A story of

NIOSH-Funded Program and Stakeholders Work to Prevent Falls from Temporary Wooden Platforms on Bridge Decks

In 2012, falls were the leading cause of work-related fatal injuries in the construction industry in the United States.¹ In New Jersey between 1999 and 2012, 51% (n=160) of the 315 work-related fatal injuries that occurred in the construction industry were due to falls.² Serious injury and death from falls can be prevented.

The New Jersey Fatality Assessment and Control Evaluation (NJ FACE) Project—funded by the National Institute for Occupational Safety and Health (NIOSH)—in the New Jersey Department of Health investigates work-related fatal injuries. In 2007, the NJ FACE Project investigated a fatality in which a worker died after falling through a temporary wooden catch platform, 75 feet to the ground. The incident occurred in 2007, during a bridge renovation project on a major roadway in New Jersey. The victim, a 26-year old construction worker, stepped onto a wooden "catch" platform (designed to catch falling debris from the bridge construction), which broke under his weight.

Following this fatality, in 2009, the Occupational Safety & Health Administration (OSHA) issued a *Letter of Interpretation* that these temporary wooden Bridge deck construction with wooden catch platforms. Photo credit: C. Frank Starmer and Sparky Witte from http://oldcooperriverbridge.org

Relevant Information

- Catch platforms are considered scaffolds and must comply with OSHA 29 CFR 1926 Subpart L.
- In any construction job, fall protection equipment must be provided to all employees working at heights of 6 feet or greater.
- Critical to the safety of the workers, wooden platforms should be designed and installed such that individual planks remain sound.
- Incorporating health and safety language into bid specifications for contractors can help promote a safer workplace environment.



Follow NIOSH on Facebook, Twitter, and Instagram Sign up for eNews at cdc.gov/niosh/enews "catch" platforms are considered scaffolds and must comply with 29 CFR 1926 Subpart L (OSHA's Scaffold Standard).³ Therefore, "wooden planks on any temporary platform must be capable of supporting, without failure, its own weight and at least 4 times the maximum intended load applied or transmitted to it."

In 2014, the NJ FACE Project published a workplace fatality alert titled, "FACE Facts: Two Construction Workers Fall to their Death through Temporary Wooden Bridge Platforms" for the National Falls Campaign.⁴ The alert contains data on construction fatalities in NJ, presents two case studies, and provides specific recommendations for prevention. The alert was reviewed and approved by the Center for Construction Research and Training (CPWR) and the NJ Health and Safety Laborers' Fund.

Impact

A group of stakeholders from industry, labor, and government developed specific recommendations regarding the use of graded lumber and the incorporation of a plywood/ sheeting overlay on the planks to provide the minimum weight protection as required by OSHA. These recommendations were adopted by the New Jersey Turnpike Authority in 2009, and incorporated as contract language specifications for temporary catch platforms for contractors bidding on new bridge construction, deck reconstruction, or bridge deck repair projects. Putting these changes into practice will create a safer work environment for workers.

The aforementioned *NJ FACE Facts* was posted on OSHA's National Safety Stand-Down To Prevent Falls in Construction website for the 2014 Stand-Down event. The Stand-Down is an event designed for employers to set aside time to discuss safe-ty with their employees.⁵ The 2014 Stand-Down focused on fall hazards and fall prevention; approximately one million workers and 25,000 businesses participated.⁶

For more information about the National Institute for Occupational Safety and Health (NIOSH) FACE Program visit www.cdc.gov/niosh/face/. To learn about the NJ FACE Project, visit www.nj.gov/health/surv/face/index.shtml.

For a complete list of references, see www.cdc.gov/niosh/docs/2015-190/.

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