

U.S. Department of Labor

Occupational Safety and Health Administration  
Washington, D.C. 20210

Reply to the attention of:



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Mr. Zach Everett, Safety Committee Chairman  
Mason Contractors Association of America  
P.O. Box 23428  
Waco, TX 76702

Mr. Jeff Buczkiewicz, Executive Director  
Mason Contractors Association of America  
P.O. Box 185  
Washington, DC 20036

Dear Mr. Everett and Mr. Buczkiewicz:

This is in response to your July 14, 2009, letter to Bill Parsons, Directorate of Construction, Occupational Safety and Health Administration (OSHA). I understand that you met with Mr. Parsons on July 15th to discuss the subject matter of your letter and that he informed you that OSHA would consider and respond in writing to the questions you raised. Your letter was referred to our Directorate of Enforcement Programs for response.

At the July 15th meeting and in your letter you expressed specific concerns on behalf of the Masonry Contractors Association of America (MCAA) about recent OSHA citations issued to mason contractors whose bricklayers were not wearing gloves while performing masonry work. Your letter suggests that the use of gloves would result in poor quality masonry work and that the industry has not seen masons suffer injuries or illnesses to their hands as a result of not using gloves.

OSHA does not have a standard that specifically requires the use of gloves by masons. The applicable regulation is 29 CFR 1926.95(a), which is the general standard requiring the use of personal protective equipment (PPE) in construction work. That provision reads as follows:

Protective equipment, including personal protective equipment for eyes, face, head, and extremities, protective clothing, respiratory devices, and protective shields and barriers, shall be provided, used, and maintained in a sanitary and reliable condition wherever it is necessary by reason of hazards of processes or environment, chemical hazards, radiological hazards, or mechanical irritants encountered in a manner capable of causing injury or impairment in the function of any part of the body through absorption, inhalation or physical contact.

As you can see from the language of the standard, PPE is only necessary when employees are exposed to the types of hazards that can be mitigated through the use of such protective equipment.

Masonry cement typically consists of potentially hazardous components, e.g., calcium carbonate and portland cement with trace amounts of hexavalent chromium, and it is OSHA's understanding that masons routinely work with wet cement. Evidence suggests that exposure to wet cement can cause serious skin injuries (e.g., caustic burns) and illnesses (e.g., contact or allergic dermatitis).<sup>1</sup> During OSHA's recent rulemaking for the hexavalent chromium standards, OSHA looked at the dermal effects of exposure to cement and noted that "many workers develop cement dermatitis, including masons," and that "[w]ork with cement is regarded as the most common cause of [hexavalent chromium]-induced dermatitis." (See the Federal Register preamble to the Final Rule, 71 FR 10099-10385, specifically, pp. 10171-10172 for discussions of cement dermatitis).

In light of the potential hazards associated with working with cement, one cement manufacturer's material safety data sheet (MSDS) provides the following information on skin protection:

*Skin Protection: Prevention is essential in avoiding potentially severe skin injury. Avoid contact with unhardened masonry cement. If contact occurs, properly wash affected area with soap and water. Where prolonged exposure to unhardened masonry cement products might occur, wear impervious clothing and gloves to eliminate skin contact.*

Because of the dermal hazards potentially associated with masonry work, OSHA will not grant masons, mason laborers, or masonry work any formal exemptions from the general PPE requirements in 29 CFR 1926.95. But OSHA also recognizes that some masonry tasks may not involve significant skin contact with wet cement or other activities hazardous to the skin on employees' hands. 29 CFR 1926.95 is a performance-oriented standard and does not require the use of gloves for all masonry tasks. Gloves are not required for tasks that do not expose masonry employees to hazards capable of causing injury or impairment to the hands via absorption or physical contact.

To determine whether a particular task poses a hazard to employees' hands, the employer should designate a safety officer or some other qualified person with expertise to assess work activity hazards and select appropriate PPE. See the non-mandatory appendices providing guidance on hazard assessment in 29 CFR 1910 Subpart I Appendix B or 29 CFR 1915 Subpart I Appendix A. The recommended approach involves a walk-through survey to identify sources of hazards to employees and a review of MSDSs for hazardous materials that may be used by employees. Also recommended are reviews of the employer's occupational illness and injury records to determine if reports may be linked to workplace exposures, as well as a review of any workplace exposure determinations for hazardous materials.

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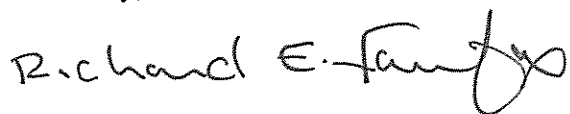
<sup>1</sup> OSHA Publication 3351, Preventing Skin Problems from Working with Portland Cement, 2008.

In your letter you requested that OSHA review data from masonry employers' illness and injury and recordkeeping logs (OSHA Forms 300, 300A, and 301). Although OSHA does not collect employers' logs, we did confer with our Department's Bureau of Labor Statistics (BLS). The BLS provided us with an analysis of the incidence of injuries and illnesses reported by masonry contractors in 2007 and 2008; copies of those analyses are enclosed for your information. The types of hazards we are discussing in this letter would generally fall in the category of "skin disorders," although some skin burns from cement exposure may have been reported as injuries instead of illnesses, and other hand injuries or illnesses from skin exposure to cement may not have been reported at all.

Although OSHA cannot take a position on the feasibility of wearing gloves during masonry work generally, to the extent a hazard assessment shows that gloves are necessary in a specific workplace, that particular masonry employer may be excused from compliance if it can establish: (1) that the use of gloves would be impossible or would prevent performance of required work; and (2) that it took reasonable alternative steps to protect employees or there are no alternative means of protection available.<sup>2</sup>

Additional practical information and guidance on controlling skin hazards from portland cement are in OSHA Publication 3351, *Preventing Skin Problems from Working with Portland Cement*, 2008, a copy of which is enclosed for your convenience. We hope this information and guidance is helpful. If you have any further questions, please feel free to contact the OSHA Office of Health Enforcement at (202) 693-2190.

Sincerely,

A handwritten signature in black ink that reads "Richard E. Fairfax". The signature is written in a cursive, flowing style.

Richard E. Fairfax, Director  
Directorate of Enforcement Programs

Enclosures

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<sup>2</sup> OSHA Instruction, CPL 02-00-148, Field Operations Manual (FOM), November 9, 2009, page 5-9.

**Number and rate (1) of nonfatal occupational injuries and illnesses by selected industry, All U.S., private industry, 2007 (Numbers in thousands)**

| Characteristic  | Private industry (2) (3) (4) |      | Masonry contractors |       |
|---|------------------------------|------|---------------------|-------|
|   | Number                       | Rate | Number              | Rate  |
| <b>Injuries and Illnesses</b>                                     |                              |      |                     |       |
| <b>Total cases</b>  | 4002.7                       | 4.2  | 10.3                | 5.1   |
| <b>Cases with days away from work job transfer or restriction</b> | 2036                         | 2.1  | 5.9                 | 2.9   |
| <b>Cases with days away from work (5)</b>                         | 1158.9                       | 1.2  | 4.8                 | 2.4   |
| <b>Cases with job transfer or restriction</b>                     | 877.2                        | 0.9  | 1.1                 | 0.5   |
| <b>Other recordable cases</b>                                     | 1966.7                       | 2.1  | 4.4                 | 2.2   |
| <b>Injuries</b>   |                              |      |                     |       |
| <b>Total cases</b>  | 3796.4                       | 4    | 10                  | 5     |
| <b>Illnesses</b>  |                              |      |                     |       |
| <b>Total cases</b>  | 206.3                        | 21.8 | 0.3                 | 13.4  |
| <b>Illness categories</b>   |                              |      |                     |       |
| <b>Skin disorders</b>   | 35.3                         | 3.7  | (6) 0.0             | 2.4   |
| <b>Respiratory conditions</b>                                     | 16.7                         | 1.8  | -                   | -     |
| <b>Poisoning</b>  | 3.4                          | 0.4  | -                   | -     |
| <b>Hearing loss</b>   | 23                           | 2.4  | (7) 0.0             | (7) - |
| <b>All other illness cases</b>                                    | 127.9                        | 13.5 | 0.2                 | 8     |

**Footnotes**

(1) Incidence rates represent the number of injuries and illnesses per 100 full-time workers (10000 full-time workers for illness rates) and were calculated as:  $(N / EH) \times 200000$  (200000000 for illness rates) where:

N = number of injuries and illnesses

EH = total hours worked by all employees during the calendar year

200000 = base for 100 full-time equivalent workers (working 40 hours per week 50 weeks per year)

200000000 = base for 10000 full-time equivalent workers (working 40 hours per week 50 weeks per year).

(2) Excludes farms with fewer than 11 employees.

(3) Data for Mining (Sector 21 in the North American Industry Classification System -- United States 2002) include establishments not governed by the Mine Safety and Health Administration (MSHA) rules and reporting such as those in oil and gas extraction and related support activities. Data for mining operators in coal metal and nonmetal mining are provided to BLS by the Mine Safety and Health Administration U.S. Department of Labor. Independent mining contractors are excluded from the coal metal and nonmetal mining industries. These data do not reflect the changes Occupational Safety and Health Administration made to its recordkeeping requirements effective January 1 2002; therefore estimates for these industries are not comparable to estimates in other industries.

(4) Data for employers in railroad transportation are provided to BLS by the Federal Railroad Administration U.S. Department of Transportation. These data do not reflect the changes Occupational Safety and Health Administration made to its recordkeeping requirements effective January 1 2002; therefore estimates for these industries are not comparable with estimates for other industries.

(5) Days-away-from-work cases include those that result in days away from work with or without job transfer or restriction.

(6) Less than 50 cases

(7) Less than 15 cases

NOTE: Dashes indicate data that do not meet publication guidelines.

SOURCE: Bureau of Labor Statistics, U.S. Department of Labor, Aug. 5, 2009

**Number and rate (1) of nonfatal occupational injuries and illnesses by selected industry, All U.S., private industry, 2008 (Numbers in thousands)**

| Characteristic  | Private industry (2) (3) (4) |      | Masonry contractors |       |
|---|------------------------------|------|---------------------|-------|
|   | Number                       | Rate | Number              | Rate  |
| <b>Injuries and illnesses</b>                                     |                              |      |                     |       |
| <b>Total cases</b>  | 3696.1                       | 3.9  | 8.6                 | 4.6   |
| <b>Cases with days away from work job transfer or restriction</b> | 1900.8                       | 2    | 5.7                 | 3.1   |
| <b>Cases with days away from work (5)</b>                         | 1078.1                       | 1.1  | 4.3                 | 2.3   |
| <b>Cases with job transfer or restriction</b>                     | 822.6                        | 0.9  | 1.5                 | 0.8   |
| <b>Other recordable cases</b>                                     | 1795.3                       | 1.9  | 2.8                 | 1.5   |
| <b>Injuries</b>   |                              |      |                     |       |
| <b>Total cases</b>  | 3508.7                       | 3.7  | 8.4                 | 4.5   |
| <b>Illnesses</b>  |                              |      |                     |       |
| <b>Total cases</b>  | 187.4                        | 19.7 | 0.2                 | 10.5  |
| <b>Illness categories</b>   |                              |      |                     |       |
| <b>Skin disorders</b>   | 35.8                         | 3.8  | (6) 0.0             | (6) - |
| <b>Respiratory conditions</b>                                     | 14.8                         | 1.6  | -                   | -     |
| <b>Poisoning</b>  | 2.6                          | 0.3  | (6) 0.0             | (6) - |
| <b>Hearing loss</b>   | 22.1                         | 2.3  | (6) 0.0             | (6) - |
| <b>All other illness cases</b>                                    | 112                          | 11.8 | 0.1                 | 6.7   |

**Footnotes**

(1) Incidence rates represent the number of injuries and illnesses per 100 full-time workers (10000 full-time workers for illness rates) and were calculated as:  $(N / EH) \times 200000$  (20000000 for illness rates) where:

N = number of injuries and illnesses

EH = total hours worked by all employees during the calendar year

200000 = base for 100 full-time equivalent workers (working 40 hours per week 50 weeks per year)

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(5) Days-away-from-work cases include those that result in days away from work with or without job transfer or restriction.

(6) Less than 15 cases

NOTE: Dashes indicate data that do not meet publication guidelines.

SOURCE: Bureau of Labor Statistics, U.S. Department of Labor, Dec. 30, 2009