 1868**. However, what was notable in 1969 was that this time the fire, **on an oil slick**, was near the city of Cleveland and **subsequently influenced** how quickly the country adopted the **Clean Water Act** in 1972.

In 1973, [ASHRAE Standard 62](#) reduced **required ventilation** from **10 cubic feet per minute (4.7 L/s) per person** to 5 cubic feet per minute (2.4 L/s) per person. This action was found to be a **contributing factor** to "[sick-building syndrome](#)," with building regulations **getting tightened** and ventilation rates being **decreased to save energy**. The policy was well intended, but today we are still dealing with a **legacy of under ventilation** and other **significant issues** inside of buildings that impact our health.

In the case of **sick-building syndrome**, many of the issues identified were related to **mold being associated** with **legionnaire's disease**, spores causing breathing issues and **other nasty illnesses becoming a risk**. At that time, we did not yet fully **understand the effects** of **VOCs** (*Volatile organic compounds*) off-gassing in a space, nor had **asbestos yet been identified** as a **major building issue**.

## Change is slow

In the first days of the **green building movement** (*back in the early 2000s*), it was **very difficult** to get people to agree that **initiatives like flame retardants** could be doing more harm than good (*through off-gassing*). Equally, **attempting to remove VOCs and formaldehyde from products** was something worth doing. Those **early versions of LEED** (*Leadership in Energy and Environmental Design*) got a **great deal of push back** but now **EPDs** (*environmental product declarations*), **MSDS** (*material safety data sheets*), and things like the **chemicals of concern repository** from [Pharos](#) are becoming **more and more mainstream** in the building industry.

All the effort to **remove toxic items from materials**, water and **our lives is considerable**, but we haven't yet turned our attention to our **indoor environments** and taken the same kinds of action evidenced by many studies and **through real-time monitoring**.

It's very hard to **completely keep our particulate matter** from buildings for example. It's difficult because **particulate matter** is not just **one type of contaminant**. It's a group of many different contaminants that are **suspended in the air**. Some are visible, **like smoke or smog**, but others are smaller and invisible, like soot



or ash. **Pollen also falls** into this category. High levels of **PM1, PM2.5 and PM10** (*dust and other indoor pollution*) in indoor spaces **can trigger asthma** or allergies and **aggravate coronary or respiratory issues**. Keeping them out with **building filtration systems** requires **more maintenance and filter changing** than is **commonly happening** in buildings.

## Indoor air quality should be a priority

As an industry, we **don't yet have a handle on VOCs**. We've seen spaces where material **selection for low VOC** was very **well done yet high levels** still exist (*correlated to CO2 levels, so it's very likely being brought in by people*). High levels of **VOCs in indoor spaces** can reduce **cognitive function** and are a health risk. For a healthier and safer building, **getting VOCs as low as possible** is now a priority.

Even **CO2 can be an issue in building**. High levels of CO2 in **indoor spaces** can [reduce cognitive function](#) and are also a health risk. For a **healthier and safer building**, you monitor your indoor air quality in **real-time**, **set alerts to identify risks**, and optimize your system to **save energy through software**.

While **COVID is on everyone's minds** these days, we shouldn't forget that this **virus is not the only concern** with regards to **indoor air quality**. That said, creating **viral indexes based on data** such as relative humidity and temperature which affects virus survival rates, **CO2 which can detect the likely amount of virus** in the air, and particulate matter (*transmissibility*), are now **available through sensor manufacturers**. Of course, the work is still **ongoing to make this fully optimal**, but let's remember that **improved IAQ** (*indoor air quality*) doesn't only **lead to reduced virus risk**, but also to reduced chemical risks.

Risks aside, the **upside of improving indoor air quality** (*we spend 90% of our time indoors*) will **mean better sleep**, thinking more clearly, and **just generally feeling better** - less lethargic with **greater energy**. While water quality regulation became a priority within **3 years after the Cuyahoga River incident**, we should remember that **we drink 6 liters of water a day** but **breathe 8 liters of air every minute**. Makes you think, doesn't it?

The **impetus of the pandemic** and the risks associated with where we **spend most of our time**, will hopefully lead to **changes throughout the building industry** that will reshape the **world beyond COVID**.

## Was That Incident Recordable ... or Just First Aid?

Many EHS professionals wonder whether they are in proper compliance with all of the recordkeeping requirements issued by the Occupational Safety and Health Administration (OSHA). One question they often have, especially in the immediate aftermath of an incident in the workplace, is if the occurrence was a recordable injury (i.e., one that must be included on OSHA 300 forms) or merely required the application of first aid.



The difference is important! One of the biggest recordkeeping mistakes a safety professional can make is misclassifying a first aid case as a recordable injury or illness. However, it is a mistake that is easily avoided — OSHA provides a great deal of guidance on the distinction between the two types of incidents.

Here are some of their tips.

### Consult the Lists

The OSHA [recordkeeping regulation](#) (29 CFR 1904) covers a great many things, including which employers are covered by the regulation and which are exempt; the various forms on which records must be kept; how to report fatalities and serious injuries and illnesses to the government; and details regarding the electronic submission of OSHA 300A data. It also includes the criteria for determining what is medical treatment (a key term in establishing that an injury is recordable) and what is first aid.

In a [helpful summary](#) of injury and illness recordkeeping and reporting requirements, OSHA includes its definitions of recordable cases vs. first aid.

#### OSHA defines a recordable injury or illness as:

- Any work-related fatality (this must be reported to OSHA or its state counterpart within 8 hours).
- Any work-related injury or illness that results in loss of consciousness, days away from work, restricted work, or transfer to another job.
- Any work-related injury or illness requiring medical treatment beyond first aid. Note that employers must report any amputation, loss of an eye, or inpatient hospitalization of a worker to OSHA or its state counterpart within 24 hours.
- Any work-related diagnosis of a significant injury or illness by a healthcare professional, such as cancer, chronic irreversible diseases, fractured or cracked bones or teeth, and punctured eardrums.
- There are also special recording criteria for work-related cases involving:
  - Needlesticks and sharps injuries;
  - Medical removal;
  - Hearing loss; and
  - Tuberculosis.

You'll notice in the third bullet above that a recordable case is one that requires medical treatment beyond first aid. So, what's considered first aid? Fortunately, OSHA has a clearly defined list for this as well.

#### OSHA defines first aid as:

- Using a non-prescription medication at nonprescription strength (but be careful; for medications available in both prescription and non-prescription form, a recommendation by a physician or other licensed health care professional to use a non-prescription medication at prescription strength is considered medical treatment for recordkeeping purposes);
- Administering tetanus immunizations (other immunizations, however, such as Hepatitis B vaccine or rabies vaccine, are considered medical treatment);
- Cleaning, flushing or soaking wounds on the surface of the skin;
- Using wound coverings such as bandages, Band-Aids™, gauze pads, etc.; or using butterfly bandages or Steri-Strips™ (but note that wound closing devices such as sutures, staples, etc., are considered medical treatment);
- Using hot or cold therapy;
- Using any non-rigid means of support, such as elastic bandages, wraps, non-rigid back belts, etc. (however, devices with rigid stays or other systems designed to immobilize parts of the body are considered medical treatment for recordkeeping purposes);
- Using temporary immobilization devices while transporting an accident victim (e.g., splints, slings, neck collars, back boards, etc.);
- Drilling of a fingernail or toenail to relieve pressure, or draining fluid from a blister;
- Using eye patches;

- Removing foreign bodies from the eye using only irrigation or a cotton swab;
- Removing splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs, or other simple means;
- Using finger guards;
- Using massages (do note, however, that physical therapy or chiropractic treatment are considered medical treatment for recordkeeping purposes); or
- Drinking fluids for relief of heat stress.

Simply put, if the injury or illness is treated **only with items** on the above list and **does not result** in days away from work, **work restrictions**, or another **recordable outcome**, **Do Not** include it as a recordable incident on your **OSHA 300 log**.

One **common misconception** regarding the **distinction between first aid and medical treatment** is that **who** administers the **treatment** or **where** it occurs **makes a difference** for **recordability**. **That's False**. The **determining factor** is the **actual treatment that was given**. The items on the **above list** are **first aid** regardless of whether they're administered in the workplace by a coworker or in the ER by a doctor.

### Don't Report First Aid Cases 'Just in Case'

Some EHS managers reading this may think to themselves, "Well, I'm going to put any incident that happens in the workplace — including these first aid cases — on my OSHA 300 log anyway. You know, just in case!"

Think again! It is a **dangerous recordkeeping misconception** to believe that you are going "**beyond compliance**" by recording your incidents that **only require first aid**. Minor injuries are **exempt from recording**, and your organization could actually be **cited by OSHA** should you **decide to record** them anyway. **Most likely**, you would be cited with a **de minimis** violation (*that is, a technical violation of OSHA rules that has no direct impact on health or safety*) with **no financial penalty**. However, **keep in mind** that if you **record all your first aid cases**, it will **artificially inflate** your total number of **recordable cases** on the **300A form** — and, for **employers required** to submit this information electronically, **OSHA** uses this data to **target its enforcement** efforts. Recording cases that **aren't recordable** may lead to an **increased risk of inspection for your workplace**, and if **hazards** are uncovered **during an inspection**, costly citations can ensue. A **single willful or repeat violation** can now **cost employers** up to **\$145,027**; other violation **categories** can carry fines up to **\$14,502**.

Employers can **certainly choose** to track **first aid cases** for their **own internal purposes**, and many do — in fact, **it can help** you identify your **organization's unique hazards** and prevent **more serious incidents** in the future. But these **cases don't belong** on your **OSHA 300 log**.

### Proper Recordkeeping Helps Protect Workers Nationwide

Incident and **accident management**, especially **injury and illness recordkeeping**, can feel like a **chore** — but it is **nevertheless** a very **important aspect of safety** management. **Recordkeeping information** allows **OSHA** to better **evaluate the safety** of workplaces across the country and **helps employers** and workers **better identify workplace hazards** and **implement protective measures**. This opportunity to **prevent future injuries** and illnesses in the **workplace** makes **proper data collection** and reporting **vital to the health** of the **workforce**. While differentiating between **medical treatment** and **first aid** may seem **trivial**, it serves a **purpose in painting** a clearer picture of the **hazards** and risks **facing workers across** industries and **job types**.

#### *important reminder* Injury Reporting



*US Department of Labor reminds specific employers to submit required 2021 injury, illness data by March 2, 2022*

The U.S. Department of Labor's Occupational Safety and Health Administration reminds employers that the agency began collecting calendar year 2021 Form 300A data on Jan. 2, 2022. Employers must submit the form electronically by March 2, 2022.

Electronic submissions are required by establishments with 250 or more employees currently required to keep OSHA injury and illness records, and establishments with 20-249 employees classified in [specific industries](#) with historically high rates of occupational injuries and illnesses.

Visit the [Injury Tracking Application Electronic Submission of Injury and Illness Records to OSHA](#) for more information and a link to the Injury Tracking Application.

[Spanish version](#) available.

## OSHA Penalties Increase

On Jan. 16, **OSHA** civil penalties increased based on 2022 cost-of-living adjustments.

Below are the maximum penalty amounts, with the annual adjustment for inflation, that may be assessed after Jan. 15, 2022. (See [OSHA Memo, Jan 13, 2022](#)).

### 2022 Penalty Adjustments

<u>Type of Violation</u>	<u>Penalty</u>
--------------------------	----------------

*Serious*

*Other-Than-Serious*

Posting Requirements *\$14,502 per violation*

Failure to Abate *\$14,502 per day beyond the abatement date*

Willful or Repeated *\$145,027 per violation*

### State Plan States

States that operate their own [Occupational Safety and Health Plans](#) are required to adopt maximum penalty levels that are at least as effective as **Federal OSHA's**.

### For More Assistance

**OSHA** offers a variety of options for employers looking for compliance assistance.

The [On-Site Consultation Program](#) provides professional, high-quality, individualized assistance to small businesses at no cost.

**OSHA** also has compliance assistance specialists in most of our 85 Area Offices across the nation who provide robust outreach and education programs for employers and workers.

For more information, please contact the [Regional or Area Office](#) nearest you.

**LET MJS Legacy Safety**

**BE YOUR ONE STOP SHOP  
FOR TRAINING.**

**See page 4 for classes  
offered this month  
as well as links to  
all of the training  
available.**

**Questions?**

**CALL US!!**

**WE'RE HERE TO HELP!**

*just a reminder...*

## Save the Date: This year's annual National Safety Stand-Down to Prevent Falls will be held May 2-6.

Fatalities caused by falls from elevation continue to be a leading cause of death for construction employees, accounting for 351 of the 1,008 construction fatalities recorded in 2020 (*BLS data*).

**Those deaths were preventable.**

The **National Safety Stand-Down** raises fall hazard awareness across the country in an effort to stop fall fatalities and injuries.

Visit the [campaign webpage](#) for updates. More information to follow in next month's newsletter.

Join the  
National Safety  
**Stand-Down**  
To Prevent Falls in Construction  
MAY 2-6, 2022

# All About Welder's Flash or Arc Eye



A flash burn is a **painful inflammation** of the **cornea**, which is the **clear tissue** that **covers the front** of the eye. A **flash burn occurs** when you are **exposed** to bright **ultraviolet (UV) light**. It can be **caused** by all types of **UV light**, but **welding torches** are the **most common** source. That's why

it is **sometimes called** '**welder's flash**' or '**arc eye**.'

Flash burns are **like sunburn** in the eye and **can affect both** your eyes. Your **cornea can repair** itself in **one to two days**, and usually **heals without** leaving a scar. However, **if the flash burn is not treated**, an infection **may start**. This can be **serious** and may **lead to some loss** of vision.

## Symptoms of flash burn

The symptoms include:

- *pain that may be mild to very severe, usually starting a few hours after the incident*
- *bloodshot eyes*
- *light sensitivity*
- *watery eyes*
- *blurred vision*
- *the feeling of having something in your eye.*

## Causes of flash burn

You can receive a flash burn after being exposed to UV light. Sources include:

- *welding torch*
- *direct sunlight*
- *reflection of the sun off water or snow*
- *sunlamp in a tanning salon*
- *some types of lamps, such as halogen or a photographer's flood lamp.*

## Diagnosis of flash burn

Diagnosis requires an eye examination, which may include:

- **Anaesthetic drops** – *the doctor may use eye drops to numb your eyes. These drops work long enough to examine your eyes and should not be used more than a few times.*
- **Inspection** – *the eyes are checked for damage.*
- **Dye** – *the doctor may put orange dye in your eyes. This shows up any damage when a special blue light is used. The dye is harmless and washes out with your tears.*

## Treatment for flash burn

Treatment for flash burns may include:

- **Dilating drops** – *these are sometimes used to relax the eye muscles, which in turn eases pain and allows your eyes to rest and heal. Your pupils (the black part of the eye) will look bigger than normal. This effect lasts several hours to a few days.*

- **Dressing** – *your eyes may be covered with a padded dressing to rest them and allow them to heal. Do not drive with an eye patch on.*
- **Antibiotics** – *you may be advised to use antibiotic drops or ointment at home to stop infection. Follow your doctor's advice as to how often to use the prescribed eye drops or ointment. You may also be given a mild steroid-based anti-inflammatory drop.*
- **Review** – *you will be reviewed in 24 to 48 hours to make sure that your eyes are healing. Some problems, such as infection, don't show up right away. If there are any serious problems, you will be sent to an ophthalmologist (specialist eye doctor)*

▪ **Eye drops and ointments for flash burn**

**General suggestions for using eye drops and ointments include:**

- *Wash your hands before touching your eyes.*
- *Rest your finger on your cheek and pull down the lower eyelid.*
- *Tilt your head back and drop the liquid in behind your lower eyelid.*
- *For ointment, smear a small amount along the inside of the lower eyelid. Make sure that the nozzle doesn't touch the eye.*
- *You need to continue with the treatment until your eyes have healed.*
- *Keep all drops and ointment in the fridge and out of reach of children.*

## Taking care of yourself at home after a flash burn

Suggestions include:

- *Take pain-relieving medication such as ibuprofen. Check the packet for the right dose. The pain is likely to last about a day.*
- *Don't wear contact lenses until your eyes have healed.*
- *Wear sunglasses if your eyes are sensitive to light.*
- *Use artificial tears or lubricants to help any discomfort in your eyes. You can buy these products over the counter at most pharmacies.*
- *It is important to return for a check-up when your doctor advises.*

## Seek urgent medical help for flash burn

You should see your doctor or go to the nearest hospital emergency department if you have symptoms including:

- *blurred vision that is not due to eye drops or ointment*
- *worsening glare*
- *worsening pain*
- *if you are concerned about your eyes for any reason.*

## Prevention of flash burn

Prevention is best. Suggestions include:

- *Protect the cornea from UV light by wearing coated safety goggles.*
- *Always wear a welder's mask when welding. Make sure the goggles are certified for the application and cover the eyes completely.*
- *Sunglasses should protect against both UVA and UVB radiation. Check the label when buying sunglasses.*

## Where to get help

- *Call 911*
- *Your doctor*
- *Emergency department of your nearest hospital*
- *Ophthalmologist*
- *Pharmacist*
- *Optometrist*

## Things to remember

- *Flash burns are like sunburn in the eye and can affect both your eyes.*
- *A flash burn occurs when you are exposed to bright UV light.*
- *With the right care, your cornea will usually heal itself without leaving a scar.*

## Work Zone Safety Awareness

April 11-15 is [National Work Zone Awareness Week](#) and the [National Stand-Down to Prevent Struck-by Incidents](#).

### Work Zones are a sign to slow down.

With every construction zone comes equipment, workers, and daily changes in the road and alignment you may be traveling. As a result, it's critical you do your part to make the cone zones safe. Lower speed limits, flaggers and police enforcement are used to help keep work zones safe, but motorists still must drive responsibly to keep themselves and our workers safe.

### Here are some work zone facts to put work zone safety into perspective:

- *Eighty-five percent of those killed in work zones are drivers and passengers.*
- *About 600 people die and more than 37,000 people are injured in work zone crashes nationwide.*
- *On average, in a typical five-day work week, seven motorists and one highway worker are killed nationwide.*

## Participate in Work Zone Safety Awareness Week

The **National Work Zone Awareness Week** (NWZAW) has been successful in spreading awareness for work zone safety across the country because of participation from organizations and individuals just like you. Hundreds of companies and individuals reach out to ATSSA on social media each year using #NWZAW.

Everyone plays a role in work zone safety. NWZAW highlights the deadly dangers of inattention at highway work areas. Make plans now for the weeklong commemoration including:

- **Work Zone Safety Training Day** - April 11
- **National kickoff event** - April 12
- **Go Orange Day** - April 13
- **Social media storm** - April 14
- **Moment of Silence** - April 15

The moment of silence is new for 2022 and remembers the people whose lives were lost in a work zone incident. Find other [local events](#) submitted to this [website](#). Learn more on how you can participate and make your voice count on the importance of work zone safety. **#NWZAW #Orange4Safety**



# Dangers of Overexposure to Ultraviolet, Infrared and High-energy Visible Light



This article discusses the exposure hazards to eyes/face associated with specific non-ionizing electromagnetic radiation (EMR) not addressed by OSHA: ultraviolet (UV), infrared (IR) and high-energy visible light (HEV).

## Ultraviolet light

UV is found in sunlight and is a form of EMR with high frequency waves. The biological effects of UV radiation depend on the wavelengths concerned. The non-ionizing UV spectrum has a wavelength shorter than that of visible light but longer than an X-ray (100 nanometers [nm] to 400nm) and is categorized based on intensity: UV-A (315nm to 400nm), UV-B (280nm to 315nm) and UV-C (100 nm to 280nm).

UV-C generally dissipates in the atmosphere and seems to have little damaging effect. However, UV-A and UV-B have damaging effects on exposed soft tissues, such as skin and eyes. Exposure to UV accounts for 90 percent of the symptoms of premature skin aging. Similarly, radiation damage to the cornea can be caused by something as simple as the reflection of sunlight off of water or snow, or something occupationally specific such as a photographer's flood lamp, a welding torch or an UV curing lamp. Cataracts, macular degeneration and photokeratitis (a feeling of sand in the eyes) can all be attributed to overexposure to UV light.

While OSHA does not have a specific standard regarding exposure to UV, several other sources provide exposure limit guidelines. These include: [The National Institute for Occupational Safety and Health \(NIOSH\)](#) and [The American Conference of Governmental Industrial Hygienists \(ACGIH\)](#), who have developed Threshold Limit Values (TLVs) considered by OSHA to be National Consensus. It is important to consult these sources for exposure limits and take preventative measures, such as educating workers and providing appropriate PPE.

Protection against UV may be achieved by a combination of engineering, administrative control measures and personal protective equipment (PPE). Always place emphasis on engineering and administrative controls (such as use of enclosures, screens or filters to contain the UV radiation; training; and limiting employees' access and exposure), thus minimizing the need for PPE. After taking these steps, determine whether further protection for the face, eyes or skin is necessary, and if so, what type of PPE is needed. ANSI/ISEA Z87.1-2010 (the "[Standard](#)") provides transmittance requirements for UV filters for personal devices for eye and face protection. A common misconception is that all polycarbonate lenses block UV. This is not the case. If UV filtration claims are made by a manufacturer, applicable UV filtration markings must be placed on the product.

## Infrared

IR is found in many industrial settings including steel mills, textiles, paper and glass manufacturing, or where lasers, arc lamps or electric radiant heaters are used. IR waves are located between microwaves and visible light on the EMR spectrum. IR has a range of wavelengths, with "near infrared" being the closest in wavelength to visible light, and "far infrared" closer to the microwave region. Near infrared waves are short and not hot — in fact you cannot even feel them — which is what makes them particularly dangerous to susceptible tissues, such as skin and eyes.

Skin exposed to IR provides a warning mechanism against thermal effect in the form of pain. Eyes, on the other hand, may not. Since the eye cannot detect IR, blinking or closing the eyes to help prevent or reduce damage may not happen. IR, particularly IR-A or near IR [700nm-1400nm], raises the internal temperature of the eye, essentially "baking" it. Medical studies indicate that prolonged IR exposure can lead to lens, cornea and retina damage, including cataracts, corneal ulcers and retinal burns, respectively. To help protect against long-term IR exposure, workers can wear products with IR filters or reflective coatings.

The Standard provides requirements for welding and infrared filters, including exact product markings required for specific filtering claims. This makes the selection of appropriate PPE a bit easier for those trained in the use of TLVs, such as an industrial hygienist.

The Standard does not, however, provide requirements for IR reflectance. While the North American market offers reflective-coated products designed for use in elevated temperatures (ET), many times these are mistakenly used only to help prevent worker heat stress. Unfortunately, ET conditions also lend themselves for likely long-term IR exposure. Because there are no Standard requirements for IR reflectance, there is no way within the Standard to substantiate claims that such visors reflect IR. However, the European Standard (EN166, 7.3.3), offers an "R" mark to substantiate claims of "enhanced reflectance in the infrared." An "R" mark on a visor signifies that the mean spectral reflectance of IR between 780nm–2000nm (i.e., the amount reflected from the protector) is >60%. So, it might be wise to check products for EN markings, as well as to request certification/test data for such claims for those products not marked with EN166 "R" marks.

## High energy visible light (HEV)

High energy visible light (HEV) or "Blue Light," as it is known, is visible light with wavelengths in the ~381nm to 500nm (adjacent to UV on the EMR spectrum). HEV is longer than UV, and high illumination levels have been shown to cause irreversible cell damage in some individuals. Extended exposure to HEV may increase the risk of macular degeneration disease where an affected person loses their central vision. Unfortunately, this condition slowly worsens and its damage is usually irreversible.

People are exposed to Blue Light naturally through computers, televisions and cell phones. Industrial uses include lasers and medical diagnostic equipment. A person who needs protection from Blue Light should secure a lens known as a "blue blocker." Blue blockers usually have a base tint of yellow, but they come in darker orange shades as well. Generally, they don't reduce light, but rather, alter the appearance of blue and green colors. Because Blue Light is so close in the spectrum to UV, it is recommended to use blue blockers that offer UV protection as well.

# Women in Construction Week – March 6-12, 2022

Women in Construction Week takes place during the first full week in March every year. It is a time to highlight all the great initiatives and work of women within the industry. Likewise, it is a time that brings to the fore the opportunities that are available to women in construction.



Women in Construction Week traces the history of women in construction, their challenges, and the ways they've been able to overcome them. The holiday is observed to appreciate the women who have taken the bold step to enter the construction industry, and also to encourage those willing to make similar commitments.

Click on this [link](#) to learn about....

- [HISTORY OF WOMEN IN CONSTRUCTION WEEK](#)
- [WOMEN IN CONSTRUCTION WEEK TIMELINE](#)
- [WOMEN IN CONSTRUCTION WEEK FAQs](#)
- [HOW TO OBSERVE WOMEN IN CONSTRUCTION WEEK](#)
- [5 IMPORTANT FACTS ABOUT WOMEN IN CONSTRUCTION](#)
- [WHY WOMEN IN CONSTRUCTION WEEK IS IMPORTANT](#)
- [WOMEN IN CONSTRUCTION WEEK DATES](#)
- [WOMEN IN CONSTRUCTION WEEK RELATED HOLIDAYS](#)

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## Women In Construction Educational and Empowerment Panel Discussion

### About this event

The U.S. Department of Labor's Office of Federal Contract Compliance Programs, Women's Bureau, Wage and Hour Department, and Occupational Safety and Health Administration invite you to an educational and empowerment panel discussion to learn about employment opportunities for Women in the construction industry.

**Wednesday, March 9, 2022**

**12:00 PM – 1:30PM EST**

**Virtual Event**

- *Learn about career opportunities in construction;*
- *Learn how to succeed as a woman in construction and other male dominated/majority male industries;*
- *Receive information on how your job training program can recruit and retain more women;*
- *Get information about apprenticeship programs and opportunities; and Learn about your rights, protections, and the resources available to you.*

For more details and to register, click on this [link](#).

## Welcome To *Stand Up 4 Grain Safety Week*



Join grain safety experts as they share solutions to storage and handling during this year's *Stand Up 4 Grain Safety* virtual event April 4-8.

Because everyone deserves to go home from work each day, we have come together as an industry to take a **Stand for Safety**.

The *National Stand Up for Grain Safety Week* sponsored by the Alliance, a collaboration of agricultural industry groups, provides a collective industry focus on, and commitment to safety.

### Stand Up History & the OSHA Alliance Program

The first *Stand Up for Grain Safety Week* was held in 2017 and began as an initiative between OSHA Region 7, and the Grain Elevator and Processing Society (GEAPS) Great Plains Chapter. Interest spread in this event, bringing in other OSHA Regions and grain industry leaders, proving the industry's commitment to growing a stronger safety culture through pooling their ideas and resources. The first *Stand Up* had 942 registered participants.



In 2018 OSHA and the National Grain and Feed Association (NGFA) entered into the National Alliance Agreement. Through this Alliance, OSHA and NGFA coordinated the *Stand Up for Grain Safety Week*, bringing in support and assistance from GEAPS and other leading organizations.

The following year (2019), the Alliance sought partners to plan and organize the *Stand Up Week*. The Alliance, along with GEAPS and the Grain Handling Safety Council (GHSC) coordinated, planned, and participated in the *Stand Up Week*.

The enhanced activities, resources, outreach and promotion efforts provided by the organizations resulted in an 18.4% increase in industry participation.

Capitalizing on the success of the *Stand Up* events, OSHA and NGFA will be renewing their Alliance, with the addition of GEAPS and GHSC as signatories. Incorporating GEAPS and GHSC, the Alliance will reach a more diverse audience in the grain industry through its initiatives, specifically reaching those at the worker level and in the production sector.

Today's *Stand Up for Grain Safety Week* continues to grow as the organizations combine their talents, resources, and knowledge to develop more training and educational offerings, expand partnerships with other industry organizations, and reach across the entire grain industry spectrum.

### Small Changes. Big Impact.

Every year hundreds of employees are injured or die from preventable hazards while working in grain storage and handling. Safety doesn't need to be big to be effective.

This year, commit to safety by making small changes in the workplace or how tasks are performed to make a positive safety impact.

Visit the [campaign webpage](#) for updates, helpful interactive features, activities and available resources.

Join the Conversation | [#StandUp4GrainSafety](#)

## Reminder - Revised Federal Drug Testing Custody and Control Form Mandatory



▶ As of August 30, 2021, DOT-regulated employers and their service agents [collectors, laboratories, Medical Review Officers (MRO)] must use the 'revised CCF'. ◀

[Learn more](#) about what this means for DOT drug testing.

## FMCSA's Drug Clearinghouse Shows Violations Up By 10% Last Year



The second year of the **Drug and Alcohol Clearinghouse** saw 58,215 drug violations in the system, compared to 52,810 in the program's first year in effect.

The majority of violations stemmed from positive drug tests (49,013 in 2021), while 8,152 violations were drug test refusals. The remaining 1,050 violations reported in 2021 were actual knowledge violations reported by employers.

Positive marijuana tests put more drivers in the **Clearinghouse** than any other substance, **FMCSA** reported, with 31,085 positive drug tests in 2021 – a 5.3% increase over reported marijuana violations in 2020. Cocaine was the second-highest positive substance among drivers, with 8,765 positive tests – a 10.4% increase over the previous year.

Methamphetamine was responsible for the third-most positive tests in the **Clearinghouse** with 5,082 violations, a 2% decrease from 2020.

Apart from marijuana and cocaine, methylenedioxyam-phetamine (MDA) was the only other substance to see an increase in violations in 2021 over 2020.

Alcohol violations also increased in 2021 over 2020, with 1,422 violations reported to the **Clearinghouse**, up from 1,122 in 2020.

Of the 104,840 drivers who have at least one reported violation in the **Clearinghouse** since it took effect in January 2020, there are still 81,052 drivers in prohibited status who have not completed their return-to-duty process. Of those drivers in prohibited status as of Jan. 1, 2022, only 13,050 have completed the requirements to be eligible for return-to-duty testing.

## Proposed UCR Fees to be Reduced for 2023

**FMCSA** released a Notice of Proposed Rulemaking in the Federal Register (1/24/22) outlining a proposed reduction in Uniform Carrier Registration Plan & Agreement (UCR) fees. The reduction in fees will begin in 2023. The proposal includes an approximate 27% reduction in fees.



Thank you to ATA for providing the quick reference below, comparing the 2022 fees to the proposed 2023 fees.

2022 UCR Fees		Proposed 2023 UCR Fees	
Fleet Size	Fee	Fleet Size	Fee
0-2	\$59	0-2	\$43
3-5	\$176	3-5	\$129
6-20	\$351	6-20	\$256
21-100	\$1,224	21-100	\$894
101-1,000	\$5,835	101-1,000	\$4,263
1,001+	\$56,977	1,001+	\$41,627

## Veteran Trucking Jobs

Our nation's outdated infrastructure, the COVID-19 pandemic, and a historic volume of goods moving through our economy have created a supply chain backlog, which has stressed our transportation industry and resulted in a critical shortage of truck drivers.



In response, the Biden-Harris Administration launched a Trucking Action Plan to Strengthen America's Workforce. Our nation's veterans are excellent candidates to help address these challenges and build the next generation's trucking workforce.

This [FACT SHEET](#) (*pdf*) lists federal programs and resources available to transitioning service members and veterans as they prepare to secure a meaningful career with family-sustaining wages in the trucking industry.

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## Legislation Introduced to Exempt Canadian, Mexican Drivers from Border Vax Mandate

*Senator intros TRUCKERS Act to exempt foreign drivers from border vax mandate*  
Feb 23, 2022

Sen. Rick Scott (*R-Florida*) recently introduced the [Terminating Reckless and Unnecessary Checks Known to Erode Regular Shipping \(TRUCKERS\) Act](#), which would exempt non-U.S. citizen commercial truck drivers traveling from Canada or Mexico for business from the proof of vaccination requirements.

Rep. Carlos Gimenez (*R-Florida*) has also introduced [companion legislation](#) in the U.S. House.

"By pushing these ridiculous mandates, President Joe Biden is only making things worse," Scott said. "The government has no business pushing mandates on families and our hardworking businesses, and my TRUCKERS Act will help stop this nonsense in its tracks. Joe Biden would be wise to take note of what's happening in Canada and see that the top-down, 'government controls all' approach doesn't work. I also urge Canada's government to drop its ridiculous mandates on foreign drivers. I hope all of my colleagues will work with us to quickly pass this good and urgently needed bill."

As of Feb 23<sup>rd</sup>, the legislation in the Senate had picked up seven co-sponsors: Sens. Roger Marshall (*R-Kansas*), Marsha Blackburn (*R-Tennessee*), Mike Braun (*R-Indiana*), Mike Lee (*R-Utah*), John Hoeven (*R-North Dakota*), Kevin Kramer (*R-North Dakota*), and Josh Hawley (*R-Missouri*).

# Truck Operators Are Frustrated, and for Good Reason

SOURCE: Greg Fulton, President, Colorado Motor Carriers Association  
Feb 24, 2022/Updated Feb 26, 2022

There have been [rumblings](#) about a **truck convoy** similar to that in **Canada** traveling across the **U.S.** In Canada, the **convoy began out of anger** over a **mandate** that **required drivers** who relied on **crossing the border** into the **U.S.** to be **vaccinated**. Both countries **require non-citizens crossing** the border to **prove** that they're **vaccinated**, but **Canada went a step farther** to **require the quarantine of unvaccinated Canadian citizens** returning from the **U.S.**

For **unvaccinated U.S. citizens** coming back into the **country**, no such **quarantine requirement exists**, and the **Supreme Court** struck down the **Biden administration's** proposed **vaccine requirement for large employers**.

The concept of a **protest convoy** in the **U.S.** appears to be **borne out of frustration** over a **number of matters** that have been **left unaddressed** for years. **Pandemic-related frustrations** play into it, but **generally operators** feel that elected **officials** and the public **haven't listened** to them **going back many years**, and **feel powerless** to get **officials' attention**.

Some **believe** that a **convoy** may be a **means to garner attention to those causes**.

'While I **don't condone** the **convoy tactic** because of its **potential impact** on the **economy** and a **concern** that it could **hurt rather than help** the **cause of operators** in the **eyes of the public**, I do **understand** the **truckers' frustration**.'

Over the **last couple of years**, much **has been made** of how **essential** **truck drivers** are to **our country** and **economy**. **People appreciated** that these **drivers were out there** daily to ensure that the **rest of us** had **food, fuel, medical supplies** and other **critical goods**.

Further, the **public became aware** during that time of the **fragile nature** of our **supply chain** and how **integral operators** are to it, and **how the pressures** on **drivers and carriers** have **affected it**.

The **challenge** for the **trucking industry** related to **drivers** has **only grown** as **older drivers** retire, while **trucking has struggled** to **retain drivers and attract** younger people in **significant enough numbers** to **replace them as well as meet** the **additional freight demands** of the country. The **COVID pandemic**, while **improving the economics** of **trucking** in **many instances**, seems to have **exacerbated this problem**.

Many have **fixated on driver pay** as the **reason carriers** have **recruiting issues**, but even as **wages have substantially increased**, **trucking continues to struggle** to **attract and keep drivers** on the **payrolls**. **Compensation** is an **important consideration**, yet **other factors** also **provide a source of frustration** for **plenty of haulers**, including how **little control drivers** have over their **work environment**.



Operators are **subject to a myriad** of **laws and regulations**. In **different states**, they face **different fees, taxes, and rules**. This **changing regulatory landscape** really **hit home** during **COVID** when, almost **overnight**, **drivers found themselves subject to new ordinances, rules, or mandates** on a **wide array of matters**. In many **cases**, rules **differed from one state or community to another**, creating a **confusing patchwork**.

Another **source of irritation** has been the **lack of adequate truck parking**, **safe and secure places** where a **driver can safely take the mandatory 10-hour daily rest period**. While **federal and state officials** have promised to **address this problem** and have made it a **national priority** for a **decade now**, for many **operators I know**, it **feels like there's less parking available** today than **five years ago** – and it's **probably an actual fact** on **many routes**. **Truck drivers now may spend** up to an **hour** every evening just **trying to find a place to take their break**.

The **failure to invest** in our **highways and bridges** represents another **sore spot**. Many **highways** are **riddled with potholes**, which, if hit, can **turn into a costly repair bill**. **Deficient bridges** are **weight-restricted**, forcing **drivers to take long detours** around them. **Drivers face more and more bottlenecks** on their **routes** because of **increased traffic** and **inaction by states** to make **critical improvements**. **Speeds on some of these corridors** are **slightly greater** than a **walking pace** some **times of the day**.

While the **federal government** finally **passed a measure** to fund **highways and bridge improvements** last year, it will **take years** for many of **those projects** to **make any difference at all**.

Many **shippers show little respect** or **concern** for the **very truck drivers** who are **critical to moving goods**. Some **shippers will not allow** **truck drivers to even use their restrooms**. Some **force drivers** to **wait for hours to be loaded, unloaded or receive signed paperwork**. If a **driver is almost out of driving hours**, most **shippers will not allow** those **drivers to take their mandatory rest break** on the **premises**, forcing them to **find a location off-site and risk a violation**.

As we **seek to address** these **related issues**, **trucking businesses** and **government must work** together, **listening closely to operators**. More than **anything else**, **truck drivers must be accorded greater respect**.

**We call them essential workers.**  
**It's about time we start treating them accordingly.**

## DOT Publishes Notice of Proposed Rule Making – Oral Fluid Testing and more...

Published (February 28, 2022, 8:18 AM) in the *Federal Register* is a DOT Notice of Proposed Rulemaking (NPRM). The NPRM is available at this [link](#), and also on the [ODAPC webpage](#).



### The proposals in the NPRM include:

1. *Permit Oral Fluid testing as an alternative drug testing method for DOT-regulated workplace testing,*
2. *Harmonize, as needed, with the new Mandatory Guidelines for Federal Workplace Drug Testing Programs established by the U.S. Department of Health and Human Services,*
3. *Allow direct observation urine collections by any licensed or certified medical professional legally authorized to take part in a medical examination in the jurisdiction where the collection takes place,*
4. *Allow MRO staff to contact pharmacies to verify a prescription that an employee provided,*
5. *'Un-cancel' a test that was 'cancelled' by the MRO if circumstances dictate,*
6. *Allow the use of options of official identification numbers issued by State or Federal authorities to be used instead of Social Security Numbers,*
7. *Laboratories provide to DOT bi-annually data that is categorized by test reason and specimen type,*
8. *Laboratories withdrawing from the National Laboratory Certification Program provide DOT with the final data report for the reporting period in which they withdrew,*
9. *Laboratories would be required to keep non-negative specimens for only 90 days,*
10. *Require that the phone number provided on the Federal Drug Testing Custody Control Form for collectors connect directly to the collector and/or the collector's supervisor and not a general call center,*
11. *Remove provisions that no longer are necessary (such as compliance dates),*
12. *Remove the 'cross-reference' sections found at the end of the 'subpart' sections,*
13. *Add clarifying language to other provisions (such as updated definitions and web links where necessary), and*
14. *Allow Substance Abuse Professional (SAP) to conduct evaluations virtually.*

**MINE FATALITY** – On September 14, 2021, an individual was fatally injured when an excavated trench collapsed and engulfed him. The victim was prospecting for gold inside the trench with a metal detector when the trench collapsed. ([pdf](#))



### Best Practices

- **Stay clear** of potentially unstable areas. Do not enter trenches if the trench walls are not properly supported for the full height or sloped to a safe angle.
- **Do not abandon trenches or excavations** without removing the potential of collapse by filling or sloping the walls to a stable angle.
- **Carefully examine ground conditions** before performing tasks near excavated embankments, trenches, or ditches.
- **Follow OSHA Trenching and Excavation Safety Guidelines** ([pdf](#))
- **Train miners about** the inherent dangers of trenching work.
- **Keep visitors** within sight and sound of a responsible person.

Miners and mine operators can find [safety and health information](#) on [MSHA.gov](#).



## Take Time, Save Lives

The top priority at MSHA is keeping miners safe. This year we have seen an increase in fatalities and injuries, many of which could have been prevented with proper training and attention to tasks. This trend is unacceptable.

MSHA announced the [Take Time Save Lives](#) campaign. While the campaign specifically highlights best practices for frequently occurring incidents, the goal is to reach miners with a wide-ranging set of resources. MSHA will continue to ensure miners have the knowledge to stay safe on the job, but it's up to mine operators to make sure that miners are fully trained and able to take time to follow best safety practices that can prevent deadly accidents.

To assist mine operators, MSHA has resources available to help train even seasoned miners. At the links below, you will find:

- [Safety information for powered haulage](#)
- [Fire suppression prevention guidance](#)
- [Pillar initiative with guidance on preventing roof and rib falls](#)
- [Fatality updates](#)

And we will continue to add more resources. If there is something you need that is not available, please let us know using the link on the safety page. We hope you'll help us get the word out to Take Time, Save Lives, and make sure every miner comes home safe at the end of each shift.

- [Powered haulage safety](#)
- [Mobile equipment](#)

Surface mining vehicles can be several stories tall and are capable of destroying smaller vehicles that cannot be seen by the operator. Traffic controls, training, and avoiding distractions are key to enhancing safety. Collision warning and avoidance systems can also help.

- [Seatbelt usage](#)

MSHA engineers estimate that three to four miners' lives could be saved each year if adequate seat belts were provided and worn. Warning systems such as chimes can remind drivers to buckle up, while interlock systems can prevent the vehicle from moving if the belt is unbuckled.

- [Conveyor safety](#)

Belt conveyors and their components pose serious risks to miners working on or around them. It's important to install adequate guarding to prevent contact, provide and use crossovers and cross-unders, and lock out energy sources and block motion whenever performing maintenance.

- [Pillar Collapse Prevention](#)

MSHA has resources available to raise awareness and avoid these accidents at underground mines, particularly limestone mines, that can result in areas where benching has occurred. Please use resources at this link, including upcoming seminars, papers, presentations and videos, to help you avoid the dangers of pillar collapses.

- [Fire Suppression Guidance](#)

Adequate task training must be performed so equipment operators and mechanics will be able to maintain equipment, respond correctly to alarms, use fire suppression systems properly, and safely dismount equipment in an emergency. Mine operators should provide refresher training as needed.

- [COVID-19](#)

**MJS Legacy Safety also offers some of these topics on request  
and can assist with specific training as needed.**



## 6. Practice good posture when sitting or lifting

*Use ergonomic desks and keyboards to avoid straining your wrists and arms. Sit up straight, keep your shoulders in line with your hips and lift with your legs when you are moving objects. Poor posture can cause strain on your back, neck and shoulders, which can lead to serious injury.*

## 7. Take regular breaks

*Look away from your computer screen regularly to avoid eye strain. Taking regular breaks allows your body an opportunity to rest from the tasks you are doing. When you return, you will be more focused and have a higher level of concentration.*

## 8. Be aware of your surroundings

*Being aware of your surroundings is paramount to avoiding workplace injuries. Here are some things to be aware of in your environment:*

- *Look for spills or items on the floor that could be tripped over.*
- *Note the appropriate safety equipment and gear for each task you are doing.*
- *Choose mechanical aids such as a forklift or wheelbarrow to help lift items and encourage others to do the same.*
- *Keep emergency exits clear and uncluttered so they are accessible in the event of an emergency.*
- *Use tools and machines properly to avoid injury and encourage other workers to do the same.*
- *Label hazardous areas and materials with appropriate signage.*
- *Know where the first aid kits are and which staff members are trained to administer first aid if an injury occurs.*
- *Know of the emergency procedures in the event of a fire, flood or earthquake.*
- *Only use secure, steady ladders and never use boxes or anything else as an improvised ladder.*
- *Test railings first before using them to make sure they are secured properly.*

## 9. Never take shortcuts

*Procedures exist to keep workers safe. Though skipping a step or not wearing safety gear may save you time, it isn't worth getting injured over. Use every tool and machine according to the instructions.*

## 10. Remain aware of new safety procedures

*Though it is the responsibility of the company to make staff aware of new safety procedures, it is your responsibility to make sure that you fully understand the information. If you're unsure about a new procedure, ask questions.*

**MJS Legacy Safety** can help with your **Workplace Safety Solutions**

**We are your One Stop Safety Shop**

**Give us a call!**