



## *December 2021 Newsletter*

### From the President's Perspective:

At our November meeting on the 15<sup>th</sup>; the presenters from UB EHS were quite on point. Dr. Dave Pawlowski did an excellent job detailing the efforts that UB as a Campus have been executing to confront the COVID pandemic. For those who were not at the meeting; it was an intensive and exhaustive effort, physically and mentally. Dr. Pawlowski detailed how the UB EHS team met the challenges of managing Occupational Safety requirements; conducted a screening program for students leaving the Campus in 2020, conducted an orderly shutdown of critical processes (research experiments in laboratories) and the decision process regarding which operations were deemed essential. Whew! Just writing this description leaves me wanting to take a nap! Kudos to the staff of UB EHS; they managed a task worthy of the Labors of Hercules!

***Based on the recent decisions and proclamations of the Erie County, NY Executive regarding the direction of COVID statistics going in the wrong direction, and the return of the Mask Mandate, we are going to conduct the rest of the Chapter Year's meetings virtually until further notice.*** This is not a decision we wanted to make; it may be the best one for the short term. Thankfully, we were able to do some in-person meetings (I really liked meeting the attendees and getting to interact with other Safety Professionals in person!) and make use of the Meeting House in the Village of Williamsville. It proved to be a viable venue and may be used in the future.

One thing about leadership, you learn that success is not all about YOU, it's about the success of the Organization. By going virtual; we can remove a lot of personal philosophies from the mix, avoid spreading COVID (assuming we had asymptomatic attendees), and conserve Chapter Resources. One huge advantage is that we can also reach more Members who are geographically spread out, we avoid Members driving in WNY winter weather (I'm writing this on December 8, there is snow outside and it will be with us until about March.), and Members who chose to limit their attendance at gatherings can attend. We had good attendance virtually in September. Look for Meeting Notices starting in January; we will take a hiatus in December to allow our Members to focus on Holiday Season activities with Family and Friends.

Now, on to my rant of the Month. As I write this, it's the day after the US District Court of the Southern District of Georgia, Atlanta Division issued an order staying the Federal Contractor Mandate nationwide. That means all 3 of the vaccine mandates issued by the Federal Government that affect the public at large have been stayed by judicial order. The OSHA ETS is on hold, the CMS mandate is on hold, the Federal Contractor mandate is on hold. The mandate that Federal Government employees get vaccinated still is standing. The courts made the right decisions regarding the rationale behind the stays. For more information, it is worth reading the pleadings and the court's decisions.

First, I will state that I am neither pro- or anti- vaccine or mask. That decision should be made by each person; what we, as Safety Professionals need to do is give people ACCURATE and UNBIASED information regarding hazard control. Remember the Hierarchy of Controls? I certainly hope we are all familiar with that basic concept that should guide decisions in recommending hazard control!



Engineering and Administrative controls are ranked higher than PPE for a reason. If you are familiar with respiratory protection programs, just look at people wearing a common medical face covering (that's what they are technically termed); are people consistently wearing it correctly? The medical face covering has significant leakage around all sides; they were never designed to fit tightly. Have you seen males wearing a filtering facepiece respirators, like an N-95, who have facial hair (in some cases, a lot of facial hair like Billy Gibbons or Dusty Hill of ZZ Top) that interferes with the seal? How effective do you think that respirator is? For that matter, what happened to Social Distancing? If my recent trips to local merchants is any indication, people (people who are not close family or friends) don't attempt to maintain adequate distance from each other. Ventilation and Distancing perform hazard control by removing or allowing airborne contaminants to settle out before they reach you. Neither requires extensive input by you to be effective at controlling the hazard.

Regarding vaccine mandates; these were bound to fail, even if they had not been stayed by the Courts. From a psychological perspective, we Safety Professionals found that **forcing people to do something they don't want to do, did not work**. The old "Safety Cop" mentality was counterproductive; draconian enforcement of safety rules resulted in miserable acceptance and fierce resistance to those rules. We spent a lot of resources trying to enforce the rules and became the most hated people in the organization. What a recipe for success! When we critically examined strategies that worked to achieve compliance; *education* (true presentation of facts in an unbiased, emotion-free manner) *convinced* adults that our recommended approach to hazard control would work. Employees soon found they were complying with the policy; if not willingly, at least with the realization it was for their own good.

Listening to the politicians and medical professionals lecturing on the benefits of the m-RNA therapeutics (let's call the "vaccines" what they really are), leaves me questioning their actual motivation. There is enough evidence that these injectable therapeutics may have significant side effects that are more frequent than what the media campaigns lead us to believe. Not to mention that they may have limited effectiveness against the COVID variants that are now emerging; what was initially thought to be wholly effective with 2 injections has now been extended to 3. In my humble opinion (I'm not a medical professional.), whether or not you get the injectable therapeutic, should be between you and your doctor. Your doctor knows your personal medical history and can facilitate your decision to get injected or not. Would it help or harm? Consider there is no undoing what was injected in to your body. What are the long term effects? Thorough research? Are they a therapeutic that should be administered in the local drug store on a walk-in basis? Or administered in the clinical setting they were meant to be?

The social and economic cost of mandates is just beginning to manifest its effects on society; healthcare workers who are no longer employed and skilled employees of all types leaving the workforce with no replacements in the pipelines. Organizations are losing capacity and efficiency. Some people are exiting the workplace with no replacement income or job lined up. That cannot bode well for our future social and economic stability. Our social fabric has been torn in a way that will take years to mend. Did we really want that to happen? Were those consequences anticipated? We need to face a new reality; regardless of its origin, regardless of the social implications, COVID is with us to stay. What we need to do is learn to accept that fact and rationally implement hazard controls. We can do it without destroying the Constitutional Republic and civil society we live in.