The State Grant Exchange

Fourth Quarter Fiscal Year 1997

Providing Health and Safety Training to the Nation's Miners - - The Right Thing to do!!!

If It's Silica, It's Not Just Dust

The National Campaign to Eliminate Silicosis marks its first anniversary on October 31. The Holmes Safety Association Bulletin will feature an article each month on silicosis prevention. "Sitting Up to Sleep" is the first in the series.

Sitting Up to Sleep

"How many of you know someone who suffers from silicosis?" the doctor asked. A dozen hands raised up across the Schuylkill Training and Technical Center cafeteria.

"How many of you have lived with someone who suffers from silicosis?" the doctor continued. Only two hands raised up, including the doctor's.

"My grandfather died of silicosis," Dr. Weyandt reported, beginning his presentation.

"As a youngster, I remember him sitting in the living room in his green upholstered chair. He would sit up in the chair at night to sleep. He would sit in the chair to eat his meals. He had to sit up in order to catch his breath. On a good day," he added reverently, "he could move from his chair to the table, but he would have to stop every few seconds to catch his breath. As he breathed, the air whistled across his lips."

I looked at my friend Marcie and we nodded. We've heard before a story like this one.

Dr. Timothy Weyandt traveled from Penn State University to Frackville, Schuylkill County, Pennsylvania on a late summer afternoon to share information about silicosis to a group of anthracite miners. He was invited by District Manager Glenn Tinney and was one of several speakers participating in a three-hour workshop in MSHA's Wilkes-Barre, Pennsylvania district. I sat at a large round table with the mine workers and supervisors and listened to his presentation. From time to time, I glanced around the large room to watch the audience's reaction to his graphic slides.

First, he displayed textbook diagrams of the human respiratory system. He explained how dust containing silica collects in the lungs and settles in the tiny air passages called alveoli. The illustration of the airway passages looked like tiny branches on a tree.

Then, the doctor explained that the lungs react to the silica dust as a foreign object and scar tissue forms in the alveoli. He used photo after photo of lungs damaged by crystalline silica dust, explaining that the dust makes the lungs turn hard. They loose their elasticity. I tried to imagine what it would be like to live with silicosis. How would I catch my breathe if my lungs were damaged by silica dust and were not flexible?

Dr. Weyandt also displayed chest x-rays and explained how a specially trained doctor, called a certified NIOSH "b-reader," reviews the radiographs. Some of the x-rays he displayed showed early evidence of silicosis. For my untrained eye, it was difficult to distinguish the healthy lungs from the lungs in an early stage of silicosis. Some of the other x-rays Dr. Weyandt displayed were very distorted. On these films it was easy to see the damage caused by the dust containing silica.

As the different x-rays flashed across the screen, I wondered how these patients developed the disease. Were they miners who cut or drilled through sandstone? Were they workers who did sandblasting or jack hammering? Did they work with molds in a foundry or manufacture glass? Who were these workers? Did they know that dust containing silica was dangerous? Did they know that "if it's silica, it's not just dust?"

Dr. Weyandt explained that there is no treatment for silicosis and the disease is progressive. He emphasized to the group of miners that if someone is diagnosed with the disease and leaves the dusty job, the silica dust continues to damage the lungs. As the disease progresses, it becomes more difficult to breath and the patient may need to use a portable oxygen tank. He punctuated this sad

scenario by adding, "...and that's just about the time the worker is getting ready to enjoy his retirement."

Finally, he closed his presentation by repeating "there is no cure for silicosis. Prevention is the only answer." At that moment, we glanced around the cafeteria at the audience. It was very quiet in the large room. Marcie turned to me and whispered, "do you think some of them are afraid?" Unfortunately, I nodded yes.

SIDEBARS

(1) For more information about silicosis prevention or to attend a workshop in your area, contact your local MSHA office.

(2) Tips for Miners:

Miners concerned about dust containing silica at their workplaces should talk to their employer, employee representative or union. They should also use and maintain engineering controls installed by their employer to reduce silica dust levels, and report to their employer when the controls are not working properly. Miners should also minimize dust by following good work practices, such as removing dust with a water hose or vacuum with a high-efficiency particulate filter rather than blowing it clean with compressed air. They should participate in air monitoring, medical surveillance and training programs offered by their employer or when required by law.

Employers should make a commitment to prevent silicosis at their worksites and comply with regulations on respirable crystalline silica. They should perform air monitoring as needed, and when required by law, and take corrective action when silica levels are excessive.

Employers should also install and maintain engineering controls and establish a written respiratory protection program. Provide medical examinations for employees who may be exposed to dust containing silica.

(3) Describe briefly the x-ray screening of anthracite miners in District #1.

Celeste A. Monforton
Mine Safety and Health Administration

Adam Hare Update

By now most of you should know that Adam Hare, Chief Acquisition Management Branch and contracting officer of MSHA had open heart surgery. Adam is recovering very well and is doing fine. He is planning to return in the near future and expressed extreme thanks to all the grantees and friends who sent cards and called his office with concern. We at MSHA are very happy to hear that Adam is doing well and look forward to his return. He is a big asset to the State Grants Program and the Agency.

Updates from the Department of Health and Human Services Division of Payment Management

The Division of Payment Management (DPM) which monitors the HHS payment system for the MSHA State Grants Program will be expanding their INTERNET homepage. The homepage is intended to cover all services provided by DPM, including recipients and awarding agency information and documentation. The homepage enables the user to contact, via E-Mail, their account representatives with questions and concerns. Technical assistance and payment request connectivity is also available. Currently, the site is up and running; however users should be aware that these next several months will mean many changes and improvements.

Up to the minute news will be posted on the homepage, as well as general references for all users of the services provided by DPM. It will include a variety of customer service information; everything from interactive Cashline and Smartlink II troubleshooting to instructions on how to set up your account via ACH for direct deposit of funds. There will be a FAQ (Frequently Asked Questions) page and a user guide for the Electronic 272 reporting process and the Cashline and Smartlink II payment systems. Also, recipients will be introduced to on-line instructions addressing PMS 272-Federal Cash Transactions Report preparation.

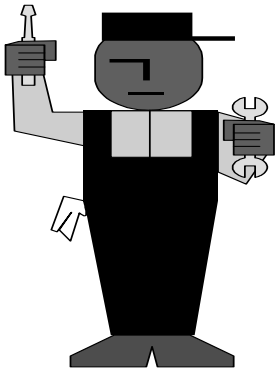
The current focus is on customer service, support, and reference. The plans for the homepage emphasize a much more interactive and functional approach geared, to inform and serve recipients and agency users.

The homepage address is ***http://www.dpm.dhhs.gov.*** Questions about the homepage and/or DPM can be directed to ***info@psc.dhhs.gov***.

This article was published in the July 1997 copy of the DPM "**Quick Draw**" newsletter. If your state program would like to receive a monthly copy of the DPM "**Quick Draw**" newsletter, please notify the MSHA State Grants Program Office on (703) 235-1400. The "State Grants Exchange" will continue to have informational articles from the DPM newsletter for reference for the program.

Greg Graham
State Grants Program Office

JUST TO LET YOU KNOW....



In FY 1995 and 1996, seven State Grant Programs participated in a project coordinated by the Pittsburgh Safety and Health Technology Center under MSHA's Office of Technical Support. The purpose of this project was to measure the metabolic cost of oxygen in mine escapes. Mine site tests were conducted where five miners exited the mine wearing heart monitoring devices. The devices were collected as each miner exited the mine. One miner returned and exited the mine a second time, only the second time wearing a Self-Contained Self-Rescuer (SCSR). Oxygen use data was collected along with other pertinent information, such as, time taken to exit mine, seam height, elevation of exit route, method of travel (walking, crawling, "duck walking", etc.) to create a mine profile. Most of the mine profiles have been submitted to MSHA and the final project report will be available in September.

If you have a question regarding the status or results of an MSHA project or initiative, please give us a call and we will do some "investigative reporting." We will try to get the answers or put you in contact with the right people who know first hand about the project.

Linda Davis
State Grants Program Office

Update from the Office of Management and Budget (OMB)

OMB Circular A-133 Revised (June 24, 1997) rescinds Circular A-129, "Audits of State and Local Governments," issued April 12, 1985, and supersedes the prior Circular A-133, "Audits of Institutions of Higher Education and Other Non-Profit Institutions," issued April 22, 1996. The effective dates for the revised circular shall be effective July 1, 1996, and shall apply to audits of fiscal years beginning after June 30, 1996. (The requirements of Circular A-128, although rescinded, and the 1990 version of Circular A-133, remain in effect for audits of fiscal years beginning on or before June 30, 1996.) The most significant change is the inclusion of State and Local Governments (previously governed by Circular A-128) under the revised A-133. Generally, this means that this revised circular applies to all recipients and subrecipients of Federal grant funds; State and Local Governments, Federally Recognized Indian Tribal Governments, Institutions of Higher Education and Other Non-Profit Organizations.

One of the major changes from Circular A-128 to A-133 is increasing the threshold that triggers an audit requirement from $25,000 to $300,000. Section 300 of the newly formatted Circular A-133 contains the responsibilities for auditees. OMB Circular A-133 Revised (June 24,1997) "Audits of States, Local Governments, and Non-Profit Organizations" is available on the INTERNET. To access the circular on the INTERNET follow these instructions:

Step 1 - type the address; http://www.whitehouse.gov/WH/EOP/omb
Step 2 - select OMB Documents link
Step 3 - scroll to the circulars link and select
Step 4 - select the numerical sequence
Step 5 - scroll to A133 and select

Information can also be obtained by calling the Office of Management and Budget at (202) 395-3993. If you really want to score some points with your fiscal office staff offer them this Internet address for the OMB Circular A-133 Compliance Supplement. While this is the "Cliff's Notes" for auditors in determining compliance requirements relevant to audits, it can also be a very helpful tool for your fiscal office as they prepare for audits. They will now have a "heads up" on what the auditors will be looking for. To access the compliance supplement on the INTERNET, follow these instructions:

Step 1 - from the A-133 Circular section select "Accompanying Federal Register Materials"
Step 2 - scroll in the text for "Circular A-133 Compliance Supplement and select.

Linda Davis
State Grants Program Office

State Grants Note Pad

1997 National Mine Rescue, First Aid, EMT, and Bench Contest
September 16-18
Kentucky Fair and Exposition Center
Louisville, Kentucky

Mid-States Mining Safety Conference
September 17-19
Marriott's Tan-Tar-A Resort
Lake of the Ozarks, Missouri
For information contact:
Judy Tate (214) 767-8401 ext. 234

Arizona State Mine Inspector's 7th Annual International Mine Safety & HealthConference and Exposition
October 7-9
Francisco Grande Resort
Casa Grande, Arizona
For information contact:
Dee Smith (602) 542-5971
or fax (602)542-5335

1997 TRAM Conference/National Mine Instructors Seminar/Holmes Safety Association Meeting
October 14-16
National Mine Health and Safety Academy
Beckley, West Virginia
For reservations contact:
Linda Elswick (304) 256-3252

Grant Manager's Corner

Reminder! This is a reminder that the State Grants Quarterly Technical and Financial Reports for the third quarter of fiscal year 1997 were due on July 31, 1997. If you have not submitted your reports, please do so immediately. These reports can be submitted electronically or by hard copy in the mail.

The new reporting requirements and instructions for fiscal year 1998 will be sent to grantees by the end of October. A training video with all the information needed to setup and operate the new system will be distributed to all participants to facilitate implementation. These materials will be essential to train new operators. Also included will be instructions on how to file transfer protocol (FTP) files directly to the grants office, instead of using INTERNET E-Mail. The FTP system will be easier and the problems that existed with E-Mail should not occur with the FTP system.

The fiscal year 1998 funding notification letters were mailed to the grant recipients. Please make any necessary adjustments to your program's grant narrative to reflect the funding awarded. If any additional program activities are needed, please add to the narrative as applicable.

James Baugher
State Grants Manager

Remember, if you would like to submit an article or upcoming event in the Exchange, contact Greg Graham on (703) 235-1400.