

Advancing public policy to improve the health and safety of workers and the community.

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Re: Proposed Rulemaking Changes, Workers' Compensation – Self-Insurance

Dear Jon,

The California Industrial Hygiene Council (CIHC) respectfully submits the following comments regarding proposed rulemaking changes to Workers' Compensation – Self-Insurance. CIHC believes the regulatory process should be streamlined without unnecessary and unduly burdensome requirements. However, we don't support streamlining efforts such as section 15353 which create different levels of worker health and safety oversight dependent solely on workers' compensation coverage. We offer the following comments to the proposed rulemaking changes to integrate some assurance that risk will be effectively managed into the process:

1. General

- a. If self-certification is going to be used for the Injury and Illness
 Prevention Program, a definition of "effective" needs to be provided. An
 example is included in the Division of Occupational Safety and Health
 (DOSH) Policy and Procedures (P&P) Manual C-45A.
- b. The self-certification of the IIPP needs to occur periodically (e.g. no less than every three years) versus one-time.
- 2. Section 15353. Injury and Illness Prevention Program (IIPP).
 - a. Add. Individual private sector applicants in high hazard industries per DOSH P&P Manual C-19A shall have ongoing risk control and safety support under the general direction of a California Professional Engineer, a Certified Safety Professional, and/or a Certified Industrial Hygienist. The contact name and title of this person shall be identified in the application.
- 3. Section 15482. Private Group Application
 - Add. Identify the contact name and title of the California Professional Engineer, Certified Safety Professional, and/or Certified Industrial Hygienist who will be overseeing the group's risk control and safety services per section 15486.1.

Founded in 1990, CIHC represents the occupational and environmental health profession in California and is affiliated with the American Industrial Hygiene Association (AIHA), a 10,000 member national organization, as well as the International Occupational Hygiene Association (IOHA), which represents the global community of Occupational Hygiene organizations in over 34 countries. Please refer to www.cihconline.com for further information about CIHC.

We appreciate the opportunity to comment. Should you have any questions, please contact me with any questions.

Regards,

Ed Klinenberg

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