

St. Louis Chapter Newsletter



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Monthly Meeting

April 11, 2022



Monday, APRIL 11th, 2022



Today's Speaker







Tapping Into Your "A" Game to Successfully
Lead Yourself and Others

A Little about Mary....

"For more than two decades Mary has been working with business owners and leaders to be more effective and happier at work. Today she'll share ideas and tips about how we can think, work and live better."

For more information see our webiste: https://stl.assp.org/

Syberg's on Dorsett

11:00 am

Registration & Networking

11:30 am

Lunch

12:00 - 1:00 pm

Speaker

Topic: Tapping Into Your "A" Game to Successfully Lead Yourself and Others.

Speaker: Mary Kutheis, MCK Coaching + Training

Where: Syberg's, 2430 Old Dorsett Rd, Maryland Heights, MO 63043

Register for Zoom Meeting:

https://us06web.zoom.us/meeting/register/tZcucuqvqjMpGt3w2b36mE1WWdR-7Gxbf-E7

Register for In-Person Meeting:

https://stl.assp.org/events/april-lunch-meeting-tapping-into-your-a-game/

Membership Appreciation Night



Register Now: https://stl.assp.org/events/membership-appreciation-night-3/

AIHA/ASSP St. Louis Chapter Professional Development Conference

Thanks to everyone who organized, presented at, and attended the PDC! Topics included Welding, Marijuana under Work Comp, Extreme Temperatures, The Wrong Zero, and more. The 85 attendees were sent a link to conference files and a certificate documenting 8 hours of training.



What Would You Do? A Fatal Machine Accident

~Bill Kincaid, P.E., CSP, CIT

Topics befitting the sophistication and knowledge of our ASSP Chapter members are hard to find, so I thought we might try another thought-provoking exercise this month. This exercise concerns a manufacturing plant, but the same rules and principles apply anywhere there is machinery in the workplace.

It's a "What Would You Do?" exercise, playing the role of an OSHA Compliance Officer. Everyone in our profession has opinions of OSHA, good, bad, or mixed. Being an OSHA Compliance Officer is not an easy job, regardless. And yes, there is a "right" answer and a wrong one, no matter how you respond to the question "What Would You Do?"

Let's put on our safety-toe glasses and visitors' badges, refuse to sign the confidentiality agreement, and head on in.

Scenario: an OSHA office received a call from a local manufacturing plant's HR Manager. The manager indicated there had been a fatality in the plant. According to the HR Manager, an employee had fallen into a specialized type of grinder used for recycling expanded plastics. Since the employee had died within 30 days of the causal event, the regulation required it to be called in within 8 hours of the occurrence. They called it in as required by law, within the allotted time.

Since fatalities are always a high-priority reason for an investigation, and the plant was known to be under OSHA jurisdiction, it immediately qualified for an onsite inspection. The inspection was assigned to an Officer familiar with the topic. The Officer's supervisor discussed the report briefly before the Officer left for the plant.

Before heading out the Officer reviewed the previous five years of inspection history for the company. There had been no inspections during that time. He also reviewed all the latest instructions from the National Office and Regional Office and looked for standards for regrinding machines in the plastics industry.

Once at the plant, the Officer held an opening conference with the plant's HR Manager, CEO and Plant Manager explaining the investigation process. The HR Manager indicated the Officer was welcome to inspect the accident area and the machine which was stored outside the plant to avoid spooking the employees. The CEO assured the Officer they were very interested in the Officer's opinions as to what went wrong so they could prevent recurrence. The management all seemed very friendly, open to safety ideas, and not at all defensive. They seemed like kind, gentle people.

The inspection proceeded on cooperative terms with permission to inspect, interview employees and so on. The HR Manager had already done some investigating and had compiled a list of people who were in the immediate area at the time of the accident, which the Officer copied into his Field Notes.

The Officer then went out to the plant to check out the grinder, to view the accident area and talk with employees. The grinder was out behind the plant under a tarp. From the outside, it was a steel box about eight feet long and four feet wide, on wheels, with solid sides up to a height of about five feet. On the inside, it had two spiked metal shafts a few feet down from the top rim. The Plant Manager pointed out a

plastic bag still tightly wrapped around the shafts, and indicated it had possibly been snagged on the teeth and pulled the operator in. The Maintenance Manager had a cord run to the machine so it could be run as a demonstration of how it worked. A powerful motor spun the shafts fast, so a block of expanded plastic tossed into the box was quickly dragged in and ground into small particles. In use, the particles would be constantly sucked out of the grinder and ducted across the plant to be mixed with new plastic pellets and molded into products. There was always a strong draft of air being pulled into the grinder which could draw in the billowy thin plastic bags used to dump the plastic scrap.

The Compliance Officer noticed some interesting details about the grinder. First, there were threaded holes in the top rim of the box, spaced six inches apart. The Officer's manufacturing experience told him these holes wouldn't be there without a purpose – but was that purpose related to employee safety? Also, the paint was worn on the motor housing which projected from the side of the machine two feet off the floor. This shiny bare steel indicated something had rubbed on the top often enough so rust couldn't form there. It looked like the perfect height to be used as a step. But why would anyone need a step on the side of a grinder?

The Officer took individual, private statements from everyone on the witness list. He asked if they operated the machine, where they'd been at the time of the accident, and if they had seen what happened. There were only two people who operated the grinder, and one of them was the decedent. The Officer got the name of the other grinder operator because that name wasn't among the named witnesses. The employee worked second shift, and the accident was on first shift. For some reason, this operator did not cooperate with a request for an interview. As helpful as it would have been, it happens sometimes. The Officer moved on.

A couple witnesses had seen the operator carrying a large plastic bag of scrap plastic in the direction of the grinder shortly before the accident. But none had watched the entirety of the mundane task just before the accident. They'd all seen it before. They said grinder operators dumped large chunks of plastic scrap from the plastic bags into the grinder. The supervisor added an important detail in his statement: the operators were supposed to stand on the floor while dumping into the grinder. That was an informal procedure since nothing in the plant was in writing, other than SOPs for the big molders across the plant.

The Officer kept asking questions. Soon the witnesses had all indicated they'd seen the grinder operators step up on the motor to shake the last few pieces of scrap out of the bags. The supervisor also admitted to seeing this done, because it was the easy way to get the last few pieces of scrap out of the bag. Rather than a five foot high barrier, an operator who stepped up on the motor would only be kept out of the grinder by the three feet of the side which was above the motor. It wouldn't be hard to topple into the grinder, especially if pulled in by the plastic bag wrapping around the rotating shafts.

The supervisor said employees weren't supposed to risk falling into the grinder by stepping up onto the motor, so it wasn't allowed. However, the supervisor couldn't produce any evidence that employees were ever told about this unwritten rule or that it had ever been enforced or otherwise treated seriously. The employee statements and shiny top of the motor indicated operators frequently stepped up onto the motor.

Before the Officer turned each witness loose, he asked if they had any other safety concerns they wanted to share. One of the witnesses quietly said the grinder had a guard on top when it was delivered, which had promptly been removed. The guard was a set of longitudinal steel bars set about five inches apart. This witness had an opinion as to who had removed the guard. There was a total of five grinders across the plant of varying ages. She said the guards had been taken off three machines by Maintenance on the Receiving dock before even being rolled in, although the older grinders had been modified before she started working there.

This comment led to an interview with the Maintenance Manager. The Maintenance person had a foggy memory but eventually remembered the Plant Manager wanted the machines to grind larger pieces than would fit through the bars across the tops. They wanted to eliminate the time-consuming step of cutting down large chunks of scrap into smaller pieces to fit through the guard's bars. Eventually, the Maintenance person produced his notes from a production management meeting years ago, where removing the guards was decided. Removing guards from grinders was apparently routine by the time the plant bought the grinder involved in the fatality.

Over time, the Officer examined all the grinders, interviewing multiple other employees in the process. The

machine's maker provided their current manual which included stern warnings about not using it without the top guards in place. Normally, fatality investigations take long enough without taking extra time to expand the scope, but in this case the Officer had little choice but to cover the entire plant floor. The other grinders were scattered over the plant floor and had to be examined. He observed some other concerns, such as bare conductors on hotwire foam "harp" cutters which could deliver a nasty 110VAC shock or perhaps spark a fire, sketchy generic lockout procedures for complex machines which required machinespecific procedures, and exit doors rusted shut.

The investigation lasted several months before the Officer could finally hold a closing meeting. As was his habit, he delivered as complete a listing of the proposed citations and penalty ranges as he could. The OSHA person mentioned the OSHA 1910.212 regulation as well as the ANSI B11.19 guarding standard, neither standard allowing an opening over 6 inches wide within 32 inches of the hazardous parts. Although he knew there would have to be some citations, he hoped his careful process would at least be seen as fair to all involved. He thanked his hosts for the generous use of their time and left.

After thinking about the accident, the grinders and his onsite observations, the OSHA Officer knew what he intended to do. The officer put the completed file on his supervisor's desk the next week.

So, without reading ahead, if YOU were that OSHA person, what would YOU do?

You must do SOMETHING because this is a fatality investigation. You can't just drop the issue. It's even okay to not write ANY citations for a fatality if you can fully explain your "why". Among my fatality investigations, I've sent in a few "in-compliance" reports. But be forewarned, it takes a lot of writing to explain how someone can be killed and yet everything is fine. Whatever you do has to pass the scrutiny of numerous people ranking above you, as high up as the Secretary of Labor when it's a high profile case, and your job performance ratings and future at the Agency are on the line.

Like the ultra-cheap local TV shows my brother and I worked on before I transitioned into a safety career, your fatality investigation has to be right on the first take. But the important difference is lots of people want to see your report, more than the few bored kids stuck with watching "Gator Tales" on local TV because their tightwad parents were too cheap to pay for a VHS player or cable.

What would you do? We'll make this multiple choice. Here are your options, in order of escalating consequences for the employer:

- A. Write up an explanation of how the deceased employee broke a safety rule by climbing up on the grinder, so it wasn't the plant's fault that he fell into the grinder. Because the sides of the grinder were solid, five foot high barriers, more than enough protection for an employee following the rules, don't cite the lack of guards over the grinder tops. Write up the lockout procedures, electric shock hazards, and blocked exits as "Serious" citations so you don't have to turn in an "in compliance" inspection.
- B. Cite the lack of machine guarding over the tops of the machines as well as the peripheral "Serious" citation items from "A". OSHA's general machine guarding rules in 1910.212 apply here, and the manufacturer's manual serves as backup evidence that the machine guards should not have been removed. It's a "Serious" violation.
- C. Cite the removal of the grinding machine guards as a "Willful" violation. A willful violation is cited when the employer either knowingly failed to comply with a legal requirement (purposeful disregard) or acted with plain indifference to employee safety. Willful citations carry significant fines as well as a stigma well beyond that of a Serious violation. Removing the standard guarding indicated a careless disregard for the safety of the employee, with several layers of management involved in the decision. General niceness, sadly, is not enough to outweigh a specific careless disregard.

An unwritten "standing on the floor" policy was all the employees had to keep them from falling into the grinder once guards were removed at the behest of the senior plant management. That policy was weak because it was openly ignored, despite its life-or-death significance. As much as the Officer had come to like the plant's management, they had prioritized saving scrap recycling time over the safety of the employees. One employee paid for that improved efficiency with his life.

So, what do you think? "A", which only cites some garden-variety safety issues and dismisses the grinder accident as an isolated incident of employee misconduct? "B", which also includes a Serious citation for the lack of guarding which caused the accident? Or "C", which cites the safety issues PLUS takes the

guarding violation up a level to a Willful violation? At this time, decide what you would do.

Here's what I think. "C" is the correct answer. Although the plant management seemed like nice people, their knowledge of the factory-installed guarding and culpability for its removal, especially in the light of the operating manual included with the machine, showed a willful disregard for the employees' safety. That kind of situation can only be cited as Willful unless the Compliance Officer ignores the facts. The other Serious items came out of the need to examine all the grinders, and a lack of any official latitude in citing things which could cause serious injury or death to an employee. If a Compliance Officer observes something dangerous without citing it, and then soon after someone is maimed or killed, it's now the Compliance Officer who's shown willful disregard.

So, what really happened?

The OSHA Officer went with "C". I'm sure some of you are thinking "of course he did, that's the one with the biggest fine!" But that reasoning isn't fair to this officer. As much as he liked the people who ran the plant, the facts were evident, and virtually mandated a Willful citation.

The safety of hardworking people was in the management's hands. They knew the bars on the grinders were factory-installed safety guards but decided to take them off. They knew people stood on the motors to dump from plastic bags but allowed themselves to think it was unlikely someone would be pulled into the grinder. Most of us would think it would be unlikely, agreed. However, nobody on earth would have thought it would be IMPOSSIBLE, knowing the facts at hand. It was a long shot risk, but a risk, nonetheless. The plant management was willing to gamble with the lives of their employees if the odds were good. If they "won", they shaved an hour or two of scrap-recycling labor off each shift. If they "lost", an employee could die because of the lack of guarding, and did.

Same thing for the blocked exits, the exposed 110VAC conductors, and the lack of specific lockout procedures. They didn't have the same willful quality, but they were each potentially lethal. Imagine blocked exits during a plastics fire which filled the plant with toxic gases and dark smoke, for example. Or someone working inside a giant plastic molder which was only partially locked out. These are serious hazards, not piddly stuff.

If no one had been killed, would it have prevented the Willful citation from being issued? For me, without a fatality, if time permitted, I would have called the removal of the guards "willful". Willful would have been justified because the basis for the Willful citation wasn't related to whether someone had been killed. The fatality just allowed more time for the investigation of how, why and by whom the guards came to be removed. It takes lots of time to prove a Willful thoroughly enough to get it past the DOL's Office of the Solicitor. So, it could have been a Willful even without a tragic death.

It is hard to predict what will happen in any OSHA case before it happens, though. Too many moving parts and too many variables. OSHA might have gone for Willful, or OSHA might have simply said "a Serious gets a legal process started to fix it, which will be good enough. Let's move on and leave these people to fix their safety concerns". That choice would have been a supervisory call, had no death occurred due to removing the guards. But that's not what happened.

That's a snapshot of what this very difficult, important job involves. We'll explore some other topics in future columns to give you more opportunities to decide "What Would You Do?"

~	R	i	ı	

SafetyCon Expo

Join the 2022 #SafeConExpo at The Lodge of the Four Seasons in Lake Ozarks, MO, 65049. May 17-19, 2022

Pre-conference sessions and Golf May 17th. Conference sessions all day Wednesday, May 18th and morning of Thursday the 19th.

Register Now

The Lodge of the Four Seasons:
Hotel Phone: 573-365-3000

Toll Free Reservations: 888-265-5500 between 8-5 M-F
Code for Discounted Rates - SAFECONEXPO
Guest Bedroom: \$115.00 a night

Online Registration: https://reservations.travelclick.com/17336?groupID=2584426

The discounted hotel rates end on April 22, 2022. After that day you will pay full price. Enjoy the weekend before or after the Expo with the special group rates as long as the rooms are still available.

Exhibitor Registration

You can reserve a booth, sponsor a golf hole, and find more exhibitor information here: https://shcmoks.com/media/SafeConExpo/SAFECON EXPO EXHIBITOR PACKET.pdf

MANUAL CONFERENCE REGISTRATION

ONE ATTENDEE PER REGISTRATION FORM (This form may be copied for additional registrants.) PLEASE PRINT CLEARLY

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PRECON 1: Certified Fall Protection Class: \$180 – 8AM – 12PM				PRECON Driving - 12PM	PRECON 2: Distracted/Drugged Driving – Hands On: \$69 – 8AM –					fety Training : \$69
		4: Excavation Compet \$69 – 1PM – 5PM	The state of the s	GOLF TOURNAMENT: The Cove (A Robert Trent Jones Signature Course) – 1:00pm Shotgun: \$ 95						
TOTAL: 3		ME	DNIE	COAV THURSDA	V D	REAKOUT SESSION D	MT	ES AND TIMES		
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8:00AM - 9:00AM			D	(Workers across the glo	bo, in a	HE WONLD CLASS SAFETY RESULTS: wide verteby of industries, are doing missioner of the Cambridge Center 5				
Track	ADIE	Safety Leadership		Risk Management & Loss Contr		aviconmental & Occupational He		Construction Safety	come	Workers' Compensation
9:30AM - 10:20AM		SESSION 1 Creative & Effective Safety Training (Tricks & Techniques)		SESSION 2 Sprinkler System 101 "What Should you Look For?"		SESSION 3 Noise Mapping – A Practical Approach		SESSION 4 The State of Excavation Safety – CSHA, Enforcement – Criminal Prosecution - & Third Party Lawrests		Shoulder Injuries in the Aging Workforce: Navigating through Mechanism of Injury, Causation Prevention and Treatments
10:50AM- 11:40AM		SESSION 6 Change the Approach, Change the Results		SEESON 7 The Benefits of Stretching: Fact Vs. Fiction		How to Stand Your Ground if Your Work gets Challenged		SESSION 9 TBD		SESSION 10 Pete & Repeat: What to do wit Frequent Fliers
12:40PM - 1:30PM		SESSION 13 *Behavioral Based Safety & Positive Rainforcement – A VALUE FROPOSITION* – Why Management must/should buy in to BBS		Absolute Zero Safety Initiative: Zero Injuries, Zero Accidents, Zero Near Misses = and absolute Zero Day)		Section 13 Safety Committees, Beyond the Typical Meeting		SESSON 14 Electrical Safety "What you do not know about electricity can be shocking".		SESSION 15 Hand Injuries in the Workplace
2:00PM ~ 2:50PM		SESSION 16 CISHA Update Part 1 of 2		SEXMON 17 How to Identify an at Risk Driver Uting Telematics		SESSION 18 Ethics and Professional Standards for OSH Professionals		SESSION 29 Construction Roundtable		SESSION 20 Building A Safety Culture
3:20PM 4:10PM		Hand Protection – Explanation of the latest Cut and Impact Standards		Product Liability: How Dur Supply Chain can Impact Worker Safety & Health		SESSION 29 Evidence Based Forensic Analysis for Musculoskeletal Injuries		Fall Protection Part 1 of 2		SESSION 25 Managing OSHA Recordable Injuries using Early Symptom Intervention
4:10PM - 5:00PM		SESSION 26 Utilizing Safety Perception Surveys to engage employees in the safety process		SESSON 27 Medical Manjuana		PID, The Advances of the Latest Direct Reading Technology - Benzene		Fall Protection Fart 2 of 2		The Continuum of Care: A Foundation For Your Workers Comp. Program
	1000		100	Thi	ursd	ay May 19, 2022		y www.	3000	0.5000
8:30AM - 9:20AM		SESSION DE Human Trafficking Awareness Part 1 of 2		98590N 32 Loss Control Safety Inspections		Prevention and Detection of Insect Infestation		SESSION 34 Building over Troubled Waters "Components of Building over Safety Obstacles"		SESSION 26 Using FCE's to Wrap Up Your Nightmare Workers Comp. Claim
10:20AM - 11:10AM		SESSION 36 Human Trafficking Awareness Dart 3 of 2		SESSION 37 Using Tech to Improve Fleet Safety		Understanding Workplace Violence – Prevention & Training		SESSION 39 Ernenging Injury Prevention Technologies – Esoskelations and Zero Gravity Arms		SESSION 40 Revised NEOSH Lifting Equation Understanding the Outcome Metrics and Using the RNLE for Early Design Concepts
11:10AM - 12:00PM		SESSION 41 DSHA Update Part 2 of 2		SESSION 42 Missouri Medical Marijuana Regulatory Program		Waster Water Pre-Treatment Using Breakthrough Electro- Chemical Technology		SESSION 44 Loss Control: Is Your Company Ready For A Significant Injury?		SESSION 45 Severity Patential in Organizations – The Emerging Path Forward
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Editor's note: The Mid-Missouri section exists to better serve the needs of St. Louis Chapter members living and working in and around Jefferson City and Columbia. If you would like more information on participating in and attending Mid-Mo events, please reach out to Paul or any of the officers listed below. This note from Paul was sent to Mid-Mo members and is being shared with the larger chapter membership as an update on their activities, with minor edits for clarity.

Dear Members and Friends,

March 30th was our first live meeting in two years, and it was fantastic! Thanks to Dr. Lenarz and Tonya Gabaldon for an excellent presentation on Case Studies of Conservative vs. Surgical Management of the Shoulder and Elbow.

Lunch was excellent, and congratulations to Flint Walton for winning the \$500 scholarship raffle. We also handed out four \$25 Amazon gift cards as door prizes and congratulations to those winners. We will continue with the door prizes and start a new \$500 scholarship raffle for this new season.

Welcome to our two newest members, Tonya Gabaldon and Faron Morris, who attended their first meeting yesterday. We also have two new volunteers to sit on our Mid-MO Section committee. We appreciate Bryant Jurgensmeyer and Tonya Gabaldon volunteering their time to help our society.

Please mark your schedule for our next two meetings:

04/27/2022: Wednesday: Carpal Tunnel Prevention by Paul Krewson at D. Rowes

05/19/2022: Thursday: Robotic Packers & Manipulators by Roxanne Lambert at Hubbell in Centralia, MO.

Please feel free to reach out to us with any questions or comments. We are here to serve you.

Thank you, Paul Krewson Vice-President

St. Louis Safety & Health Conference

Save the date for the 19th Annual Safety and Health Conference Thursday, October 13th at SLU

19 TH ANNUAL GREATER ST LOUIS SAFETY AND HEALTH CONFERENCE



THURSDAY, OCTOBER 13, 2022

BUSCH STUDENT CENTER SAINT LOUIS UNIVERSITY ST. LOUIS, MO

JOIN US FOR A DAY OF BEST PRACTICES, TRENDS, & UPDATES, WITH WONDERFUL LOCAL EXHIBITORS AND FRIENDS

MORE INFORMATION WILL FOLLOW WWW.STLSAFETY.ORG/CONFERENCE







St. Louis Chapter Executive Board Contacts

President - Steve Williams - swilliams@frenchgerleman.com

Vice President - Dennis Pivin - DPivin@aegion.com

Secretary - Nate Richardson - nate.richardson.safety@gmail.com

Treasurer - Mae Patrick - stlassptreas20@att.net

Past President - Rick Reams - ricky_reams@hotmail.com

Mid-Missouri Section Officers

President - Mark Woodward - mwoodwar@mem-ins.com **Vice President** - Paul Krewson - paul@peakergo.com **Secretary/Treasurer** - David Attebery - david.attebery@labor.mo.gov

Chapter Committee Chairs

Website – Dave Callies – dcallies@kelpe.com

Maintains website with updated news, chapter events, and job postings

PDC Chair – Dennis Pivin – DPivin@aegion.com

Coordinates logistics of professional development activities

Membership – Dianne Gibbs – dianne@ideasftp.com

Ensures new members are recognized & introduced at membership meetings

Public Relations – Steve Williams – swilliams@bellelectrical.com

Promotes chapter activities to the general public. Coordinates poster contest

Newsletter – Dan Bembower – dan.bembower@usi.com

Publishes and distributes the chapter newsletter to all chapter members

Awards & Honors - Bill Kincaid - billkincaid@yahoo.com

Recognizes member achievement through chapter awards

Scholarship – Rob Miller – robertmiller91@yahoo.com

Promotes student scholarships & continuing education scholarships for members

Golf Scholarship

Jesse Taborsky – jesse.taborsky@crbusa.com

Nick Zahner – nzahner@murphynet.com

Organizes and runs the annual golf tournament supporting local safety focused students

Programs – Tim Michel – tmichel@keeleycompanies.com

Plans the program time and needs for presentations & coordinates schedule

Social Media – JaNola Rigsby – jrigsby@qualsafesolutions.com

Maintains Face book & Twitter accounts promoting discussion with local membership

Women In Safety Excellence (WISE) Coordinators

JaNola Rigsby – jrigsby@qualsafesolutions.com

Patte Ackermann, PT – ackermap@ssm-select.com

Organizes the WISH events to promote the community of women in Safety & Health

Please contact a board member or committee chair with comments or if you would like to participate in any of the chapter activities.

If you do not wish to receive these emails, please <u>click here</u> to unsubscribe from ASSP St. Louis Chapter messages.

American Society of Safety Professionals | 520 N. Northwest Highway, Park Ridge, IL 60068