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October 24, 2023

TO: Each Supervisor

FROM: Barbara Ferrer, Ph.D., M.P.H., M.Ed.
Director 

SUBJECT: **SILICOSIS PREVENTION AND CARE
(ITEM 10, BOARD AGENDA OF JUNE 6, 2023)**

This memorandum is in response to the Board of Supervisors’ June 6, 2023 motion in which the Board directed: 1) the Department of Public Health (Public Health or DPH), in consultation with the Department of Health Services (DHS), Department of Consumer and Business Affairs (DCBA), Department of Economic Opportunity (DEO), and Department of Public Social Services (DPSS), in collaboration with State and community partners, to report back in 120 days on outreach and education plans targeting stone fabricators, employees in the industry, impacted communities, and consumers, regarding the health risks associated with silica-fabricated stone [Directive 2], and directed 2) DPH, in collaboration with DEO, DHS, DCBA, and in consultation with County Counsel, and in consultation with the Los Angeles/Orange Counties Building and Construction Trades Council and the Southwest Mountain States Regional Council of Carpenters, and other interested labor partners, to report back in 90 days on the options to ban the sale, fabrication, and installation of silica fabricated stone in Los Angeles County and other regulatory measures as well as plans for engagement around worker safety and retraining and business education and outreach to businesses who might be affected by a ban of sale of silica engineered stone in unincorporated Los Angeles County and other assistance [Directive 4].

This report responds to Directives 2 and 4 of the Board’s motion. Directive 1 proclaimed the month of June as Silicosis Awareness Month throughout Los Angeles County and Directives 3 and 5 requested [reports back](#) from the Department of Public Works and the Chief Executive Office (CEO) Legislative Affairs and Intergovernmental Relations division, respectively, which were previously submitted to the Board on July 25 and August 7, 2023.

Directive 2

Background

Silicosis is an occupational lung disease caused by inhalation of respirable crystalline silica (RCS) which mainly affects workers exposed to silica dust in occupations such as construction and stone fabrication. Silica is a ubiquitous mineral found in nature and many construction

materials including sand, stone, concrete, and artificial stone, among other materials used for construction and industrial purposes. Workplace exposure to silica dust (RCS) causes lung inflammation, stiffening, and scarring, which can lead to severe lung disease and difficulty breathing. Silicosis is irreversible and progressive, but entirely preventable. The disease typically takes 10 – 30 years to develop, although it can develop sooner if a person has high exposure to silica dust. There is no cure besides a lung transplant, which costs more than \$1.3 million and may only extend survival on average for five years post-transplant.

Additional health effects of silica dust exposure include other pulmonary diseases; chronic obstructive pulmonary disorder (COPD), malignancies, infections like Tuberculosis and non-tuberculous mycobacterium, autoimmune diseases, and renal disease.

The public health threat of silicosis has reemerged as evident by the increase of workers presenting with symptoms of the respiratory disease at Los Angeles County Olive View – UCLA Medical Center over the past 18 months. The San Fernando Valley has become *ground zero* for silicosis cases in Los Angeles County because hundreds of engineered stone cutting and fabrication businesses, stone importers, distributors, and showrooms have concentrated in the region. All patients currently being treated for silicosis at Olive View – UCLA Medical Center work in the stone fabrication industry.

As indicated in a letter to employers by Cal/OSHA¹, silica dust contains crystalline silica, which is in engineered stone, as well as in natural quartz, granite, and other stone products. Cutting, grinding, chipping, sanding, drilling, finishing, or polishing of these products can release dangerous levels of silica dust into the air that workers breathe. Engineered stone has the most crystalline silica so it can produce higher levels of silica dust. Engineered stone countertops have skyrocketed in popularity over the last 15 years because they are an affordable and appealing option for consumers to install in their kitchens and bathrooms and for developers to use in large scale commercial properties. Imports of engineered stone surfaces increased 600% since 2008 and represent a \$20 billion-dollar global market value². Engineered stone products in their complete and fully intact form are certified NSF safe and pose no harm or threat to consumer health. However, the actions required to prepare these engineered stone products for installation poses a dangerous health risk to workers. The increase in demand for this product can be correlated with the increase in cases of silicosis over the past 15 years. Engineered stone fabrication generates extremely fine dust (RCS) which enters the body by inhalation if safety measures and mandatory protocols are not followed. The Occupational Safety and Health Administration (Cal/OSHA) requires that employers and workers follow [strict safety standards](#) to reduce the amount of RCS generated through the fabrication process, however the compliance rates with current Cal/OSHA silica safety standards are uncertain. Another relevant factor is that most of the engineered stone products being imported and sold in the United States today may contain as much as 95% silica. In comparison, granite, a popular design choice for kitchen and bath countertops in the 1990s contains on average 50% silica or less. For further contrast, natural stones such as marble can contain on average only 2% silica.

Consumer demand, ease of availability, lack of education, and poor compliance with silica standards have all played a role in the increasing rate of silicosis cases in Los Angeles County, in California, the nation, and around the globe. The human cost of this desirable commodity is illness, suffering and likely death. As noted, silicosis is a painful, degenerative respiratory

disease with no cure, limited treatment options, and fatal prognosis that is impacting workers at increasing rates. Patients identified in Los Angeles are all males and nearly all are Latino immigrant men with the majority being between 40-49 years old (some as young as in their late 20s) with an average work tenure cutting and fabricating stone of 15 years at diagnosis³. The burden of these untimely deaths does not just affect the workers, industry, or the healthcare system. Silicosis in Los Angeles County is leaving children fatherless, with families and communities incomplete and devastated. We do not yet fully understand the breadth of this situation as cases are increasing with a time lag following increasing popularity of engineered stone products; however, all stakeholders understand the gravity of this issue, agree that silicosis is a preventable disease, and that action needs to be taken immediately to remedy these preventable harms.

Stakeholder Engagement

Public Health convened meetings with County Counsel, DCBA, DPW, DEO, DHS, labor sector partners, business stakeholders, community-based organizations, engineered stone cutting and fabrication industry professionals and physician subject matter experts. These initial efforts reflect the beginning of a comprehensive public health approach to confront the reemergence of silicosis related to occupational exposure to RCS among workers who cut and fabricate engineered stone counter and benchtops.

Workplace and Community Engagement

In May, Public Health, in partnership with Liberty Hill Foundation, leveraged Public Health Councils Program funding to contract with Pacoima Beautiful, a grassroots community-based organization, to begin silicosis education and awareness in the San Fernando Valley. One of the goals of this contract is to rapidly train and deploy experienced community health workers (promotoras) to conduct outreach and education to the community and increase awareness about this health hazard. Pacoima Beautiful was established in 1996 in response to overwhelming environmental health threats and concerns in Pacoima. This grassroots organization has a proven track record of engaging the community with education and has been successful with increasing awareness of relevant health issues among a diverse population of residents.

Pacoima Beautiful's contract calls for conducting intensive outreach and education from June 2023 through December 2023, with activities including:

- Distributing educational print and electronic materials to community residents, workers, houses of worship, schools and community-based organizations.
- Organizing, leading and attending meetings with key community stakeholders to raise awareness about COVID-19 and other respiratory diseases among at-risk worker populations; educating participants about who is impacted and why; and increasing understanding of prevention strategies.
- Conducting listening sessions to solicit insights from community residents regarding effective social media messaging strategies to inform future Public Health led social media campaign.
- Identifying effective strategies for reaching and engaging workers and their families and communities.

- Creating written recommendations describing specific strategies to Public Health for future outreach and engagement of workers at increased risk for respiratory diseases, their families and communities; as well as recommended policy solutions to reduce the incidence of respiratory disease among workers.

Additionally, through the County's Public Health Councils Program, Public Health leveraged an existing relationship with the UCLA Labor Occupational Safety and Health Program (LOSH), which is also actively engaged with silicosis prevention and outreach in the San Fernando Valley. Public Health facilitated collaboration between the two organizations to receive the same trainings and coordinate their outreach efforts with Public Health resulting in a greater reach into the target community and to ensure a unified voice with consistent messaging to reduce potential redundancies among those involved in community outreach regarding silicosis prevention.

The three primary outreach strategies used by Public Health, Pacoima Beautiful, and UCLA LOSH include:

- **Community Outreach** – Training community health workers (promotoras) and other Public Health practitioners to conduct outreach at local commercial venues, schools, houses of worship, public parks and libraires, and to provide educational presentations to local community-based organizations.
- **Worker Outreach** – When possible and safely accessible, promotoras conduct outreach to engineered stone cutting and fabrication workers to provide general education on silicosis prevention strategies in the workplace and information on how to access health resources if they or someone they know is symptomatic.
- **Employer Outreach** – Deploying Public Health Nurses to provide education and technical assistance to engineered stone fabricator business owners/operators.

Public Health received information from the State on the approximately 285 stone fabricator facilities in Los Angeles County that were sent Cal/OSHA's letter to employers, *Employer Requirements Regarding Silica Dust Exposure Under California Code of Regulations Title 8 Sections 5203 and 5204*. As part of planned outreach to these facilities, Public Health Nurses met with and received training from DPH and DHS treating physicians with knowledge of silicosis, attended a RCS training hosted by the Southwest Mountain States Regional Council of Carpenters, and a training on silicosis by Pacoima Beautiful. The Public Health team identified resources that could be shared as information packets, including California Department of Public Health (CDPH) flyers "[Information for Employers](#)" and "[Information for Workers](#)" (in English, Spanish, and Chinese), a Public Health and Pacoima Beautiful flyer "What the Workers Need to Know" (in English and Spanish), information on silicosis research studies (mentioned below), and contact information for more information. A survey tool was also developed for outreach to businesses to improve understanding of current business operations.

As of the end of September, 107 businesses had been visited for outreach. Only 11% percent of these were actual fabrication shops while a small percentage (8%) were

showrooms only. A small number of these were also either vacant or another type of business activity. The team also identified eight businesses that were not on the State's list. Only 28 of the businesses visited so far indicated they had received the Cal/OSHA letter.

Field teams conducting primary outreach strategies reported the following when engaging both workers and employers at worksites.

Challenges encountered in the outreach included:

- outdated Cal/OSHA list information,
- difficulty being able to talk with employers,
- identifying sites not on the State list that were working with engineered stone and did not use personal protective equipment (PPE) or were unaware of silicosis,
- lack of awareness of the need for correct filters,
- lack of adequate PPE or the wrong sizes and lack of understanding about the need for fit testing,
- businesses reported that employees do not wear PPE due to discomfort and not wanting to enforce because of concern about the challenges of finding skilled employees,
- some owners reported concerns about being unfairly targeted by being registered, OSHA licensed, and following regulations while companies that are not following regulations are “getting away” with breaking the law with little consequences,
- concerns were also raised about unlicensed/unregistered companies undercutting prices compared to licensed businesses.

In interactions with workers, the following observations were made:

- sometimes workers are instructed not to speak to anyone,
- workers may be aware of silicosis but choose not to use PPE and often followed practices of other workers with respect to not wearing PPE; employers do not enforce correct practices,
- some workers merely rent workspaces from companies on the State's list,
- some workers lacked access to higher efficiency respirators due to employer cost,
- workers sometimes lacked knowledge around use of correct filters,
- at one site visited, workers took pictures of handouts to share with their friends who were unaware of silicosis,
- one worker suggested that a trusted figure in their community (e.g., an athlete or musician) should do announcements in Spanish warning of silicosis dangers.

Public Health is continuing to conduct outreach to the other businesses identified by Cal/OSHA in LA County. While noting this is a labor-intensive activity, lessons learned are being identified that will inform future outreach.

Cal/OSHA indicated to Public Health that it has and will continue to conduct outreach in LA County. Currently, Cal/OSHA is developing additional educational resources for both employers and workers on the health hazards of silica dust and will be launching an awareness campaign in late 2023 with media ads throughout the state, including in LA County. During this past summer, Cal/OSHA identified employers throughout the state, with many in LA County that may have employees exposed to silica dust due to their work with natural or engineered stone countertops and sent them a [letter](#) outlining their obligations under existing Cal/OSHA regulations, provided links to educational resources, and informed them of how they can contact Cal/OSHA Consultations Services for free onsite technical assistance.

Training and Outreach Materials

At the start of the Pacoima Beautiful contract, Public Health lacked ready to use educational or training materials specifically for silicosis. Public Health staff collaborated with physicians, health educators, industrial hygienists, and subject matter experts to develop four trainings in Spanish, to prepare staff and outreach partners to increase their awareness and understanding of the disease, how to identify who is at highest risk, preventative measures to avoid contracting the disease, symptoms of silicosis, and guidance on actions to take if someone is experiencing symptoms of silicosis. For example, a training PowerPoint presentation was created using key content from the *Silica Exposure Training for the Cut Stone Industry* developed by Georgia Tech's Safety, Health, and Environmental Training Services group with funding from the U.S. Department of Labor. The training included worksite videos and focused on control measures of silica exposures in cut stone and stone fabrication facilities.

At the most recent training, Industrial Hygienists from Public Health provided detailed training on PPE, occupational safety and health concepts, and best practices. This detailed level of training allowed outreach staff to retain and communicate best practices to stone cutting workers and use terminology that is appropriate and familiar to them. This knowledge allows outreach workers to gain more credibility and trust when communicating with workers, which is highly valuable and necessary for workplace education. At a recent training, outreach workers also received information on health insurance enrollment opportunities from Northeast Valley Healthcare Corporation to educate staff on healthcare programs and providers available to them, and necessary qualifications for various healthcare insurance providers so that workers without a regular source of healthcare can learn how to apply for different options and obtain access to primary care.

Public Health has developed an outreach flyer co-branded with Pacoima Beautiful to use for general community outreach. This flyer is currently available in English and Spanish. Public Health has created a co-branded PowerPoint Presentation also developed in English and Spanish, that Pacoima Beautiful will use to give community presentations at various public locations to raise awareness about silicosis and provide information and healthcare resources to community members.

A recent study³ on silicosis patients in California states that nearly all affected workers are immigrants and therefore may not speak English as their first language. At this time, all the trainings and outreach materials developed by Public Health have been developed in Spanish and

English. As further outreach is conducted by Public Health and Pacoima Beautiful, we expect to learn more about additional language needs present among stone cutting workers so we can ensure they are receiving the best available guidance and health information in the language that is the most comfortable for them to understand.

If additional resources are identified, DPH plans to institute a broad and engaging multi-media, multi-lingual social and ethnic media strategy to raise community awareness of silicosis and provide education and resources to affected workers and their families across Los Angeles. The primary content of this campaign will be based on written recommendations to be supplied to Public Health by Pacoima Beautiful at the commencement of the contract in December. These recommendations will provide relevant community developed messaging and awareness building strategies to reach impacted communities and workers and their families with accurate, reliable, and trusted health information and resources. Public Health is planning to begin development of this strategy along with our partner CBOs in the coming months.

Prior to conducting outreach and education at worksites or facilities where engineered stone is being fabricated, comprehensive safety training for outreach personnel needed to be developed and provided. This training included instruction on the following topics: types of respirators, medical assessment for use of a NIOSH approved respirator, fit testing, proper training and instruction to don and doff protective gear, eye protection, and dust exposure mitigation strategies to be conducted after visiting a workplace where RCS may be present. With the expertise of Public Health industrial hygienists, PHC and Environmental Health staff, Pacoima Beautiful, UCLA LOSH staff and interns have all been advised and trained on how they can safely conduct outreach to workers in environments where RCS is present, and when access to these sites and workers is permitted.

Collaborative Efforts

UCLA LOSH student interns and staff are involved with supporting several silicosis outreach research projects with Dr. Jane Fazio, the leading pulmonary physician treating silicosis patients at Olive View - UCLA Medical Center, and one of the first providers in the state to sound the alarm about silicosis. The California Artificial Stone and Silicosis (CASS) Advanced Medical Monitoring study is a collaboration between CDPH and Olive View-UCLA Medical Center. The study aims to assess enhanced screening (chest CT and full breathing tests) compared to standard silica screening (chest X-ray and limited breathing test). The study also includes a detailed demographic, occupational, and medical history survey, and blood tests. The survey will be done by phone, and the medical testing (chest X-ray, CT scan, and bloodwork) will be done in person at Olive View-UCLA. Public Health nurses and staff are also providing information on this study as they conduct outreach to businesses, workers, and in the community. Additionally, Dr Fazio is leading a qualitative study in collaboration with UCLA LOSH which involves in-depth interviews with stone countertop workers and aims to understand worker perspectives on safety so as to identify areas for potential intervention.

Public Health has engaged with CDPH Occupational Health Branch (OHB) to receive current and up-to-date silicosis education materials and will communicate any findings specific to language needs or other information relevant to the development or distribution of additional education needs of workers that may be revealed while Public Health, LOSH and Pacoima

Beautiful outreach staff are engaging with the community. Public Health has distributed CDPH's silicosis prevention educational materials to Pacoima Beautiful, UCLA LOSH and other CBOs to disseminate in the community. Public Health PHC staff along with Liberty Hill Foundation staff meet with Pacoima Beautiful bi-weekly to review immediate challenges or needs they might be encountering in the field so that strategy adjustments or challenges can be addressed in a collaborative and urgent manner. This level of direct engagement is helpful to address the project needs on an expedited timeline and helps inform additional and future outreach activities being deployed by Public Health.

Public Health also coordinated with OHB to facilitate inclusion of County representatives into a state workgroup which was reviewing and preparing testimony to the Cal/OSHA Standards Board hearing in August where an Emergency Temporary Standard (ETS) regarding silica and silicosis prevention was being considered for further action. Dr. Nichole Quick, the Public Health Deputy Director for the Health Protection Bureau, provided testimony in favor of the ETS and a strengthened regulatory approach to help curb RCS exposure among workers. Public Health also worked with DHS and CDPH to amplify the State's CAHAN alert by disseminating a [LAHAN alert](#) broadly to healthcare providers and agencies across LA County alerting them to the increase of silicosis cases, symptoms, and the relevant relationship of this diagnosis to workers in the fabricated stone industry. Public Health is working with OHB and DHS to determine a process and protocols for local employers to connect with participating medical providers and facilities to identify locations where employers can send employees who are experiencing respiratory symptoms to undergo medical testing and be screened for silicosis in compliance with the existing Cal/OSHA regulations. At this time, if a worker is symptomatic, they are being advised to seek medical care from their current healthcare provider. If a worker does not have a healthcare provider, they may be referred to call 2-1-1 or access a systems navigator who can assist them in locating relevant services where appropriate services, including but not limited to, linkage to public assistance and social services programs, healthcare enrollment, and linkage to alternative employment opportunities can be provided.

Through the Public Health Councils program, Public Health maintains a coordinated working relationship with DCBA's Office of Labor Equity (DCBA-OLE) and has begun conversations to develop an outreach strategy to engage stakeholders and those peripherally connected to the stone industry, including but not limited to consumers, developers, contractors, interior designers, and relevant business owners. It is imperative that the burden of education not fall solely on workers; there are a spectrum of stakeholders involved in this issue and it will take a comprehensive approach including all involved to create solutions necessary to manage this public health threat. Public Health will begin training DCBA staff who conduct regular outreach and education to workers and employers on silicosis so they have the knowledge and skills to speak to their target population during regular engagements and will provide DCBA with handouts and resources to share with DCBA's Office of Immigrant Affairs (OIA) who can then share this information with local CBOs they contract with who may also be interfacing with members of immigrant communities that work in the stone fabrication field. DCBA will coordinate with local foreign consulates to disseminate information on the County's behalf to people who utilize their services. DCBA has invited Public Health to present on silicosis at existing community meetings in SD1 where they will be providing other information about county regulations and protections available to workers and community members. Additionally, DCBA-OLE conducts annual one-on-one outreach to businesses in the five supervisorial

districts; informational handouts will be disseminated to employers during those outreach efforts. Disseminating information is at the core of prevention, hence, even when a business does not fit the description for this type of job or industry, often workers have family members they can share these educational materials. Further, OLE's workers.lacounty.gov website can serve as a platform to inform the community on the effects of this disease.

Public Health has begun conversations with DEO to discuss opportunities to provide information and counsel workers that cut or fabricate engineered stone products who wish to explore alternative employment opportunities that present less exposure to RCS and lower risk of occupationally acquired silicosis. Possibilities include but are not limited to eligible workers receiving educational training and opportunities through America's Job Centers, which have multiple locations around LA County, and also exploring the possibility of holding a job and education fair locally in the San Fernando Valley for community members and workers to attend to learn more about other fields of employment with less exposure to RCS. (DEO outreach plans are discussed in more detail below.) A recent study³ reported that among 52 diagnosed cases of silicosis in California, almost half, 48%, of those patients self-reported they returned to cutting and fabricating engineered stone countertops *after* receiving a silicosis diagnosis. This information indicates there may be a lack of awareness and limited employment opportunities available to workers thus preventing them from leaving a trade that is likely exacerbating and accelerating their illness. Communications are underway to determine what this process could look like and identify the resources necessary to execute such activities. There is also a need to identify and recruit potential partners and supporters to be involved with these efforts.

Public Awareness

Public Health developed a silicosis awareness page on our website, available at <http://ph.lacounty.gov/silicosis/> that offers information and resources to workers, businesses, and the general public. The website provides connections to services and educational materials that may be useful for both workers and employers in the engineered stone industry and will link to resources available through DEO and DCBA.

Public Health and DHS have also worked with partners and the media (e.g., Los Angeles Times, LAist) to raise awareness among consumers about worker safety and knowledge about workplace practices that contribute to silicosis to ensure greater consumer information about the industry and choices in the marketplace. These initial efforts can be expanded upon to help influence consumer behavior as a way to inform business practices.

Public Health is also working with CEO Legislative Affairs and Intergovernmental Relations and DHS to provide a legislative briefing for local elected officials to increase awareness of this public health issue in LA County.

Next Steps and Recommendations for Directive 2

Outreach and education needs related to silicosis prevention will be ongoing and are likely to increase over the next decade coinciding with the predicted increase of silicosis cases in Los Angeles County.

We recommend that resources be identified to allow Public Health to extend contracted community engagement efforts beyond December 2023. This would allow community partners such as Pacoima Beautiful to continue efforts to raise awareness of silicosis and RCS prevention strategies for workplaces. There has been a significant investment of time and training over the past three months, and it would be highly beneficial to continue that momentum into 2024. Public Health will extrapolate content from Pacoima Beautiful written recommendations (expected December 2023) to develop a social and ethnic media campaign to increase community awareness of silicosis and encourage stone cutting fabricators to seek medical care if symptomatic.

Public Health will continue to conduct initial outreach to engage business owners and workers and provide education and technical assistance to prevent RCS exposure to the estimated 285 stone cutting facilities across Los Angeles County. This effort will be ongoing until all locations have been contacted by Public Health personnel.

While the County is aware of the approximately 285 cut stone facilities across the county per Cal/OSHA Section 5203, Carcinogen Report Use Requirement, we have learned there are a spectrum of business types operating that cut and fabricate engineered stone in Los Angeles ranging from larger, fully-equipped facilities and small “mom and pop” operations to single owner/operator businesses, to those working “under the table” and not registered with the State, or possibly operating without any permits or licensees. In smaller shops there may be less understanding, willingness, or ability to comply with health and safety protocols for reducing exposure to RCS, and there could be significant education required for these employers to get into compliance. It is important that DEO, Public Health, and other agencies identify effective strategies to access smaller operations and workers to learn what barriers exist that are preventing compliance with required safety protocols and use of personal protective equipment. With this information, DEO and Public Health can work collaboratively with the State to seek out appropriate resources and education to then share with employers and workers to increase compliance and reduce exposure to RCS. Public Health, DEO, and other partners will continue to work with the State to share knowledge of businesses in the sector and on outreach activities.

The emerging issue of silicosis has additionally highlighted a need for targeted mental health resources, materials, and supports for patients diagnosed with silicosis and their families. Notably, a patient with silicosis described to Public Health staff the enormous mental and emotional toll this disease exacted on him and his loved ones during the period of his diagnosis, surgery, and rehabilitation. The disease also impacts the families who care for sick loved ones during their progressive illness and the bereaved families left behind who require mental health support. Watching someone decline over time from an incurable illness can be extremely stressful, especially where there is little that can be done to help comfort a patient through their suffering.

Given the potentially fatal and progressive nature of silicosis, there is a need to identify and train mental health professionals and develop resources and support materials for individuals diagnosed with silicosis and their families, including the development of mental health resources for children who are faced with losing a parent or caregiver. Developing and providing mental health resources to patients and their families will be vital to both personal and community

healing as well as the need for material support for families that experience financial challenges from the loss of a primary income earner.

Directive 4

Options to Ban Engineered Stone Products in Los Angeles County

Scope

DPH, in consultation with County Counsel, DCBA, DEO, and other partners considered options to ban the sale, fabrication, and installation of silica fabricated stone in Los Angeles County. Any ordinance regarding silicosis and a ban on engineered stone products passed by the Board of Supervisors would be limited to the unincorporated areas of Los Angeles County unless and until such an ordinance is adopted by an incorporated city.

Initial Considerations

In response to the rising cases of silicosis among workers handling engineered stone in the County, local and state authorities are actively working to address this issue. The initial focus should be on minimizing the risks associated with working with engineered stone through implementation of effective safety measures. The consideration of a potential ban on engineered stone products should be explored more fully if compliance doesn't improve or preventive measures prove ineffective. If the Board were to consider a ban, it would require close collaboration between local and state governments to develop a comprehensive framework for evaluating workplace health and safety compliance, as well as the effectiveness of protective measures.

Current Efforts to Strengthen Regulatory Safety Measures to Protect Workers

Current efforts to ensure effective safety measures are in place include proposed regulatory changes to the Cal/OSHA silica standard. Since the Board's motion was adopted, the California Occupational Safety and Health Standards Board approved a petition on July 20, 2023, by the Western Occupational and Environmental Medical Association (WOEMA) for Cal/OSHA to develop an emergency temporary standard (ETS) to address concerns that the current silica standard fails to adequately protect workers. In keeping with the Board motion directives to identify stronger regulatory measures, and as noted above, Public Health's Deputy Director spoke in favor of granting this petition at the July 20 hearing. The petition recommended the ETS cover high silica content engineered stone, control access to fabrication areas, prohibit dry fabrication, and improved respiratory protection. Cal/OSHA agreed that an ETS with a prescriptive approach would be more effective, especially for smaller businesses. If implemented promptly and effectively, inspections could result in reduced exposures and silicosis cases, but noncompliance may lead to a recommendation to prohibit engineered stone products in California by July 2024.

Benefits of a Ban on Engineered Stone

Overall, a ban on engineered stone could be a proactive step toward prioritizing worker safety and health. It would likely have broader implications for industry practices, standards, and could lead to long-term improvements in both occupational health and safety and product development. Implementing a ban on engineered stone could have the following implications:

- *Worker Safety and Health:* A ban would primarily protect workers from the health risks associated with engineered stone. This would reduce the likelihood of silicosis and related health issues as well as premature death and disability.
- *Reduced Health Care Costs:* Preventing cases of silicosis and related illnesses could lead to reduced healthcare costs for the County (patients with silicosis often require lung transplants with costs that exceed a million dollars) and other safety net providers, covering expenses related to diagnosis, treatment, and long-term care for affected individuals.
- *Improved Quality of Life:* The ban would contribute to the betterment of workers' lives and their families by preventing debilitating health conditions.
- *Industry Transition and Economic Impact:* The ban would necessitate a shift away from engineered stone, potentially impacting manufacturers and suppliers in the industry. This may lead to shifts in market dynamics and affect jobs and economic activity in the short term.
- *Influence on Industry Standards:* A ban in unincorporated areas of the County could set a precedent for broader county and industry wide changes. It may encourage manufacturers to invest in research and development for safer alternatives and lead to the adoption of more stringent industry standards.
- *Compliance and Enforcement:* The ban would require mechanisms for monitoring and enforcing compliance, potentially involving inspections, penalties for non-compliance, and ongoing education and training for contractors and workers.
- *Environmental Considerations:* Depending on the alternative materials chosen, there may be environmental implications. This includes assessing factors like extraction, transportation, and waste management.
- *Potential for Innovation:* The ban could stimulate innovation in the development of safer materials and technologies in the construction industry, benefiting both worker safety and environmental sustainability.

Stakeholder Engagement

Public Health, along with staff from DEO, DCBA and DPW, met with both labor and business representatives to hear their concerns and suggestions related to the alarming increase in silicosis cases among engineered stone fabrication workers in Los Angeles County. The goal of these sessions was to receive feedback about the impact of a potential ban on the sale, fabrication, and installation of engineered stone products, understand potential barriers to implementing safety

protocols, and discuss the proposed recommendations for alternative products. At these listening sessions, Public Health physicians provided brief presentations on the health impacts and status of silicosis and the dangers of RCS exposure of encountered by workers that cut or fabricate engineered stone products. Stakeholders were presented with several discussion topics which included foreseeable impacts of how a ban on the sale, fabrication, and installation of engineered stone in LA County would impact workers and industry, alternative products available on the market that present less health risks to workers, and an opportunity to share their ideas about how the County can best reach impacted employers and workers with silicosis prevention education materials.

Both labor and business representatives nearly universally expressed support for the County's goal of protecting workers and improving education, training, and enforcement efforts to ensure all actors in the industry are abiding by safety standards. There were, however, substantial concerns expressed that a product ban would be counterproductive and would not be the most effective means to curb the increase of silicosis among workers. Business and labor groups embraced approaches focused on education, training, enforcement, regulation, registration or certification of businesses, and collaboration.

Labor Feedback

Labor representatives communicated that imposing a ban would not solve the issues of increased cases of silicosis nor address the concern that workers aren't being supplied proper tools or PPE by their employers. They contend that a ban would only serve to drive the industry further underground where "bad actors" would continue operating in the shadows exacerbating the problem. Lack of enforcement in the industry is also a challenge. Skilled tradespeople in the construction industry who are represented by a union receive regular training and education on current safety regulations and standards to handle materials that contain silica. On the other end of the spectrum are tradespeople that are not properly trained or supplied with the correct education, information and equipment. Enforcement is inconsistent and limited to ensure business operators are following mandatory Cal/OSHA safety regulations. Public Health representatives had the opportunity to attend a silicosis prevention training at the invitation of one of the participating unions to allow staff to experience firsthand the degree of training afforded to union-represented workers. This experience provided insight into the type of resources and training necessary to ensure workers that handle products containing silica are properly educated about the health risks of exposure to RCS and understand the safety protocols, PPE, engineering and administrative controls that must be implemented to cut and fabricate engineered stone safely.

As noted in DPW's and ISD's [July 25, 2023](#) report to the Board, union representatives were equally concerned with how other occupational health and safety threats, in addition to silicosis, are tracked and addressed in the county and what mechanisms are in place for the county to assess, monitor and rank these worker threats to public health. They identified a need for more comprehensive data collection and management among county and state entities involved in various capacities for surveillance of workplace illness, injuries, and deaths across the jurisdiction. One area noted for opportunities in the future to collaborate include leveraging existing local enforcement agreements that are already in place among labor organizations and

the county. Representatives advised that mechanisms to develop a compliant or registry based regulatory scheme should be explored.

Worker advocates also lamented there are significant issues related to short staffing within Cal/OSHA and the vacancy rate among inspectors responsible for policing such a large jurisdiction makes enforcement a significant challenge to addressing this situation. The worker advocates also advised that recent proposed changes to the ETS for silica would only be effective through strict compliance and enforcement.

Business/Industry Feedback

Business representatives shared concern for the increase of silicosis cases in California and committed to helping in education efforts with other stakeholders, including sharing health and safety training and guidance materials accessible for reference. Business and industry representatives present largely agreed with the notion that there should be bans on some practices related to the processing of engineered stone products such as a ban on dry cutting, dry polishing, and dry grinding. Moreover, a licensing/registration scheme or certification process was put forward as a recommendation to ensure that only authorized entities/individuals can procure and process these products to prevent parties without the proper means to follow Cal/OSHA regulations from accessing the product legally.

Public Health learned that some manufacturers acknowledge the dangers from exposure to RCS generated by cutting and fabricating engineered stone and therefore produce lines of engineered stone countertops that contain a lower silica content of below 40%. Manufacturers contend these products present less health risk to workers, however this contention has yet to be scientifically corroborated.

Industry representatives expressed concerns about the effect that a ban may have on delaying or halting needed housing development in Los Angeles and raised concerns about the extent of a ban in relationship to other construction materials or industrial products containing silica. Furthermore, concerns were raised that a product ban would push industry and jobs into neighboring jurisdictions just outside of unincorporated LA County or out of LA County entirely. Business representatives expressed agreement with the need for increased enforcement and there seemed to be backing for a higher level of inspection fees to support such efforts. They also offered to and did share their respective catalogs of training and educational resources broadly to workers and employers.

DEO Outreach and Engagement Plan

Directive 4 of the Board's motion directed DEO to look at an outreach and engagement plan that provides the following:

- 1) Guidance to businesses who might be affected by the ban of sale of silica engineered stone in unincorporated LA County, including grant, loan and technical assistance, as well as outreach to transitioning businesses for worker-ownership opportunities, and rapid*

reemployment and training; and 2) Support for workers for rapid reemployment and training opportunities.

DEO's Outreach Plan

Outreach Plan Overview

Worker Outreach: As discussed above, Public Health has partnered with [Pacoima Beautiful](#) to conduct initial outreach to workers to better understand effective strategies and messaging for protecting workers. DEO is coordinating with Public Health to incorporate providing resources from the County's job centers (AJCCs), DEO's Office of Small Business (OSB) and other applicable partners to DPH/Pacoima Beautiful. This may include having OSB and/or AJCCs engage with Pacoima Beautiful and DPH on worksite visits as needed. The most relevant County AJCCs, given the geographic concentration of known stone fabricators, are the following: (1) Northeast San Fernando Valley AJCC and (2) Santa Clarita AJCC. However, other County AJCCs can be activated depending on business location.

Business Outreach: As mentioned, Public Health already has a business list from the State (Cal/OSHA) of approximately 285 business entities that use silica. The most concentrated area of businesses is in the San Fernando Valley. Public Health has engaged in initial outreach to these 285 businesses, including in-person visits to more than 100, as discussed above. Also as noted earlier, Cal/OSHA continues to develop education resources for employers and workers on the health hazards of exposure to silica dust and conduct outreach to businesses; later this year Cal/OSHA plans to launch an awareness campaign with media ads throughout the state, including LA County.

To complement and support this outreach, OSB will convene relevant stakeholders to discuss and coordinate additional outreach strategies. It is anticipated this group would meet monthly and consist of representatives from DEO OSB, DPH, Pacoima Beautiful, the Carpenter's Union (which operates the Sylmar Training Center), relevant County AJCCs and industry trade groups (e.g., the Natural Stone Institute). These convenings would accomplish the following:

- Build on existing State and DPH-led outreach and learnings to date.
- Help ensure coordinated outreach and information that minimizes repeat contacts to the same businesses and workers.
- Identify additional target businesses that may require outreach beyond the list already provided by the State.

In addition, should the Board decide to implement a ban and more intensive resources are needed to help impacted businesses and workers transition, DEO is prepared with a list of available programs and supports, which include the Rapid Response program when mass layoffs and business closures are unavoidable (operated out of three County AJCCs) and the Layoff Aversion programs (operated by the Los Angeles Economic Development Corporation, which tries to reach and support businesses before they have to conduct mass layoffs or closures).

Resources for Businesses and Workers

Specific Resources for Businesses

1. Education Materials for Silica Safety

- [Silica Safety Resources for Stone Fabricators from the California Department of Public Health](#)

2. Capital resources (primarily loans) and Consultative Services

The County provides resources that assist businesses with purchase of safety equipment to make conditions safer or for adjusting operations. These resources include:

- [SBA small business loans](#)
- [Community Development Financial Institutions](#)
- [California's IBank](#) (IBank's Small Business Finance Center features a loan guarantee program designed to assist small businesses that experience capital access barriers)
- [Project Equity](#) provides no-cost information and consultation for businesses to transition to employee ownership

3. Reducing Labor Costs (i.e., payroll reduction resources)

- Employment Training Panel (ETP) – this is a state program run via local partners that offers funds for no-cost training and is specifically geared towards manufacturing businesses with existing trainings on OSHA compliance, hazardous waste and more.
- [Work Sharing](#) – this is a state program that allows businesses to reduce staff hours (thus saving on payroll costs) while allowing those workers to simultaneously collect partial unemployment insurance (UI) to make up the gap.
- Customized Training - the County's job centers (AJCCs) provide subsidies to help a business develop new training programs that focus on new production technology, service procedures or green technology that requires upskilling and retraining of employees.
- Incumbent Worker Training - This program is designed to assist employers in upgrading the skills of their workers to maintain a quality workforce and avert the need for layoffs.

4. Other small business resources

- [DEO's Office of Small Business](#) – DEO's OSB can help with 1:1 counseling, workshops, referrals for legal services, financing assistance, certification help, preference programs for County contracting and more.
- [Small Business Development Center](#) – The SBDC, which operates via the federal U.S. Small Business Administration and with partial funding from the Governor's Office of Business and Economic Development, offers a wide array of resources to small businesses in transition, ranging from help with financing, re-training and more.

Specific Resources for Workers¹

1. Rapid Reemployment and Training

¹ A note that there are often specific eligibility requirements for all government aid programs. This includes an applicant's citizenship, age, income, resources, assets and other factors.

- The County's job centers (AJCCs) are available to provide workers with information about existing re-employment and training opportunities.
- Aid ranges from job search assistance to direct pairing of workers with available training and upskilling opportunities that allow workers to find both lateral or promotional opportunities.

2. [DCBA's Office of Immigrant Affairs](#)

- This County team provides tailored assistance to the County's diverse immigrant populations.
- Resources include help navigating government assistance for food, healthcare, cash assistance, housing, transportation and education and employment resources.
- This can be an excellent "first stop" in helping immigrant Angelinos navigate the many kinds of governmental and non-governmental aid available to them, which often depends on legal immigrant status.
- **[Los Angeles Worker Center Network](#)**
"<https://www.laworkercenternetwork.org/>"
- Los Angeles is home to many worker centers, which attempt to reach and meaningfully serve our state's most marginalized job seekers.
- These centers develop partnerships with other human service providers (e.g., healthcare clinics, housing, immigration attorneys) to secure additional supportive services necessary to remove barriers to employment and develop collaborations and partnerships with other education and training providers (e.g., universities, community colleges, nonprofit training providers, public school districts) to provide members with job training opportunities; develop mechanisms (e.g., certificates) through which low-wage worker skills are recognized.

3. [Rapid Response*](#)

If the Board were to consider adopting a ban on engineered stone products that impacted businesses, the County provides rapid response resources:

- This County-run program is a proactive, business-focused program designed to assist companies facing potential layoffs or plant closures.
- The County's Rapid Response teams can provide information on payroll reduction programs (discussed above) and assist with affected workers by providing aid like career counseling and job search assistance, resume preparation and interview skills building, unemployment insurance assistance, and other education and training opportunities.

4. [Food, Healthcare and Cash Assistance](#)

- DPSS operates some of the largest aid programs in the County that can support workers and their families, including CalFresh (food assistance), Medi-Cal (health insurance) and CalWORKS (cash assistance for both single adults and families for help with housing, food and other necessary expenses).

5. [Mental Health Assistance](#)

- The County Department of Mental Health provides counseling and support, including a 24/7 Help Line.

Next Steps and Recommendations for Directive 4

In light of feedback from labor and the business sector that does not favor a ban that would only apply in unincorporated parts of the County, the following recommendations are focused on near term actions to reduce the burden of illness and death from silicosis.

Awareness and Outreach

- Existing county programs that provide information and resources can continue to be utilized to include education and create awareness among stakeholders as discussed above.
- DEO can provide education and outreach to workers on re-employment and training opportunities and rapid response and partnering departments can provide assistance with public benefits and mental health resources.
- Enhanced consumer and public awareness efforts would be beneficial for exerting market pressure on businesses to adopt and comply with strengthened safety standards, with the State best positioned to conduct awareness activities statewide given their planned media awareness effort.

Ensuring Employer Compliance

- The County should continue to participate in Cal/OSHA's process of developing an ETS to improve workplace safety standards on silica. Public Health and partners will continue to urge strengthened standards that require more frequent screening of workers, higher efficiency respirators, a blanket ban on dry cutting, and require safety protocols to be taken regardless of the permissible exposure limits (PEL) in a given workspace (as is the threshold for using specific controls currently).
- Advocacy is needed to secure additional resources for State regulatory enforcement activities as well as worker outreach activities, particularly for heavily impacted areas such as LA County. Public Health, in collaboration with DEO and DCBA, can continue to coordinate with the State on outreach efforts.
- Public Health will continue to reach out to businesses on the Cal/OSHA list that have received a letter mandating their enrollment in Cal/OSHA Occupational Carcinogen Control Unit reporting the use of RCS, as required by section 5203 "Carcinogen Report of Use Requirements."
- Regulatory agreements and relationships between the County and labor organizations can be explored as means to increase awareness of compliance among operators doing business with the County.
- Business and industry are encouraging a licensing/certification regime where engineered stone products are tightly controlled and regulated among operators that can prove they are sufficiently able to meet or exceed safety controls and limit RCS exposure. This strategy should be explored further to weigh economic consequences to smaller operators against the public health need to highly control access and use of a toxic product while considering the ease of accessibility to engineered stone imports from other nearby counties or states.

Protecting Workers

- Worker education and engagement needs to be a priority, especially for workers that are independent contractors or involved with smaller business operations. Workers need to be educated about silicosis, PPE, and for those who are ill, knowing where to go for screening and treatment.
- Gathering resources and identifying training opportunities for workers that are in the highest risk is currently in progress. Further resources will be required to fully execute any job retraining program.
- Additional opportunities to be explored include identifying resources to support a worker center in the San Fernando Valley and funding streams to support workers who have uncompensated care.

Conclusion

Public Health in collaboration with departmental partners will continue to keep your Board updated on developments related to silicosis prevention and outreach activities and efforts to strengthen regulatory standards. If you have any questions or need additional information, please let me know.

BF:TR:NQ

c: Chief Executive Officer
Executive Officer, Board of Supervisors
County Counsel
Department of Economic Opportunity
Department of Consumer and Business Affairs
Department of Health Services
Department of Mental Health
Department of Public Social Services