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CENTERS FOR DISEASE CONTROL AND PREVENTION
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convenes

WORKING GROUP MEETING

ADVISORY BOARD ON
RADIATION AND WORKER HEALTH

WORKER OUTREACH

The verbatim transcript of the Work Group Meeting of the Advisory Board on Radiation and Worker Health held at the Marriott Airport Hotel, Cincinnati, Ohio, on Feb. 1, 2008.

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TRANSCRIPT LEGEND

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-- (sic) denotes an incorrect usage or pronunciation of a word which is transcribed in its original form as reported.

-- (phonetically) indicates a phonetic spelling of the word if no confirmation of the correct spelling is available.

-- "uh-huh" represents an affirmative response, and "uh-uh" represents a negative response.

-- "*" denotes a spelling based on phonetics, without reference available.

-- ^/(inaudible)/ (unintelligible) signifies speaker failure, usually failure to use a microphone.

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P R O C E E D I N G S

(9:30 a.m.)

WELCOME AND OPENING COMMENTSDR. CHRISTINE BRANCHE, DFO

1 **MR. GIBSON:** My name is Mike Gibson. I'm
2 the Chair of the Worker Outreach Work Group.
3 With us in attendance here today --

4 **DR. BRANCHE:** If you'll let me? You're
5 stealing my thunder.

6 This is Christine Branche. Can
7 everyone on the phone hear me?

8 **DR. MAURO (by Telephone):** Yes.

9 **DR. BRANCHE:** Okay, great.

10 As you heard Michael Gibson, he's the
11 Chair of the group. I'd like to make certain
12 that we have the Board members who are on, so
13 let me just do this. Josie Beach?

14 **MS. BEACH:** Here.

15 **DR. BRANCHE:** Phil Schofield?

16 **MR. SCHOFIELD:** Here.

17 **DR. BRANCHE:** Wanda Munn?

18 **MS. MUNN:** Here.

19 **DR. BRANCHE:** Are there any other Board
20 members who are on the phone?

1 (no response)

2 **DR. BRANCHE:** Okay, we don't have a quorum
3 of the Board, so we're doing well.

4 NIOSH staff, would you please
5 introduce yourselves?

6 **DR. WADE (by Telephone):** This is Lew Wade.

7 **MR. HINNEFELD:** Stu Hinnefeld from NIOSH.

8 **MR. ELLIOTT:** Larry Elliott from NIOSH.

9 **MS. BURGOS (by Telephone):** Zaida Burgos
10 from NIOSH.

11 **MS. BREYER:** Laurie Breyer from NIOSH.

12 **MR. JOHNSON:** J.J. Johnson, NIOSH.

13 **DR. BRANCHE:** And I didn't introduce myself.
14 I'm Christine Branche. I'm functioning as
15 your designated federal official today, and
16 I'm also with NIOSH.

17 ORAU staff, Dr. Makhijani?

18 **DR. MAKHIJANI:** I'm SC&A.

19 **DR. BRANCHE:** Oh, you're SC&A. Forgive me.

20 ORAU. Do I have any ORAU staff on the
21 line?

22 (no response)

23 **DR. BRANCHE:** SC&A.

24 **DR. MAURO (by Telephone):** This is John
25 Mauro. And let me extend my apologies. I was

1 at the airport about an hour ago, and my
2 flight was canceled. And it was impossible to
3 get in at a decent time, so I'm back home. So
4 my apologies for not being there.

5 **DR. BRANCHE:** We're glad you're all in one
6 piece and participating by phone.

7 **DR. MAKHIJANI:** Arjun Makhijani, SC&A.

8 **MS. DeMERS (by Telephone):** This is Kathy
9 Robertson-DeMers, SC&A.

10 **DR. BRANCHE:** Are there any other federal
11 agencies --

12 **MR. ELLIOTT:** Go to ATL, if you would.

13 **DR. BRANCHE:** Okay, ATL?

14 **MR. McDOUGALL:** Vernon McDougall from ATL.

15 **MR. KOTSCH (by Telephone):** Jeff Kotsch,
16 Department of Labor.

17 **MS. ADAMS (by Telephone):** Nancy Adams,
18 Christine.

19 **DR. BRANCHE:** Thank you.

20 **MS. HOMOKI-TITUS (by Telephone):** This is
21 Liz Homoki-Titus with HHS.

22 **MS. HOWELL:** This is Emily Howell with HHS.

23 **DR. BRANCHE:** Any other federal agency staff
24 on the phone?

25 **MS. CHANG (by Telephone):** Chia-Chia Chang,

1 NIOSH.

2 **DR. BRANCHE:** Are there any petitioners or
3 their representatives on the phone who would
4 like to identify themselves?

5 (no response)

6 **DR. BRANCHE:** Are there any workers or their
7 representatives who are participating by phone
8 who would like to identify themselves?

9 (no response)

10 **DR. BRANCHE:** Are there any members of
11 Congress or their representatives on the
12 phone?

13 (no response)

14 **DR. BRANCHE:** Are there any others who would
15 like to mention their names for the call?

16 (no response)

17 **DR. BRANCHE:** Please understand that
18 everyone who mentions their name will have
19 their name appear in the transcript for this
20 meeting. We will go by the redaction policy
21 that has been discussed. I have to read this
22 to you.

23 Our policy on redaction is as follows:
24 "If a person making a comment gives his or her
25 name, no attempt will be made to redact the

1 name from the meeting transcript. NIOSH will
2 make reasonable steps to ensure that
3 individuals making public comment are aware of
4 the fact that their comments, including their
5 name if provided, will appear in a transcript
6 of the meeting posted on a public website.

7 Such reasonable steps include a
8 statement read at the beginning of the
9 meeting, a printed copy of the statement," --
10 that I'm reading now -- "a statement such as
11 outlined above will also appear in the
12 agenda." And a statement such as what I've
13 just mentioned will appear in the Federal
14 Register notice. "If an individual in making
15 a statement reveals personal information such
16 as medical information about themselves, that
17 information will not usually be redacted.

18 The NIOSH Federal Freedom of
19 Information Act Coordinator will, however,
20 review such revelations in accordance with the
21 Freedom of Information Act and the Federal
22 Advisory Committee Act, and if deemed
23 appropriate, will redact such information.
24 All disclosures of information concerning
25 third parties will be redacted.

1 If it comes to the attention of the
2 designated federal official that an individual
3 wishes to share information with the Board but
4 objects to doing so in a public forum, the DFO
5 will work with that individual in accordance
6 with the Federal Advisory Committee Act to
7 find a way so that the Board can hear such
8 comments."

9 I thank all of you who are
10 participating by phone. I do ask that you
11 mute your phones if you're not speaking so
12 that all those who are both in the room and
13 who are participating by phone can hear the
14 full discussion. If you do not have a mute
15 button on your phone, then please use star-six
16 to mute your phone and use star-six again to
17 unmute your phone when you're ready to speak.
18 And for those of us in the meeting room if you
19 could please mute your cell phones and pagers,
20 we would appreciate it. Thank you.

21 Mr. Gibson.

22 **INTRODUCTION BY CHAIR**

23 **MR. GIBSON:** Thanks, Christine.

24 The Board takes very seriously the
25 worker participation in this process, and as

1 well as I think NIOSH and everyone involved
2 does. So we look at this as a very important
3 work group, and hopefully we can vet all the
4 issues and see if there's any change that
5 needs to be made and try to recommend that to
6 the Board.

7 We have a fairly simple agenda today.
8 First, we're going to have an overview of the
9 current state of worker outreach from NIOSH.
10 And then we're going to have our technical
11 support contractor give an overview of some
12 things they may have seen based on their
13 audits of the process.

14 And then finally this afternoon we're
15 going to have some time for workers, their
16 representatives or their advocates to make any
17 comments they may have. And then we'll try to
18 set a path forward and look at the action
19 items and set a future meeting.

20 **NIOSH OCAS OVERVIEW OF WORKER OUTREACH**

21 So with that we'll start the
22 NIOSH/OCAS overview, and I'll turn it over to
23 Larry Elliott.

24 **MR. ELLIOTT:** Thank you, Mike. I concur and
25 agree that you have a very important work

1 group here, Worker Outreach, and we encourage
2 and will welcome whatever recommendations or
3 comments that you want us to consider.

4 We know that this worker outreach is
5 only one of our outreach type of efforts. And
6 in my overview I'm going to give you the
7 breadth of outreach that we do and not focus
8 directly on worker outreach per se other than
9 a few particular comments with regard to where
10 we stand on that aspect of outreach.

11 But when I say that outreach varies,
12 it is very, a variety of outreach that we do,
13 I'm talking about our Public Health advisors
14 that interview claimants at the Advisory Board
15 meeting. That's one way we try to reach out
16 to people in this program.

17 I'm also talking about when we're
18 invited to town hall meetings or we conduct a
19 town hall meeting of our own. And we may or
20 may not invite DOE or DOL. Those are outreach
21 efforts as well as we see them.

22 We certainly consider the public
23 comment period at Board meetings to be another
24 opportunity to reach out to people as we hear
25 them speak and take note of what they have to

1 say to us. And we pull them aside if we can
2 and react appropriately to their concerns. I
3 could go on. There are probably other things
4 I could identify as outreach efforts, but
5 worker outreach is another effort that we have
6 embarked upon.

7 And it has evolved considerably over
8 the course of this program. It originated,
9 and we housed Worker Outreach within our dose
10 reconstruction contract with ORAU originally.
11 And the review that your contractor has given
12 the Advisory Board is on a procedure that ORAU
13 developed to perform outreach to workers who
14 we consider to be site experts as well as
15 subject matter experts at sites.

16 And ORAU used that procedure to
17 perform outreach to support issues that they
18 were seeking resolution on with regard to site
19 profile or technical basis development.
20 That's what that procedure was essentially
21 designed to assist them in doing.

22 We see worker outreach as being much
23 broader than that, and we have pulled that
24 outreach effort out of ORAU now and
25 transitioned it to ATL with a much broader

1 scope to it. We're asking ATL to do things
2 that are beyond just dealing with the site
3 profile. We asked them to assist us in SEC
4 procedures. Now SEC evaluations is a conduct
5 of focus groups both for site profiles or SEC
6 evaluation efforts. When the Board asked us
7 to go back to Blockson and ask three
8 questions, ATL helped us facilitate that.

9 And we're constantly strategizing
10 about how to do better and how to refine this
11 whole effort on outreach to workers per se.
12 Whatever our outreach effort is, I've asked
13 that we have a clearly stated purpose and
14 focus and targeted audience. We want to know
15 who we are attempting to communicate with in
16 these venues. And this I think the Board and
17 this working group and your contractor need to
18 understand that there are a variety of these
19 outreach efforts.

20 And the circumstances that surround
21 each effort dictate what the purpose, what the
22 focus, and who the target audience may be. We
23 have found that in many instances in worker
24 outreach it's more beneficial, we get more
25 bang for the buck, if you will, on what our

1 concerns, what our questions, what our
2 interests are in trying to find out
3 information that will improve our approaches
4 or our understanding of the work environment.
5 If we meet with small groups, if it's not like
6 a town hall meeting, and we meet with five,
7 six, eight, ten, 12 workers, we have a better
8 exchange and a better experience.

9 That's not to say that we don't value
10 public meetings on a broader scale at town
11 hall meetings, but we must recognize that in
12 those settings, when you're engaging more of
13 the public, more of the claimant population,
14 what you're going to get out of that is more
15 complaints, concerns, issues about the
16 program, about the process, about what NIOSH
17 does, what DOL does, and those kind of things.

18 If we're interested in really
19 answering questions about how a site
20 operations were performed or what the personal
21 protective equipment strategies were or the
22 administrative practices were, we're better
23 served we have found if we talk with former
24 and/or current workers. ATL has been engaged
25 very fully in that regard in pulling together

1 contacts for us with former workers, with
2 current workers and working with our health
3 physicists and our dose reconstructor
4 contractor folks, identifying what issues or
5 what questions we have that we want to see if
6 we can get answers to.

7 That's not to say that when we have an
8 engagement with workers they don't bring
9 something to the table. In a lot of ways they
10 bring things to the table our folks hadn't
11 thought of, and we value that.

12 I mentioned targeted audiences here
13 and I'm talking about the small groups versus
14 a claimant population which is a town hall,
15 and the dynamics of each are different. And I
16 hope you understand that and recognize that
17 it's not only a challenge for us, but it's
18 something we all need to deal with in our
19 understanding of what is being done here.

20 I think another distinction that I
21 would draw for you is that there's a lot of
22 confusion about process and procedure. And I
23 think that comes from holding up the model of
24 the Board's activities, the Board's
25 deliberations, and the Board's processes where

1 that is governed by FACA.

2 And the Institute has made a decision
3 to use transcripts as well as minutes.
4 Minutes are required by FACA; transcripts are
5 not. But then that engages a Privacy Act
6 determination and a policy which has been
7 developed and has also evolved over the course
8 of time of this program.

9 Worker outreach as well as the other
10 outreach efforts that we employ, we have made
11 policy and practice decisions in those
12 efforts. It may not reflect, may not be the
13 same, and for valid good reason are not a
14 mirror image of what the Board's practices and
15 policies are on generating documentation from
16 a meeting, whether it be transcripts or
17 documentation used in a meeting, be it white
18 papers or review papers.

19 So I'd ask you to make that
20 distinction in your mind. We are not
21 operating with the same set of practices, same
22 set of policies, same set of requirements in
23 Worker Outreach or our other outreach efforts
24 as you, the Board, do because you're governed
25 by FACA. So we don't have transcripts in

1 Worker Outreach.

2 We have what we call minutes, and we
3 have made a decision to curtail as much as
4 possible the use of names in those minutes.
5 We use names in minutes where we want to make
6 sure we go back to somebody, there's an action
7 item or we have somebody's contributed
8 something that is very relevant. We talk to
9 those people about the fact that their name
10 may appear in this set of minutes.

11 The minutes are also reviewed as are
12 Board transcripts and Dave Sundin, I don't
13 know if he's on the line, but he facilitates
14 that review with the Privacy Act Coordinator
15 in Atlanta. Before these things can be posted
16 on our website we particularly are concerned
17 about third-party information or other
18 sensitive information that shouldn't be
19 publicly displayed. But once we have that
20 Privacy Act approval to post, the minutes
21 should be posted. We have a timeframe that
22 we're asking that to be done on. We're
23 looking at that timeframe.

24 Vern McDougall's here and Mark Lewis
25 is here from ATL, and I think they're ready to

1 help you and answer questions about the
2 experiences that they've had in setting up
3 meetings, the various types of meetings, the
4 various accomplishments, the various concerns
5 that they have. They have ideas for
6 improvement as well.

7 And J.J. Johnson is here from
8 NIOSH/OCAS, and he is, he serves as the
9 technical monitor for ATL's task, but he's
10 also revising and rewriting the procedure that
11 SC&A reviewed that came out of ORAU. There
12 will be a NIOSH/OCAS procedure when J.J.'s
13 finished with it. So you are seeing in your
14 review from SC&A a snapshot which is probably
15 two years old or so of where things were I
16 think at that point in time.

17 A lot of good comments these five
18 suggestions, five recommendations. I think
19 J.J. can speak to that or Stu can speak to
20 that. We see merit there. We see need to
21 make improvements there in this new procedure
22 that J.J. is developing.

23 So one of the things I'm most
24 interested in seeing come out of your work
25 group is a clearly focused and purposeful

1 review. And I'm hoping that your review will
2 aid us in identifying ways that we can improve
3 our communications and our reactions to worker
4 input. And so I'll stop there.

5 And Stu's also here because he's
6 J.J.'s supervisor, but I need him to make sure
7 that what comes out of this working group gets
8 reconnected back into our procedures and how
9 we handle and how we deal with our dose
10 reconstructor contractor and what ATL brings
11 to the table from their efforts. And so that
12 coupling needs to be made. There needs to be
13 information that has merit, has benefit, will
14 influence how we do our work, needs to get
15 coupled back into our dose reconstruction
16 contract approaches.

17 And then also we need to provide, and
18 we've not done a very good job of this. And
19 we were talking this morning about how ways
20 and means to do a better job. And certainly,
21 we'd welcome this work group's thoughts and
22 recommendations in that regard. How do we
23 acknowledge to folks that changes have been
24 made?

25 If I hold up the Blockson example for

1 you, considerable change in the Blockson
2 technical basis approach was made because of
3 worker input to that process, and we can name
4 many examples like this. But what I'm
5 concerned about is we haven't told those
6 folks, hey, we heard you, and here's what
7 we've done with it. So we're looking for ways
8 to make that happen, to improve upon this
9 whole process of gaining input into our
10 procedures. So I'll stop at that.

11 Did Stu or J.J. or Vern have anything
12 else you want to --

13 **MR. HINNEFELD:** I'll defer to Vern if he
14 wants to talk about his view.

15 **MR. McDOUGALL:** I'll just make a couple of
16 remarks and then really what I'd like to do is
17 be available to have a dialogue with you as
18 much as you please.

19 Mark and I have been working on this
20 since we started working on it in late 2003.
21 (Inaudible) came on with us in 2004. We have,
22 we've found this tremendously rewarding as an
23 opportunity to work with both OCAS and the
24 labor unions and other groups as we've been
25 able to identify them. Mark and I both have

1 frankly a labor union background. I've got
2 about 26 years in the labor movement working
3 for various unions. Mark has about a
4 comparable number of years, comes out of the
5 Portsmouth gaseous diffusion plant. He was a
6 long-time Union Safety and Health rep.

7 We've seen this evolve over time. We
8 are, in many ways the easy part is over. The
9 easy part was setting up those first meetings
10 to get input into the site profiles. We've
11 seen that the groups that we've dealt with
12 have gained in their familiarity with this
13 whole process and with NIOSH over the years.
14 And we hope that that has changed their
15 effectiveness and the value that they get,
16 that they derive from their experience with
17 NIOSH.

18 **MR. ELLIOTT:** Well, with that we're here to
19 help the working group in any way that we can
20 and provide any information you need to do
21 your job. And again, I would just encourage
22 you to give this a real good focused and
23 purposeful review. I hope we can see some
24 benefit from all that.

25 **MS. BEACH:** I have a question. I'm Josie

1 Beach. On the procedure, I just want to be
2 clear. You got some, the procedure that was
3 in place, you had some points by points of
4 changing it. Are you creating a brand new
5 procedure?

6 **MR. ELLIOTT:** Yes.

7 **MS. BEACH:** Is that what I heard?

8 **MR. ELLIOTT:** That's what J.J.'s charged to
9 do is come up with a, and NIOSH procedure.
10 The one you have reviewed here is one that
11 ORAU developed for its purposes in performing
12 the work on site profiles' technical basis
13 documents.

14 **MS. BEACH:** Okay, so that one will not be
15 improved? It will just be referred to the new
16 procedure?

17 **MR. ELLIOTT:** The NIOSH procedure will take
18 precedence on this. And this procedure will
19 probably go away.

20 **MS. BEACH:** And then what's the timeline on
21 the new procedure? Any idea?

22 **MR. JOHNSON:** It's in a real crude form
23 right now. I would say it's going to be,
24 because of other activities, it's going to
25 take several months to go through and make

1 sure that it's reviewed properly and approved.

2 **MR. ELLIOTT:** It's a ways down the road.
3 There are a number of changes that we want to
4 see evident in this new procedure that go
5 beyond what ORAU had in their procedure and
6 also encompass and incorporate the comments on
7 that procedure from SC&A. But we're taking it
8 beyond that. There are things that we want to
9 impart into this that we know about that
10 weren't necessarily identified in this review
11 that we think are pertinent to how we interact
12 with workers.

13 But we certainly agree and concur that
14 comments like we have one way we handle site
15 or subject matter experts versus talking to
16 workers, former or current workers, from that
17 site who are not, again, I deem all workers at
18 a site to be subject matter experts, site
19 experts, but we've had a tendency to reach out
20 and pull the senior health physicists or the
21 management types and deal with them
22 differently than we've dealt with workers from
23 the process floor.

24 **MR. HINNEFELD:** And there will be pieces of
25 the new procedure that are going to look just

1 like those pieces of the old procedure.
2 Certain pieces are continuing as they were
3 because there'll be additional and then we do
4 have the advantage of the review and
5 recommendations from the report that we will
6 address to the extent we can.

7 **MR. ELLIOTT:** Certainly one section is going
8 to have to deal with making -- in this
9 procedure -- making sure that what ATL brings
10 back and what, and how that gets incorporated,
11 how that gets plugged into the right spot in
12 our dose reconstruction contract or within
13 OCAS itself. Maybe it doesn't need to go
14 there, but we've got to work out that and make
15 sure that we also have some language that
16 speaks about going back to the workers with
17 the right timeframe and the right messages.

18 We've talked this morning a little bit
19 before this meeting started about how valuable
20 do the folks find these minutes. We have a
21 60-day turnaround waiting for folks who were
22 at the meeting to review and comment. Did we
23 get it right? Did we capture the minutes
24 right? Do we need that 60 days? I mean, and
25 I guess Vern would say to you that probably

1 ten percent, 90 percent don't care.

2 We don't hear from, in 90 percent of
3 the time if I'm correct, 90 percent of the
4 time we don't hear back, 60 days elapses and,
5 you know. So maybe it's better that we just
6 go ahead and put, make sure we've got all the
7 review comment that we can internally and put
8 those up on the website and notify the folks
9 that they're up and say if you've got
10 comments, or if you need a revision to this,
11 let us know and we'll change it.

12 And we can start using the
13 information, or we start plugging the
14 information in at that point rather than wait.
15 There's a 60 day plus time delay here that
16 we're trying to work against to get that up.
17 So we'll have to speak to that, too. There's
18 a lot of these kinds of procedural details
19 that we want to address in J.J.'s new
20 procedure.

21 **DR. MAKHIJANI:** Might it be useful to get --
22 I don't know if everybody has recently read
23 the procedure or the review that we did of it,
24 and I don't know. It might be useful to recap
25 because Larry has made a lot of references to

1 both the procedure and the reviews. So it
2 might be useful to recap some of the things in
3 it if you would want.

4 **MS. MUNN:** It would certainly be helpful for
5 me to recap SC&A's points, because it's been
6 well over a year since I've looked at those.

7 **DR. MAKHIJANI:** Well, no, actually, this
8 review is quite recent. It's from November of
9 last year.

10 **MS. MUNN:** So this current November.

11 **DR. MAKHIJANI:** Last November, yeah. But --

12 **MS. MUNN:** I'm further behind than I
13 thought.

14 **DR. MAKHIJANI:** -- there's been a lot of
15 procedure reviews.

16 **MS. MUNN:** Yes, I know there have been. And
17 it's --

18 **MR. ELLIOTT:** But the point is that I'm
19 making is the document that was reviewed,
20 you're absolutely right. Your review was
21 November of last year. But the document that
22 was reviewed is a snapshot in time of two
23 years ago.

24 **MS. MUNN:** We've done a lot since then.

25 **DR. MAKHIJANI:** And there's been a lot of

1 changes. When we reviewed the document, we
2 found it had many strengths, and we had
3 comments on things that could be done to
4 improve it. But the fact that there was a
5 formal procedure actually to interview workers
6 to contact unions to get back to them to make
7 a tape recording for reference in preparing
8 the minutes, all of those things were very
9 important and big changes from, some of them,
10 very informal early contacts where things
11 seemed to fall through the cracks. And there
12 was a lot more unhappiness so there was
13 actually a lot of good changes that have been
14 made and incorporated into the procedure. And
15 then if you want, I can just recall the --

16 **MR. GIBSON:** We'll probably wait until,
17 Arjun, we'll wait until the SC&A overview to
18 go through that. We do want to hear that, but
19 before we do that we'll just, is there any
20 other comments on Larry's presentation or
21 anything else?

22 **MS. BEACH:** I guess I just want a little bit
23 of history. You said it went from ORAU over
24 to ATL. Can you tell us when that took place
25 and maybe why?

1 **MR. HINNEFELD:** It happened this past
2 summer, July?

3 **MR. McDOUGALL:** Right around June 1st give or
4 take a few days.

5 **MR. HINNEFELD:** So it happened this past
6 summer, and I think the reason was that we
7 wanted to have direct control over it because
8 it was, I mean, ORAU had subcontracted it to
9 ATL so it's these same people have been doing
10 it. But that then made this particular
11 component of the program subject to the
12 constraints placed on the ORAU contract, you
13 know, funding constraints, whatever.

14 And so it became then the ORAU
15 contractor that was prioritizing this effort
16 in light of all the other things they had to
17 do when money got tight or when there were
18 conflicting priorities on things. And I think
19 that largely was the reason why we felt like
20 we would rather have the ability to do that
21 ourselves and to remove that, well, (a) remove
22 that issue from ORAU because it's one more
23 thing for them to manage. And secondly, to
24 allow us to decide where this priority lay
25 against other priorities of the project.

1 **MR. GIBSON:** Some of the members of the work
2 group have attended some of the various
3 meetings put on by NIOSH/OCAS. Any of the
4 members want to comment on the type of meeting
5 you attended and your feelings of the meeting?
6 I know I've attended a few myself, and the
7 meetings certainly do vary.

8 I'll have to say that some of the town
9 hall meetings I actually had sympathy for the
10 OCAS staff only because some of the members of
11 the audience I think really didn't understand
12 the program and some of them weren't even
13 eligible for the program and were wanting OCAS
14 to do things that weren't even under the
15 purview of the EEOICPA. But and then there is
16 certainly more information I think that's
17 gleaned in the smaller worker-type meetings,
18 and that is a concern of ours is how that's
19 implemented into the program.

20 Do any of the other members have any
21 comments on meetings you've attended or --

22 **MS. MUNN:** You should never punch my button.
23 Of course, I have comments on meetings that
24 have been attended personally. One of the
25 things that strikes me is what a good job Mark

1 does. He's really very personable, connecting
2 very easily with the people who attend the
3 meetings and encourages them to open up and
4 ask any questions at all that they come with.
5 And having a personality like that that
6 interacts with individuals is in my view very
7 helpful to the process. So thank you, Mark,
8 for your efforts in the meetings where I've
9 personally seen you at work.

10 There's been an enormous difference in
11 the tenor of various meetings I think partly
12 because of the sites themselves, partly
13 because of the work that's done there, and
14 partly because of the kinds of workers that
15 attend these different meetings. As you
16 alluded to earlier, Larry, the Blockson
17 meetings were enormously helpful in terms of
18 getting very specific information about how
19 the process operated and what made it much,
20 much more reasonable for us to be fairly
21 definitive about what went on at that
22 particular site.

23 By contrast, the Texas City meeting
24 which I attended was really a very, although
25 it was very informative for us, it was very

1 difficult for the workers because a great many
2 people had apparently either been misinformed
3 or had misunderstood information that was
4 being presented to them. I have no
5 statistics, but my guess is that easily 85 to
6 90 percent of the people who were there were
7 not even eligible for the program. They had
8 mistakenly believed that they were covered;
9 they were not. That's a very difficult
10 situation. And there's no easy way to be able
11 to tell people that they just simply are not
12 covered under this program.

13 On other sites there's been much more
14 of what I would anticipate. A lot of people
15 have stories to tell very much like our
16 meetings in Board session. They want to tell
17 their story and do so. But you get a
18 combination of people who want to tell their
19 stories and individuals who have been major
20 contributors to the activities on the site and
21 can add significantly to details.

22 So from the point of view of a work
23 group member who sits in on these meetings but
24 does not contribute to them in any way, a
25 simple observer, it appears from this

1 perspective that they are effective,
2 frustrating at times, but obviously helpful in
3 gleaning information ultimately.

4 **MR. ELLIOTT:** One of the efforts of outreach
5 that I didn't speak about, of course, and I
6 didn't have it on my notes here -- and I want
7 to leave Laurie out of this -- is the SEC
8 outreach effort that Laurie and -- I don't
9 know if Denise is on the line. I think she
10 was going to call in. But they also have an
11 outreach component where they work with
12 petitioners, and they work with potential
13 petitioners and do outreach and held meetings
14 themselves. And so those meetings and the
15 minutes from those meetings are done similarly
16 to what we call worker outreach.

17 I'm sorry, maybe --

18 **MS. BREYER:** Actually, I don't do minutes of
19 those meetings.

20 **MS. BEACH:** I have one more question. On
21 the WISPR database are all the meetings from
22 every aspect compiled into WISPR or just
23 certain meetings?

24 **MR. HINNEFELD:** On the fly it's a little
25 hard for me to say. I would think there's a

1 possibility that things that were classified
2 as town hall meetings may not be there. I'd
3 have to research and find out.

4 But I think early on or for the design
5 of that this was more on the kind of a, it was
6 designed sort of like a focus group sort of
7 meeting that you would meet with a smaller
8 group of workers who worked at the site or
9 used to work at the site and obtain comments
10 that way. So I won't promise that every town
11 hall meeting is on there. But there are a lot
12 of meetings on there.

13 But while we're on WISPR, that's not
14 the database we're putting new information
15 into, but it still contains the information
16 that was generated up until June of last year
17 or whenever the changeover occurred, and it is
18 still available.

19 **MS. BEACH:** I guess that -- oh, sorry,
20 Larry.

21 **MR. ELLIOTT:** I was going to add to that
22 that, yeah, I agree with Stu. There are
23 meetings that I know that were held that are
24 not in that particular database. The meetings
25 that are in that database would be meetings

1 that ORAU had some level of participation in.
2 You'll find Board meetings I think, public
3 comment periods from Board meetings included
4 in WISPR because an ORAU person was there and
5 captured whatever they thought was relevant
6 from that public comment sort of program.

7 **MS. BEACH:** I guess one of my frustrations
8 is going into, we have to go into several
9 different areas to be able to find those
10 interviews or the minutes. WISPR's one of
11 them. What's the future of WISPR, and is
12 there a way to --

13 **MR. ELLIOTT:** We're not going to use, we're
14 not using WISPR.

15 **MR. HINNEFELD:** We're not adding additional
16 information to it. We'll have our own
17 application that we would like --

18 **MS. BEACH:** So eventually we'll have
19 something else for --

20 **MR. HINNEFELD:** And even in the interim
21 until our application's ready I believe we can
22 provide a summary of findings in the same type
23 of information to you in some other, it may be
24 a kind of a simple format or crude format like
25 a spreadsheet or something, but I think we

1 could do something like that until the new
2 system is operational. But I think this new
3 system will be operable before too long.

4 **MR. ELLIOTT:** I personally don't see a lot
5 of merit to WISPR. That's not, in my mind
6 that is not the problem. The problem is
7 making sure that the information that's of
8 use, of merit, of influence gets put to the
9 right person. WISPR doesn't do that.

10 **MS. BEACH:** And I'm not saying it does.
11 What I am looking for is an easier route to be
12 able to go and look at interviews, and WISPR
13 was just one of them. But I realize when I
14 was looking at Mound data, it's not, it's
15 2005, so that's what I was asking you is what
16 the future of being able to go and look at
17 worker input, a place to see that.

18 **MR. HINNEFELD:** Now which are you looking
19 for for Mound when you're talking about
20 interviews? Are you talking about --

21 **MS. BEACH:** I've just been into WISPR and
22 just looked at stuff and realized that it's,
23 to be able to get interviews you have to,
24 there's some posted on the O drive. There's
25 some posted in the NIOSH. They're scattered.

1 **MR. ELLIOTT:** Here's where a Board member
2 should be able to go to a folder on the O
3 drive for what site or petition you're
4 concerned with. If it's GSI, if it's
5 Blockson, if it's Idaho National Engineering
6 Lab, there should be in one of those folders
7 any interviews that were conducted. Are we
8 there yet? No.

9 There should be for minutes from these
10 meetings on the website associated with that
11 site or a petition associated with that site
12 or if a technical basis document has been
13 revised based upon worker input, there should
14 be notice about that. That is where we want
15 to get to. We are not there yet. I
16 apologize. I hate to have to say to you,
17 yeah, you've got to go to various different
18 places.

19 But I would encourage a Board member
20 to talk with a NIOSH/OCAS point of contact
21 you've been given for a particular site or a
22 petition evaluation. And they should be able
23 to pull that information together for you if
24 it doesn't already exist in one location.

25 **MS. BEACH:** Right, and one aspect when

1 you're researching for this worker outreach
2 meeting, there's nothing really for this
3 particular meeting except for kind of all
4 over. So that's my point.

5 **MS. BROCK:** This is Denise, and I am on the
6 line. I was just wondering if that's
7 something that Laurie and I should be doing
8 then? Is having minutes?

9 **MS. BREYER:** I think the reason we
10 originally didn't do minutes as opposed to
11 town hall- and worker outreach-type meetings
12 is the SEC was so narrow in its focus, and
13 there wasn't, I don't believe that there was a
14 chance to really get any information from
15 workers or members of the public like in town
16 hall meetings when they want to get up and
17 tell their story. In worker outreach meetings
18 we're asking for it because it's really just
19 you and I going, giving our presentation and
20 the questions really focus just on the SEC. I
21 don't know what benefit there would be in
22 minutes, at least from the two we've had so
23 far because we've not gained any information -
24 -

25 **MS. BROCK:** You're right.

1 **MR. ELLIOTT:** I've let you and Laurie have
2 discretion on whether you want minutes or not.
3 But it doesn't relieve you of an obligation.
4 Once you hear somebody in your SEC counseling
5 town hall meetings who raises up an issue, you
6 have to take, you are responsible, and you are
7 obliged, I feel, to take that back to the
8 office and make sure it gets handed off to the
9 right person.

10 This is another thing that J.J.'s
11 going to have to incorporate in his procedures
12 I think. You know, making sure that not only
13 the health physicists who go out on these
14 meetings and do worker interviews, Laurie and
15 the ombudsman need to be able to know where
16 something's been said that needs to get
17 coupled back into the right place. And then
18 we need to make sure that that person who made
19 that statement gets some feedback.

20 **MS. BROCK:** And I've actually, Laurie and I
21 have done some together, but we've also done
22 some separately. And so each one of those are
23 different. The amount of people that are
24 there are different, and so maybe that
25 something, Laurie, we should talk about and

1 consider maybe, I know we've got Pinellas
2 coming up, and I'm assuming that maybe that's
3 going to be a little bit larger group as well.

4 **MR. SCHOFIELD:** My observation has been
5 there are meetings, before I was on the Board
6 and since I've been on the Board, and it
7 almost seems like we need to split the meeting
8 in two parts. Have the first part for general
9 input from the public, the workers, claimants,
10 claimant families, whatever, where they want
11 to tell their stories. Sometimes data and
12 information comes out as Larry knows. It has
13 before I ever got on the Board.

14 But people don't understand this, and
15 some of them do. And then after that, and
16 like Laurie held a meeting in Los Alamos that
17 I attended that was strictly very narrow
18 focused for people who were interested in
19 filing an SEC. But by having that pre-meeting
20 where they kind of get the idea of what this
21 is, what they need for an SEC, what is an SEC,
22 then those people who are really interested,
23 you know, maybe we have a meeting Saturday
24 afternoon.

25 Then maybe Saturday evening we have a

1 shorter meeting aimed particularly at those
2 people for the SEC. Because otherwise -- and
3 Mark's been out there in New Mexico a number
4 of times and helped us and put up some stuff,
5 brought out stuff from Pace Union -- you get
6 so much input and so many testimonies, it
7 really doesn't allow people in the audience
8 who have questions about an SEC and how to go
9 about this the chance to sit down and talk to
10 Laurie or someone from the Board or someone
11 from NIOSH.

12 So it's almost needed to be split into
13 two sections. That way those who are then
14 after the general public may be interested,
15 they will take the next step. That's just
16 kind of an observation, having gone to several
17 of these meetings and stuff.

18 **MR. ELLIOTT:** Well certainly, we can tailor
19 meetings, or we can tailor events at the
20 discretion of the folks who are initiating the
21 event. And again, it varies. You're talking
22 about an SEC interaction, and that to me
23 sounds like it would work very well.

24 But if the purpose and the focus is
25 simply to get in front of ten or 12 workers,

1 we're not going to announce that publicly.
2 We're not going to announce it in the paper or
3 very widely, and we're going to go in and get
4 our, have our exchange with those folks and
5 get out. That's a different kind of form.

6 We allow people to tailor the way the
7 meetings are conducted whether it needs one
8 meeting, two meetings. We just ask that they
9 clearly state the purpose, the focus and
10 understand who they're targeting as an
11 audience. And then that dictates how things
12 should happen.

13 **MR. SCHOFIELD:** The resource centers would
14 be a good place for people to come and get
15 this information and maybe find somebody to
16 actually help at the resource center and do
17 these outreaches to people for technical help
18 and stuff. I mean, because resource centers,
19 most of them, they really aren't, I mean,
20 they're trying to get records and stuff, but
21 they really, a lot of them don't really
22 understand the program and how it functions so
23 some technical assistance for the resource
24 centers is another thing we could do.

25 **MS. BREYER:** I know with the SEC outreach

1 meetings we have invited the resource centers
2 because we weren't sure how many questions
3 they were getting. In Idaho resource center
4 people did show up. In Calabasas they did
5 not, but we do try to do outreach with them as
6 well so they can come and listen in then in
7 any part E questions for people who want to
8 file claims who may not have, but decided to
9 come to the meeting, and then DOL will be
10 there as well.

11 Denise and I do try to stick around
12 after the meeting as well, not necessarily
13 holding that second smaller meeting, but to
14 talk to anybody who heard the information, and
15 they want to talk to either of us about
16 actually filing a petition. And we have had
17 some people call, we give out both of our
18 contact information in those larger meetings
19 and have had made contact and have had people
20 contact us who are interested in filing a
21 petition.

22 And we talked to them either in a
23 conference call with Denise and I or each
24 individually and walked them through the steps
25 of the petition and the form and get into more

1 detail than maybe a larger meeting that we put
2 on for them. So we do find that helps a lot.

3 **MS. BROCK:** Yeah, I agree.

4 **MR. GIBSON:** Do we have any more comments in
5 this area from anyone in the room?

6 (no response)

7 **MR. GIBSON:** What about on the telephone?
8 Any comments from anyone?

9 (no response)

10 **MR. GIBSON:** Larry, if we could ask you, as
11 you and J.J., your ideas about this new
12 procedure get more concrete and everything,
13 could we maybe at a future meeting have a
14 presentation from you or J.J. on just how this
15 whole procedure is shaping up and how it's
16 going to look and everything?

17 **MR. ELLIOTT:** Sure, we can give you a
18 status.

19 **MR. GIBSON:** And also on the future of the
20 database that Josie was asking about?

21 **MR. ELLIOTT:** We certainly will plan to do
22 that.

23 **MR. GIBSON:** I guess there's nothing else
24 then. We're ready to move on to SC&A's --

25 **MS. BEACH:** Can I ask one more? Can we get

1 a copy of that procedure before the
2 presentation if we're going to --

3 **MR. ELLIOTT:** Nope. We're not going to
4 provide draft pre-decisional documents. We
5 don't do that.

6 **MS. BEACH:** Well, I guess I wasn't asking
7 for a draft, just when the procedure is ready
8 --

9 **MR. HINNEFELD:** When the procedure's ready,
10 we'll provide it.

11 **MR. ELLIOTT:** When the procedure's ready,
12 you'll be given a copy.

13 **MS. BEACH:** So the presentation you think
14 will come before the --

15 **MR. ELLIOTT:** We can give you a status of
16 where we're at, what we're thinking of, how,
17 you know, the elements of the procedure. And
18 we may feel it appropriate and beneficial to
19 seek out your advice on an element or an
20 approach we're thinking of before we finalize
21 it. If we can agree to keep that open, I'd
22 like to, but we're not able to share pre-
23 decisional documents of this nature. It needs
24 to be our thought, our work and put it on the
25 table, and you can react to it.

1 **MS. MUNN:** One tangential thing before we go
2 on to the next part of our deliberations
3 today. What work groups are we connecting
4 here? Obviously, there's no problem with
5 respect to connecting with the union members.
6 That's going to happen. But in the past it's
7 been difficult for me on several occasions to
8 try to impress upon the group the fact that
9 not all the workers on AWE and DOE sites are
10 union members, and they are not privy to the
11 continual kind of flow of information that
12 moves back and forth between and among union
13 members.

14 **MR. ELLIOTT:** Good question, very good
15 question.

16 **MS. MUNN:** I'm not at all sure what groups
17 you -- another obvious group is the health
18 physicists. All you have to do is contact the
19 local ^ and you have those people on board.
20 And then people talk about management. Well,
21 management is not workers. I think by
22 definition of everybody in this room probably.
23 That's an entirely different thing.

24 They may be site experts in some way,
25 but they are not thought of generally as

1 workers. And I've had people tell me that
2 they think of engineers as being part of
3 management. Well, I, as you know, take issue
4 with that. Those of us who spend all of our
5 time on the plant floor don't quite see
6 ourselves, or arguing with management, don't
7 see ourselves in that role. But it has always
8 been a concern to me that the primary channel
9 for communication seems to be through
10 organized workers. What else do we do?

11 **MR. HINNEFELD:** Well, maybe Vern can --

12 **MR. ELLIOTT:** Well, let me answer that in a
13 general sense, and then I want Vern to speak
14 in the specific sense with their experiences.
15 Another reason, you know, I feel it's
16 beneficial to have ATL working on this for us
17 is they have the union contacts. I felt it
18 was beneficial to put them under our direct
19 supervision or control or what have you rather
20 than having it embedded within our dose
21 reconstruction contract is that we can push
22 the envelope on what we want them to do.

23 And I've always had a concern that,
24 yes, we reach out, and we talk to organized
25 labor reps. We reach out and we talk to

1 subject matter site experts. It may be
2 management. It may be quasi management, or it
3 may be just served in the administration of a
4 monitoring program.

5 I've been concerned, you know, what
6 are we doing in situations where we don't have
7 those readily developed avenues like organized
8 labor to get in. How do we approach a site
9 like Savannah River where essentially you've
10 only got one union which doesn't represent a
11 majority of the folks on the site.

12 How do you approach those folks who
13 are not represented? How do you seek them
14 out? Do you go to churches? Do you look --
15 and I think Vern can speak to some specific
16 examples on how they do that.

17 Underserved populations is another
18 concern I have. We have an African-American
19 contingent at Savannah River, and I want to
20 make sure that their voice is heard on this.
21 I've heard their voice in my past doing
22 research at Savannah River site that they
23 felt, and probably rightfully so, they got the
24 dirtiest jobs assigned to them and weren't
25 really monitored as well as maybe others were.

1 We have a Native American contingent
2 at several sites. I'm concerned about how
3 we're addressing their particular needs,
4 concerns and involvement in this program. And
5 so I'm pushing for that kind of more broad
6 approach to happen.

7 Certainly, our health physicists, ORAU
8 or NIOSH or Battelle when they were on the
9 program were encouraged, and you could see
10 this written in our COB policy, site experts,
11 subject matter experts. Those people who may
12 have thoughts and information should be heard.

13 We want to hear workers. We want to
14 know what they can contribute, not only in the
15 CATI. We recognize that survivors cannot help
16 us to any great extent, but we don't want to
17 shut them out of the process of providing
18 input through a CATI. And we want to make
19 sure that we have a very broad landscape of
20 opportunity to engage people here. And up to
21 this point I don't feel we've done a very good
22 job of that. We're going to change that. So
23 Vern, I don't know if you want to get some
24 additional --

25 **MR. McDOUGALL:** You look like you're ready

1 to say something before I --

2 **MS. MUNN:** I'm always ready to say
3 something.

4 **DR. BRANCHE:** Before you do, may I say
5 something?

6 This is Christine Branche, and for
7 those of you who have joined the call since we
8 started, if you could please mute your phone
9 it would help improve the quality of all those
10 who are on the phone participating. If you
11 don't have a mute button, then please use star
12 six, and then you can use star six again to
13 un-mute your phone when you're ready to speak.
14 Thanks so much.

15 Wanda.

16 **MS. MUNN:** I'm wondering, for example,
17 whether many of the sites have retiree groups.
18 I'm wondering whether those groups are
19 routinely contacted with an offer of
20 presentation for the next meeting. Because
21 since most of the concerns that we have over
22 potential exposures are based in earlier
23 years, then retiree groups are a logical place
24 to find those people who are non-union, non-
25 management workers who have first-hand

1 knowledge of the site and the activities that
2 occurred there.

3 Now I'll shut up, Vern.

4 **MR. McDOUGALL:** And the key word that you
5 used is groups. The unions are easy to reach
6 because they are groups, and we can identify
7 somebody who can be our point of contact there
8 and who can reach out and find the right
9 knowledgeable people to bring to the table.
10 And I won't belabor right now how we reach out
11 to different kinds of union groups.

12 But there are a number of different
13 kinds of union groups that are on the site,
14 the site operating unions, the construction
15 unions, metal trades councils were somewhat
16 like the unions, the wall-to-wall unions. We
17 reached out to them in a number of different
18 ways that basically suit their own operating
19 style.

20 Other groups we have reached out where
21 we could identify the group, and I'll give you
22 a couple concrete examples. Pinellas I think
23 is a success story. One of the advantages of
24 Pinellas is they haven't been closed down that
25 long. They've only been closed down for a

1 little over a decade so there still are a
2 semi-cohering retiree group.

3 Now they don't have business meetings.
4 They don't have a president, a secretary-
5 treasurer and all that. What they have is
6 mailing lists, and they get together for a
7 social event twice a year, but we could use
8 that. So we located the people who kind of
9 coordinated these social events, and we went
10 down to Florida and visited them, got
11 connected to the fellow who maintained the
12 mailing list.

13 And we used the mailing list to hold
14 meetings in the same location where they were
15 used to having their social events so
16 everybody was comfortable with this. Those
17 meetings went, I think, very well, and if you
18 look at the site profile for Pinellas, you
19 will find specific information that was
20 derived from the input from the people from
21 those meetings.

22 One fellow from one of those meetings,
23 from the first meeting, actually went home,
24 and after he described certain things that
25 found their way into the site profile,

1 actually went home and on his computer sat
2 down and graphically laid out, diagrammed,
3 what he was talking about and submitted that.
4 And at least one of those is I think now in
5 the site profile. So it worked very well
6 where we had a retiree group.

7 At Blockson, Mark, one of the ways
8 that we got some of the people that we did was
9 that Mark found -- and I don't even remember
10 how he found it -- but found a small retiree
11 group there. And this is just a bunch of old
12 folks who get together every couple weeks for
13 lunch. And there's one fellow who has the
14 phone numbers for everybody else. So we used
15 that information to reach out to them to get
16 them involved in the meeting.

17 At LANL when we met with the unions
18 there. They said, well, who do you want us to
19 bring? We said you can bring whoever you
20 think is important. Okay? Whoever you think
21 has something to contribute, go ahead, and
22 they did. They brought people who weren't
23 necessarily union members to some of those
24 meetings, but they were, you know, we looked
25 at them as the people at that location who

1 knew best how to reach out.

2 And Lawrence Livermore the same thing.
3 We had one meeting actually onsite with the
4 professional employees union there, and at
5 some of these sites the engineers and people
6 like that do have an organization. And then
7 in the evening they sponsored a meeting in
8 their office for basically people that they
9 knew of who they thought had something to
10 contribute. But we basically kind of rely on
11 the people who live in the community and have
12 worked at that site to kind of identify who
13 the key people are.

14 Texas City -- and I'll stop in a
15 minute -- Texas City, actually, Mark, the
16 story there was those people had been
17 organized back in the '50s, but that union had
18 long since gone out of existence. We worked
19 through people that we knew who worked at
20 actually the facility next door is still an
21 operating union and basically got in the
22 community.

23 Mark actually went down and has kind
24 of recalled his old organizing skills and went
25 door to door. One person at a time, go and

1 meet with one person. That person takes you
2 down the street to another person. And
3 through a few days of his efforts the worker
4 outreach now, not the town hall meetings, but
5 if you read the minutes for the worker
6 outreach meetings the month before, I think
7 you'll find a very different tone and much
8 more substance. But he dug out people and
9 recruited them to that meeting that the
10 petitioner group didn't know about.

11 So we had to be fairly creative in all
12 these efforts which is not to say that we
13 can't be more creative. And if we can find
14 new ways to find some of these groups you
15 speak about, we can apply the same kind of
16 approaches, but first and foremost we need to
17 find a group that we can speak to.

18 **MS. MUNN:** Let me make one suggestion that
19 perhaps has not been considered. I don't know
20 whether you have made an effort to work with
21 local or regional sections of professional
22 organizations. For example, the natural
23 engineer mind is to go through the 17
24 professional organizations that exist in my
25 community and think, okay, now out of those I

1 can say for a certainty that the American
2 Nuclear Society has never been contacted to
3 inform their members. Wouldn't you think?
4 I'm sure the Health Physics Society has, our
5 triple E folks, construction engineers.

6 You know, you can go down the list of
7 professional organizations that, to the best
8 of my knowledge, have not been contacted at
9 all. This constitutes a significant number if
10 you get into the chemistry organizations. I
11 know there are at least two different
12 professional organizations. Then you're
13 talking about an awful lot of people who are
14 an awful lot of hands-on workers who probably
15 don't have any communications channel with
16 organized labor.

17 **MR. ELLIOTT:** Good suggestion. One of the
18 things I think we all struggle with is when is
19 enough enough. And certainly if we have a
20 clearly identified avenue of contact, and we
21 use that. And if that we feel covers the
22 audience or the group that we need to cover,
23 and we don't have to go touch this other
24 professional organization, maybe we don't have
25 to.

1 But when do we, where do we make a
2 decision that, well, we've touched enough
3 people or we gave an opportunity for people to
4 make comments. And I'd just like to throw
5 that on the table because that's something we
6 wrestle with, and I'd like to hear thoughts
7 about that. But I want to make it known that
8 there are a variety of ways that we empower
9 people to approach us, to give us comments.

10 Certainly, on our website you'll see
11 that we've put a notice on site profiles.
12 They're works in progress. They're living
13 documents. Give us your comments. That's a
14 very passive way. That just captures those
15 who look at it, and those who are so inclined
16 to respond.

17 **MS. MUNN:** Getting people to the site.

18 **MR. ELLIOTT:** So I just want to make those
19 two points. We wrestle with this all the
20 time. When's enough enough? How do we make
21 sure that we haven't underserved somebody, and
22 yet we've got what we need within the limited
23 resources that we have?

24 **MR. GIBSON:** Well, I'll just comment and not
25 as the Chair of the work group but just as an

1 individual. I think it is important to
2 determine when enough's enough, but to me I
3 think a very important issue, and one of the
4 big issues that brought this group together,
5 is to see when the input of a person from a
6 site that has input on the site profile may
7 not have his name on it by title as the owner
8 of the document, but when is a worker's input
9 not discounted based on what this person who
10 may have served in Rad Protection or
11 something, it's the interaction between those
12 two that's you know, really sees how much
13 input the worker's input gets before it's
14 discounted.

15 **MR. SCHOFIELD:** Another thing is here's some
16 what you might call corporate history in some
17 areas that is really kind of boxed in, as
18 Laurie and Mark, both having been out in New
19 Mexico are somewhat familiar with. And that's
20 back like you take like the pueblos and stuff.

21 You don't just go into the pueblo and
22 notice we're here. We want you to come. One
23 thing is a lot of the people you're going to
24 be dealing with are either they were laborers,
25 or they're widows, really didn't know a whole

1 lot. And a lot of the older widows in a lot
2 of these pueblos in some of these small
3 villages, they don't speak English. They
4 might speak Tewa. They might speak Spanish.

5 This is a case where they're going to
6 actually have to look at maybe giving money to
7 an advocate group or something to go in, to
8 get translators, to make arrangements with the
9 governors of the pueblo or tribal leaders that
10 say, hey, look, here's what we want to try and
11 do for some of your people, we know some of
12 your people here were, a lot of these peoples'
13 work history is very sketchy, and it's a
14 little harder to get this kind of work done.
15 But it is something that's got to be done.

16 Like it says, just because somebody
17 doesn't speak English or has a very limited
18 ability to speak it shouldn't exclude them
19 from being able to put in what knowledge they
20 know. And I know that's kind of a, Los Alamos
21 is a little unique in that area, but I suspect
22 you'll find some of that also near Rocky
23 Flats, some of those down around Pantex and
24 Texas City.

25 **MR. ELLIOTT:** Let me react to your comment

1 about Native Americans, and I need to say this
2 because it covers our contractors. It covers
3 the Board's contractor. We can't go on --
4 these are sovereign nations. We can't go on
5 their soil without going through a series of
6 hoops to do so.

7 **MR. SCHOFIELD:** That's what I know.

8 **MR. ELLIOTT:** Not only hoops within the
9 pueblo and the governors of the pueblo, but
10 hoops within HHS/CDC and Health Service.
11 That's not an easy -- it's not just sending
12 Laurie out and saying do an SEC counseling
13 meeting or send our health physicists out
14 saying we need to know what the Zia Company
15 was really doing back in the day. And those
16 Native American workers who were part of that
17 can tell us something about their experience.
18 We have to go through a real regimented set of
19 hoops.

20 **MR. SCHOFIELD:** I'm well aware of this, and
21 this issue is something I've dealt with my
22 whole life in that respect, but it's something
23 that -- maybe that's a small category, but
24 still those are the type of issues that are
25 going to crop up in some areas, possibility.

1 Or if you have an area with a site that's been
2 closed for a long time, basically, the
3 majority of what you've got left are people
4 who are quite old or a lot of older widows.
5 They may be the only -- true, their knowledge
6 is only secondhand, but they may still be able
7 to bring you out things that otherwise would
8 not be known. And in some particular cases
9 we're going to have to go that extra mile.

10 **MS. BROCK (by Telephone):** Excuse me, this
11 is Denise. I think I've heard in the past
12 that there is an attorney in that area by the
13 name of Martinez, and I believe that he works
14 possibly with even some of the resource
15 centers to get the word out. He actually has
16 an interpreter that will actually go in and,
17 if nothing else, relay the message. Is that a
18 possibility?

19 **MR. ELLIOTT:** It may be. It may be. I'd
20 like to speak also to Mike's comment, and I
21 think it's important for, Mike was talking
22 about what value do we place on workers input.
23 What's the bright line, if there's a bright
24 line, of saying that we believe that plant
25 process operator's testimony or affidavit over

1 a person who was managing that program.

2 And I think we all would agree that
3 there are procedures that are written, but in
4 the day-to-day activities of working a process
5 or a functioning process we don't see those
6 followed in every regard. There are ways to
7 shortcut and ways, well, that didn't work.
8 The way the procedure reads doesn't work so
9 we're going to do it this way, and it will
10 work. Those things happen. We recognize
11 that.

12 But just for your benefit I hope
13 information that's provided to us by a worker
14 will be accepted and used providing it is
15 reasonable and supported by substantial
16 evidence, is not refuted by other evidence,
17 and is consistent with available information
18 at hand. That's the way we, that's kind of
19 the test that gets used on anything that we
20 use whether it's the process operator saying
21 something or the manager of that process
22 saying something to us or his principal health
23 physicist at the site saying that to us.

24 We take the information that's given
25 to us, and we look at it in the context of

1 what else we know. This stems from our dose
2 reconstruction regulation. And if you look
3 there, there's a couple sections in there that
4 speak about how information is treated that is
5 provided either by a claimant or somebody
6 who's given us input. Just so you know, it's
7 not a bright line per se, but we take that
8 input in the context of the whole.

9 **MR. GIBSON:** I guess I'd just like to
10 comment, and I guess why this is a concern is
11 I've seen examples of it. And one recent
12 example when I was on a recent conference call
13 -- and I won't mention the site or the person
14 -- but there was a claimant that had been
15 alleging that not all of the readings had been
16 taken from a work activity. And there was a
17 person on the call that's had extensive site
18 history and is under contract for one of your
19 subcontractors and made the statement
20 something to the effect that I ran that
21 program for about 20 years so I know that that
22 can't be the case. And it was just like, it
23 seemed like that the worker's concern was then
24 --

25 **MR. ELLIOTT:** Dismissed.

1 **MR. GIBSON:** -- dismissed. And that's just
2 a real sore spot that I think really needs to
3 be looked at.

4 **MR. ELLIOTT:** In the example that you give
5 there, I think where we can do a better job is
6 saying something to the effect that I've just
7 said that, well, that's your opinion, and
8 we've considered your opinion. We are
9 considering what this worker has just told us,
10 too. I think we have to make these kind of
11 decisions at the end of the day.

12 **MR. HINNEFELD:** I think the key issue here
13 is to apply the same test whether you're
14 getting the information from a health
15 physicist or a -- well, apply that same test
16 in terms of consistency with other information
17 or they're repeating information or things
18 like that and significant supporting evidence.
19 And I think there's that will require
20 vigilance on our part as the managers of this
21 effort because who's driving the site
22 profiles, health physicists.

23 **MR. GIBSON:** I realize it's hard to try to
24 get site history without using some people who
25 have that site history, but there's such a

1 thin line between conflict when they've run
2 that program and now they're in one way or
3 another being paid by you guys to help
4 implement the program, and yet they kind of
5 seem to step over the line and perhaps
6 influence whether or not someone's input is
7 taken as factual or not on maybe an unknown
8 circumstance at that site.

9 Maybe that's true in general that
10 workers couldn't be exposed to something or
11 another, but that doesn't mean that there
12 wasn't an isolated event that this individual
13 went through on the third day of this month in
14 this year, and he got a substantial exposure.

15 **MR. ELLIOTT:** Certainly, what we're dealing
16 with here in some ways, in some cases, goes to
17 appearances and perspective and appearance
18 that it's been dismissed. I would add my
19 perspective to that and say that a subject
20 expert who's not a document owner doesn't have
21 the final say. NIOSH has the final say on
22 what gets incorporated into the documents that
23 are used.

24 And, yes, that individual because of
25 their ownership of that program in the past

1 may have that opinion, but that doesn't mean
2 that's shared with NIOSH, that NIOSH shares
3 that opinion over the welder who said, no, I
4 didn't do that. That didn't happen that way.
5 That's not the case. We, again, take all of
6 this in consideration with the full context of
7 what we have available to inform us.

8 Another way I think we can do a better
9 job is when we hear the welder say that, maybe
10 we need to go back and say, well, we've got
11 two obvious different statements here. We
12 need to go find somebody else that can support
13 or add to what we hear from the welder. And I
14 don't think we've done that in every case as
15 well as we could.

16 **MR. GIBSON:** You know, and I just, I see --

17 **MR. ELLIOTT:** I don't think we, I think one
18 of the requirements in this new procedure
19 J.J.'s running is going to have to speak to
20 treating these sources of input, as Stu says,
21 equitably, with the same treatment. So if we
22 have a subject matter expert who ran the
23 program out at Rocky Flats, and he says, "This
24 is the way it happened," and we do that in an
25 interview, we need to document what is said

1 there and in a way that you all can see that
2 as transparent as if we go out and have a
3 worker outreach meeting, and we sit down with
4 five or six workers, and we hear what they
5 say, and we've got their minutes.

6 Or if we do an interview, we've done
7 interviews with workers, and we put those
8 interviews in the right place so that you can
9 see that. And you can see, I want us to be
10 able to demonstrate that we are treating these
11 folks equitably. That's one of the comments
12 out of the SC&A review is a criticism about
13 we're handling these people in different ways.
14 And it's perceived that we believe more from
15 one than we do from the other. And that's
16 not, that's a perception that we're going to
17 have to resolve.

18 **MR. GIBSON:** You know, I'm just making some
19 personal comments, but I think it's more
20 important to the individual claimants and
21 workers than it is to the Board.

22 **MR. ELLIOTT:** Yeah, you're right about that.
23 I agree with you.

24 **MR. GIBSON:** Anything else in this area of
25 discussion?

1 (no response)

2 **MR. GIBSON:** Anyone on the telephone make
3 comments?

4 **DR. MAURO (by Telephone):** This is John. We
5 didn't get into -- we may -- into one aspect
6 where we get information from outreach
7 programs and material provided by claimants
8 and petitioners. And I'm particularly talking
9 about the badge left behind issue where we're
10 provided with lots of information where there
11 were claims made that are very important to
12 the credibility of the records. And there may
13 be other situations where information is
14 provided that goes very much to the heart of
15 the records that we're using to do dose
16 reconstruction.

17 And right now SC&A and NIOSH are
18 working diligently to find a way to do more
19 than just listening to the statements made by
20 the claimants, petitioners and record their
21 concerns about records left, film badges left
22 behind but to try to take steps where we could
23 actually go into the records and help to get
24 greater insight into the nature, prevalence
25 and significance of the information that we

1 receive.

2 So I think an aspect to the outreach
3 program in addition to listening and
4 documenting and taking into consideration the
5 information provided by claimants and
6 petitioners is there actually might be certain
7 technical things that we could do as follow-up
8 action items that tries to get, shed a little
9 more light into these matters. One, of
10 course, is this records left behind, and I
11 think we're going to do something there.

12 But I guess I'd like to hear a little
13 bit more about the kinds of information that
14 we often get related to factual information
15 regarding what took place at a site that might
16 have a bearing on dose reconstruction and are
17 there things that we can do in order to I
18 guess get deeper into the issue and its
19 significance with respect to a given claimant,
20 site profile or a given SEC petition.

21 **MR. ELLIOTT:** John, this is Larry Elliott.
22 I think what I hear in your comment is that we
23 do our outreach effort, or we have input given
24 to us and you're offering that there are ways
25 that we can react to that input and how, there

1 are many ways that we can react to it, of
2 course. But one way may be to use a technical
3 approach to examine the particular issue at
4 hand that's being provided to us. I think in
5 that what I would ask you to think about is
6 the, there has to be a decision point on what
7 level of influence a particular issue has on
8 our dose reconstruction capability or an SEC
9 evaluation.

10 And in some cases we would say, well,
11 that issue, while we recognize it may happen,
12 it may not have a lot of bearing, a lot of
13 influence, a lot of minimal benefit to claims,
14 to petitions. In other instances we may say,
15 yeah, there is a broad benefit here. It's
16 more applicable that we pursue that and see
17 what we can make of that. And so just keep
18 that in mind that we do make these kinds of
19 decisions about how far to pull the string or
20 how far to push to see what gravity the issue
21 brings to our ability to reconstruct dose or
22 answer an SEC evaluation.

23 **DR. MAURO (by Telephone):** Yeah, I think
24 you've captured the gist of it. I know quite
25 frankly this is one time this business with

1 the Nevada Test Site and the badge left
2 behind, where really I guess what I would say
3 a major effort or a substantial effort is
4 being mounted to look into this matter. I
5 think to a certain degree this has also
6 occurred on the Rocky Flats where petitioners
7 made certain claims, and it triggered a
8 certain amount of follow-up activity.

9 **MR. ELLIOTT:** Sure.

10 **DR. MAURO (by Telephone):** I'm not sure if
11 we really had a discussion of almost when we
12 hear through the various outreach programs
13 certain information comes in a process to make
14 a judgment. You know, what should we do? And
15 maybe it shouldn't be on an ad hoc basis which
16 I think it might be right now. It rises to
17 the level of great importance like when
18 Senator Harry Reid comes to the meeting and
19 says, listen, we've got a problem here.

20 But I'm just offering this up as food
21 for thought, and maybe there are ways that we
22 can be, and maybe we are already so I may be
23 out of place here, to be a little more
24 proactive in maybe actually having a set, I
25 guess, threshold criteria or categories of

1 information in claims that would trigger
2 certain lines of inquiry.

3 Right now I guess, the only reason I'm
4 saying this now is I'm just looking at it from
5 what has transpired recently with regard to
6 badges left behind. And I know that that has
7 been embraced in a very serious way with a
8 significant effort being made by all parts to
9 try to get to the bottom of that. There may
10 be other categories of information like this
11 that we get that may warrant that type of
12 follow-up activity. I don't know if there are
13 other examples. That's the only one I could
14 think of.

15 **DR. MAKHIJANI:** Well, let me give another
16 example. You know, Denise is on the line, and
17 she will remember this. In her petition there
18 was a very important claim that was made that
19 some of the data were bad, were falsified.
20 And I was responsible for our team to
21 investigate that, and NIOSH also investigated,
22 produced quite a lot of documents. I know
23 Mike Thorne participated.

24 We tracked down the urinalysis data.
25 There had been some anomalies in the data. We

1 tracked down all of the reasons for those
2 anomalies. It turned out there had been some
3 problems with the labs. They had been
4 acknowledged at the time. We determined that
5 it wasn't a case of fraud or somebody in bad
6 faith trying to cover up high doses. We were
7 able to track down all that information.
8 There's certainly been a precedent to what is
9 happening in NIOSH.

10 And Denise might want to add to some
11 of this because we worked quite closely with
12 her as the petitioner. I went out to St.
13 Louis and held a meeting with her and people
14 that she gathered together about this and
15 other topics. So this is not the first time
16 that we're handling a very sensitive topic.
17 At that time at least I believe we did so very
18 successfully.

19 Denise, are you on the line still?

20 **MS. BROCK (by Telephone):** I am, Arjun, and
21 I have to agree with that. I thought that the
22 outcome was amazing. And the workers I always
23 say are the wealth of information because they
24 trigger each others' memories. And I know I
25 had had some documents from the earlier years

1 that actually were pointing to the
2 falsification of records. And I think that
3 was the case in those earlier years, but Arjun
4 was very up front and said I'll look at this.

5 And I have to be completely honest,
6 and I rightly so had so much faith in SC&A and
7 felt that whatever findings they came up with
8 would be right on target and accurate and that
9 was the case with those latter years. And the
10 meetings with the claimants or the subject
11 experts or site experts I think is what you'd
12 call them, at that time there were probably --

13 Arjun, don't you think at least
14 probably I'd say two or three meetings and
15 then Mark Lewis came in as well for the Weldon
16 Springs site. So the showing of workers was
17 tremendous, and I think that it was definitely
18 a plus in the whole process.

19 **DR. MAKHIJANI:** We got a lot of very useful
20 information and it is documented in our
21 report. And, of course, all of that was run
22 by --

23 Denise, I believe all of the people
24 who showed up for that rather big meeting that
25 you organized in April, I remember it very

1 well because it was really an extraordinarily
2 successful meeting. The people who came were
3 very, very knowledgeable, and there were many
4 different site expert worker points of view
5 that were represented there. And so I think
6 we've resolved a very major sensitive issue
7 very successfully at that time.

8 **MS. BROCK (by Telephone):** And that was in
9 the very beginning stages, too. I mean, that
10 was when this all first started, and I
11 remember the advice that you had given me as
12 well as Kathy DeMers. And what I tried to do
13 was gather folks from different walks in that
14 facility, you know, your chemical operators,
15 maintenance workers and electricians, and
16 then, of course, office staff, try to get as
17 many people as you could that had different
18 ideas about what their work environment was.
19 And I thought it was very, very useful, very
20 helpful.

21 **DR. MAURO (by Telephone):** I'd like to add
22 another perspective on this, and it is related
23 to this outreach program. That is, what I'm
24 hearing is at least there were two separate
25 categories of outreach information that had

1 fundamental importance to judgments made.
2 One, the first one, the one you're referring
3 to now dealing with the credibility of the
4 records from the point of view of
5 falsification.

6 With regard to that obviously Arjun
7 and NIOSH and others went through a process of
8 looking for particular metrics or information
9 embedded in the records. And clearly, what
10 emerged from that was a judgment that we don't
11 really see any systematic, deliberate
12 falsification of records. And I recall that
13 was the outcome, but I have to say that I
14 don't recall what was it that was uncovered
15 that led to the general, universal agreement
16 that that was the case.

17 In other words it seems to be a very
18 difficult question to answer, but obviously we
19 all did come to a place that says, no, I think
20 that maybe certain things that took place, but
21 it wasn't of such a nature that we are talking
22 about a systematic, in this case it was
23 falsification of records where records were
24 deliberately changed. I'm not quite sure how
25 that happened that we all came to that place

1 which is good.

2 In a similar way I could say right now
3 we are now embarking on a related type of line
4 of inquiry. It is not falsification of
5 records, but it is this business of leaving
6 badges behind. And I know that we're trying
7 to design, right now as we speak, a protocol
8 or a plan. Okay, how do you go into the
9 existing records whatever form they're in and
10 extract information that would lead us to a
11 point where we could say something insightful
12 on whether or not the extent and prevalence of
13 that particular practice.

14 But more importantly once we
15 understand the nature and prevalence of the
16 practice, to the extent we can find that out,
17 how do we judge whether or not that practice
18 was of such an extent in nature that it could
19 do one of two things. One, will it undermine
20 our ability to do dose reconstruction for
21 people who do have records? And two, will it
22 undermine our ability to create coworker
23 models because of the nature of the bias or
24 whatever might have happened -- I'm not saying
25 it did -- could affect the upper end tail of

1 the distribution of exposures -- external
2 exposures in this case for film badge workers
3 -- that you're going to have quite a
4 challenge.

5 So what I'm getting at is the first
6 case clearly we went through a process where
7 we looked into the claims in such, in
8 practice, and we're right now about to embark
9 upon a similar study more related to Nevada
10 Test Site and badges left behind. But more
11 importantly that very same issue is going to
12 have applicability to other sites where these
13 claims are made. So I guess what I'm saying
14 is that emerging from the processes that we
15 have engaged over the years are solutions or
16 strategies for coming to closure on what I
17 consider to be by far the most important
18 issues. That's the credibility of the
19 records. When all is said and done there's
20 the science on how you use the records, and
21 there's always going to be some debate on how
22 to make best use of records, but more
23 importantly, especially as it applies to SEC
24 issues, is the credibility, reliability and
25 completeness and adequacy of the records that

1 really go to the heart of the matter. So I
2 believe that we're talking about a subject
3 that might be as important as it possibly can
4 be. Because the way we deal with these
5 claims, these concerns, and the way we elicit
6 the information, record it, document it and
7 then follow up on it is going to go to the
8 heart of our ability to deal with these
9 fundamental issues.

10 **MR. GIBSON:** I'm getting some looks around
11 the table here. I think we're going to take a
12 15-minute break and then we'll return and
13 we'll pick up on this issue and roll right
14 into SC&A's discussion of what they found in
15 their audits of the worker outreach. So we'll
16 take a break, and we'll return at 11:15,
17 11:20.

18 **DR. BRANCHE:** We'll put the phone on mute.
19 (Whereupon, a break was taken from 11:05
20 a.m. until 11:20 a.m.)

21 **DR. BRANCHE:** We're re-engaging the call.
22 This is Christine Branche from NIOSH. Just
23 wanting to remind everyone who's participating
24 by phone to please mute your phone. It does
25 really enhance the quality of the listening

1 for the people who are participating by phone.
2 If you do not have a mute button, then please
3 use star six to mute your phone. And when you
4 are going to speak, please use star six again
5 to unmute your phone. We really appreciate
6 your cooperation and for those of you who are
7 in the meeting room if you could please mute
8 your phone or your pager we would appreciate
9 that also. Thanks so much.

10 Mr. Gibson.

11 **SC&A OVERVIEW OF WORKER OUTREACH**

12 **MR. GIBSON:** We'll reconvene now with a
13 continuation of what John Mauro and Arjun was
14 discussing. If there's any other comments and
15 if not, we'll go ahead and let SC&A start with
16 their overview of their activities on worker
17 outreach and participation.

18 **DR. MAKHIJANI:** Do you want me to confine
19 comments to the review we did of NIOSH's work
20 or also talk about our own work?

21 **MR. GIBSON:** I'd say given this is our kick-
22 off meeting just go ahead and feel free to
23 give whatever comments you have.

24 **DR. MAKHIJANI:** Kathy, you will help me.

25 Of course, SC&A has done quite a lot

1 of worker outreach so let me just talk about
2 our own procedures for doing that. Kathy
3 DeMers, who's on the line, has been our main
4 point person on that to organize it, has done
5 quite a lot of work in this area. A number of
6 other members of our team have also
7 participated.

8 We do site expert outreach in the
9 context of site profile reviews, and we also
10 do it in the context of SEC petitions. And
11 when there's a petition for the site where
12 we've already done the site profile review, we
13 do follow up with the specific issues in
14 relation to petitions.

15 Part of our procedure -- and Kathy has
16 done really a magnificent job of this -- is we
17 try to go to areas and periods where we need
18 information. So we will try to contact
19 workers in the early years, people who are
20 retired as Wanda was saying. Because, for
21 instance, at Hanford we realized a lot of the
22 problems and issues are in relation to the
23 '50s and '40s. And so we specially try to
24 contact retired workers who would have special
25 experience in health physics or in the canyons

1 or in specific, in area 300.

2 So we identify areas and periods and
3 job types. We are also, in SECs by our
4 procedures approved by the Board, obliged to
5 interview the petitioners, and so we always do
6 that. And we compile the raw interview
7 records, and we keep those raw interview
8 records mostly internal. They're always
9 approved by the individuals themselves. We
10 generally don't release an individual's record
11 unless it is approved.

12 We may incorporate some things into a
13 summary, a longer summary because there are
14 many, many interviews which produce a very
15 large volume of paper. We produce a
16 substantive summary by topic, period, and in
17 the areas of expertise where we were looking
18 for input. And then we incorporate that
19 according to our best technical judgment in
20 the site profile review or SEC review.

21 So, Kathy, do you want to add
22 something to the procedures that we employ in
23 terms of our own interviews and the kinds of
24 things we've done?

25 (no response)

1 **DR. MAKHIJANI:** Kathy, are you on the line?

2 (no response)

3 **DR. BRANCHE:** Is anyone on the line?

4 **DR. MAURO (by Telephone):** This is John
5 Mauro, yes, I'm on the line.

6 **DR. BRANCHE:** Okay, I just want to make sure
7 we hadn't lost anybody with our little
8 interruption earlier.

9 **DR. MAKHIJANI:** Kathy?

10 (no response)

11 **DR. MAKHIJANI:** I think we may have lost
12 Kathy.

13 Anyway, so she is our point person.
14 Maybe at another break I might call her. She
15 might want to add something to it. But that's
16 a pretty fair summary of what we've done.
17 When we do have very specific issues that
18 might be raised in an SEC petition, we
19 catalogue those issues and try to follow each
20 one of them.

21 And I gave an example earlier of the
22 most sensitive issue that we resolved.
23 Falsification issues I think are always the
24 most sensitive both in terms of the strength
25 of feeling that people bring and there's

1 usually some kind of basis, too. Denise had
2 some documents that indicated that there may
3 be problems in the data and so on. And so we
4 always try to follow those up both in terms of
5 interviews and associated documentation.

6 We try to seek documentation in
7 addition to the interviews from the people we
8 interview in case they have documents that we
9 may not have access to otherwise. Not often
10 the case, but sometimes we can get quite
11 valuable information. We also reach out to,
12 sometimes survivors can just be experts.
13 Denise is an excellent example, somebody who
14 educated herself as the daughter of somebody
15 who worked there who wound up knowing an
16 enormous amount, having a lot of extremely
17 valuable documentation.

18 And now also other people, activists,
19 community leaders who may have a lot of
20 information and documentation. And we try to
21 reach them as well. So if there are questions
22 about our procedures, I'll try and handle them
23 best. I'm sorry Kathy's not --

24 Kathy, are you here?

25 **MS. DeMERS (by Telephone):** Yes.

1 **DR. MAKHIJANI:** Okay, Kathy, did you want to
2 add something?

3 **MS. DeMERS (by Telephone):** I just came back
4 on so I'm not quite sure --

5 **DR. MAKHIJANI:** I generally outlined what we
6 do in terms of identifying periods reaching
7 out to retired workers, community leaders,
8 active workers, the various areas of
9 expertise, both production and health physics,
10 operators and so on in which we need
11 information, and then how we document that and
12 how we publish it and use it. And I said that
13 you were our main point person in devising
14 those procedures.

15 If you want to add something, if there
16 are special things we do to make sure that we
17 get all the information we need, please go
18 ahead.

19 **MS. DeMERS (by Telephone):** Would it be
20 helpful to walk through the process?

21 **DR. MAKHIJANI:** Yeah, why don't you do that
22 since you are our main point person and this
23 is the first time we're actually presenting
24 the working group with that, if that's all
25 right with Mike. It may be a little

1 repetitious, but it might be helpful since
2 Kathy DeMers is our star in this.

3 **MR. GIBSON:** Yeah, go ahead, Kathy.

4 **MS. DeMERS (by Telephone):** Once we are
5 assigned a site the first thing that I have to
6 do is make contact with DOE and inform them
7 that we are going to conduct a site visit,
8 that that will include onsite interviews,
9 offsite interviews, and in addition records
10 reviews. This is kind of off topic but it's a
11 part of our site visit.

12 We ask to, as far as the onsite
13 interviews, we ask to interview people who are
14 possibly historians, production workers and
15 operation workers from all different fields.
16 For example, if we have primarily a reactor
17 site, we'll pull reactor operators. If we
18 have accelerators, we'll pull accelerator
19 operators. We'll pull scientists.

20 At the Test Site we tried to identify
21 test records and engineers that were involved
22 in testing as well as the maintenance and
23 crafts and the ^-type workers. We reach out
24 to the security guards, engineering. It's all
25 types of people. Key elements that we always

1 try and hit are the radiological records
2 people, internal and external dosimetry,
3 environmental monitoring, the medical
4 department and the radiological field
5 operations.

6 The EEOICPA Coordinator of each site
7 helps us to arrange the onsite interviews.
8 Sometimes they are more productive than
9 others. What we tell them is we target people
10 who've been at the site with the exception of
11 the rad con people and environmental people at
12 least 15 years because through our experience
13 we found that those people are more likely to
14 be able to answer our questions.

15 For offsite interviews we will tap
16 into just about any resource that we are aware
17 of including retirees, organizations. If I
18 hear about a breakfast group, I will show up.
19 We talk to advocates to identify key workers.
20 We talk to unions. We talk to the radiation
21 groups to identify their predecessors.

22 Another thing we do is in our review
23 of documentation several names will be
24 repeated in particular areas, and we may ask
25 to interview those people if they're still

1 working or maybe try to track them down.
2 There's a lot of different ways we can come at
3 it so we get the right people.

4 Some sites are more difficult than
5 others because of classification issues, for
6 example, Lawrence Livermore or Los Alamos.
7 And if we perceive that from the beginning
8 that there may be issues, there is an option
9 that the interviewee can either participate in
10 a classified interview or an unclassified
11 interview. All of our interview notes have to
12 go through a derivative declassifier,
13 regardless of whether it was in an
14 unclassified or classified setting.

15 We typically interview groups of like
16 people. We typically don't like to have more
17 than six people in a group. There's usually
18 two of us involved in the interview process in
19 site visits. We prepare in advance questions
20 that are targeted at particular groups. For
21 example, you want to be asking questions about
22 internal dosimetry process and bioassay to the
23 internal dosimetry group versus machining
24 processes to maintenance and crafts and the
25 like. You don't want to ask a health

1 physicist how they ran the reactors and so on
2 and so forth.

3 We try to provide these questions in
4 advance and that does two things. One is it
5 relieves some of the anxiety of people that
6 are being interviewed. And secondly, it
7 allows them to be better prepared so that they
8 either come with written responses or they
9 come with documentation that answers the
10 questions.

11 Once we conduct interviews, and we
12 take notes, and what we do is when we come
13 back we compile individual summaries of the
14 interview groups. So if we have maintenance
15 and crafts group, then we will prepare the
16 interview summary for them, and it's broken up
17 by subgroups. They are returned to the
18 interviewee either through the EEOICPA
19 Coordinator or mailed out to offsite people.
20 They are allowed the opportunity to review the
21 summary and correct it and add to it if they
22 want. Then they provide those comments back
23 to us. We integrate it into their individual
24 summary.

25 We have part of our report, take all

1 of the interviews that we've conducted, which
2 can be quite a number sometimes, and we
3 compile it into a master interview summary
4 which is what you see in the site profile
5 review report. This consolidates a lot of
6 similar comments that are shared by different
7 sets of people. For example, at Fernald I
8 don't think that anyone disagreed that there
9 wasn't a contamination problem and by
10 consolidating it I don't have to say that 40
11 times.

12 One of the most important things that
13 I find that works is a very simple concept.
14 That's shut up and listen. Typically, when we
15 go through the interviews although we have
16 questions prepared in advance, inevitably the
17 worker will bring up a topic that we didn't
18 plan for, so we will have to ask follow-up
19 questions so some of the questions are
20 impromptu in the process.

21 One of the, another important thing
22 that I realized early on is that statements
23 that appear to conflict may not always be
24 conflicting. It's very dependent upon the
25 perspective of the individual being

1 interviewed.

2 One of the ways I discovered this was
3 that the guards at Los Alamos kept saying that
4 they were eating in a radiological area. So I
5 had them take me out and show me physically
6 where they ate and their stations were and so
7 on and so forth. And noted that the posting
8 was a radiological controlled area in which
9 any health physicist would say you're allowed
10 to eat. Now so the guards are saying we ate
11 in a radiological area. And from their
12 perspective they did.

13 When you ask the same question of a
14 health physicist, the first thing that comes
15 into his mind or her mind is a contamination
16 area. And they will say absolutely, no, we
17 did not allow eating in the radiological area.
18 So from their both perspectives they are
19 correct, and we have to learn to identify
20 those type of situations.

21 I have found the tours that I've been
22 taken on extremely helpful. We've done it at
23 Los Alamos, at Paducah, at Portsmouth and a
24 couple other sites. And the benefit of that
25 is that you end up conducting more of an

1 infield interview where you can visualize
2 what's going on.

3 Another thing that happens to me
4 occasionally is that I get into a situation
5 where I find a valuable person just based upon
6 what I'm doing. For example, when I went to
7 the Atomic Testing Museum to look around,
8 inevitably they sent me through the museum
9 with a former security guard. And he actually
10 was very helpful and provided insightful
11 information. But you have to be ready to do
12 those impromptu-type interviews.

13 I guess it's probably best if I answer
14 questions if anyone has any at this point.

15 **MR. GIBSON:** Thank you so much, Kathy.

16 Do I have any questions here in the
17 room?

18 **MS. MUNN:** It's a good summary.

19 **MR. GIBSON:** Yes, it was.

20 **DR. MAKHIJANI:** Maybe I can go through our
21 review of NIOSH's procedures.

22 **MR. GIBSON:** Yes, thank you, Kathy.

23 Now we'll hear from Arjun.

24 **DR. MAKHIJANI:** We reviewed the procedure
25 that Larry referred to earlier which is from

1 2005, so it's over two years old. We sent the
2 review, this Procedure-0097, and sent the
3 review to the Board or to this working group.
4 I think it went to the whole Board in November
5 and to the Procedures working group and this
6 working group.

7 **MS. MUNN:** I got it. It just seemed to me
8 that I read it so long ago, Arjun, my
9 apologies.

10 **DR. MAKHIJANI:** That's because there have
11 been so many procedures.

12 **MS. MUNN:** Yes, so much has happened since
13 then. But thank you for capturing in there
14 the concern that I had expressed earlier about
15 what groups were contacted. That's
16 appreciated.

17 **DR. MAKHIJANI:** As I alluded to earlier, we
18 found that, you know, there were a lot of good
19 things about the procedure which we enumerated
20 and including the fact that there was a
21 procedure for reaching out to workers. And
22 reaching the unions is very important. In
23 many sites they are the main representatives
24 of the vast majority of workers. So I think
25 it does cover most of the kinds of site

1 expertise, but it doesn't cover everything.

2 It doesn't cover retirees. It doesn't
3 cover certain kinds of site expertise. So any
4 comments that we've made in regard to reaching
5 others shouldn't detract from the fact that
6 it's very important to reach the unions and
7 their contacts with the people whom they know
8 are repositories of a lot of site expert
9 information. So the additional sort of
10 suggestions were not a critique of the fact
11 that NIOSH is reaching unions, but that
12 they're not an exclusive repository. And, you
13 know, the whole scheduling and the procedures
14 and so on were very good.

15 Our main findings in terms of the
16 deficiencies were five findings. And NIOSH
17 makes an audiotape of each meeting to help
18 prepare the minutes. And then the minutes are
19 sent back ^ some way of understanding that the
20 minutes are sent back to the union contacts
21 for review. And then whether or not they hear
22 back from them, they're finalized after 60
23 days and then the audiotapes are destroyed.

24 We felt the destruction of the
25 audiotape record, I mean, you may not elect to

1 make an audiotape, but once there is an
2 audiotape record, we felt that it should be
3 maintained and not destroyed. So especially
4 as the minutes may be finalized without, I
5 realize that minutes have to be finalized at
6 some point, and there has to be some kind of
7 deadline so we were sensitive to that.

8 But if minutes are finalized without
9 feedback and then the tapes are not there,
10 then it becomes a ground for misunderstanding,
11 a he said/she said situation that can't be
12 resolved. So some way of finalizing these
13 minutes and communicating to workers and
14 maintaining a record and creating a final
15 record that won't be the object of disputes
16 and differences is very important. I mean,
17 you can't eliminate all disputes and
18 differences, but I think the way this is being
19 done raises a lot of issues that could be
20 avoided.

21 The second finding was that there may
22 be follow-up discussions with workers and they
23 didn't have any indication of how these
24 follow-up discussions are being documented,
25 used and integrated. Sometimes when we do

1 that, for instance, in regard to the
2 Massachusetts site that we had so much
3 discussion on, Chapman Valve, I called up
4 certain people as follow up because that as I
5 was compiling the summaries I had some more
6 questions or some issues were not resolved,
7 then it's documented as a supplementary part
8 of that interview.

9 And we couldn't tell from the ORAU
10 procedure how any of these follow-up
11 discussions are being documented. And then
12 there should be some provision for
13 documenting. And then there were some groups
14 of workers who were not systematically
15 included by the procedure. For instance,
16 workers were not able physically able to
17 attend meetings. They may have been ill or
18 may not be nearby. They may be key site
19 experts who moved away from that location.

20 There should be a way to identify some
21 of these people, reach them to do telephone
22 interviews. You don't have to be there. We
23 often do telephone interviews when we can't
24 reach people or it's not convenient or
25 expeditious to go there, but we try to get the

1 information. But there should be some way of
2 doing outreach to a variety of groups of
3 workers, some provision for classified
4 interviews which we did not see. And we've
5 already discussed, Larry in the earlier
6 discussion already said that a broader
7 outreach is needed to retirees and various
8 groups of workers.

9 And our last finding was that, as
10 Larry has already alluded, it's kind of an
11 informal system of reaching the managers and
12 administrators and senior health physicists
13 and that were not part of this procedure in a
14 kind of a two-track system, one for unions and
15 one for administrators, managers. And I
16 really appreciated Larry's comment at the
17 start of this discussion in recognizing that
18 and kind of treating everybody's site
19 expertise on a par and documenting it on a
20 par.

21 So those were our main findings in the
22 review, and this is the first time I guess
23 we're having a discussion of that because I
24 don't think we had a discussion of it in the
25 Procedures work group. I think it was ^.

1 **DR. MAURO (by Telephone):** Arjun, this is
2 John. I would like to add a little bit to
3 that because -- and if it's okay with everyone
4 -- I have sort of a different view. I read
5 all of the attachments to all the site profile
6 reviews, and then I get involved in some site
7 visits, and I get involved in some of the
8 follow-up investigations, the kinds we have
9 now. And I do have a perspective that I'd
10 like to offer. And it's intended solely as
11 being a type of constructive observation that
12 please take it in that spirit.

13 I get the sense that to a certain
14 degree when NIOSH makes its visits it has many
15 purposes. One of the most important purposes
16 is to try to inform the claimants and the
17 workers, and it has to do with the site
18 profile. What the site profile is. And it's
19 a communication where NIOSH is explaining to
20 the workers. Of course, part of that is to
21 elicit information from the workers, and I
22 have to say that I do get a certain amount,
23 after three, four, five sites, it seems that
24 that direction, that the information flowing
25 from the workers to NIOSH, is a little bit

1 different than the way in which for better or
2 worse it's unfolded at SC&A.

3 At SC&A I would say overwhelmingly the
4 purpose when we go out for our visit is -- and
5 Kathy described the process, but prior to
6 actually going out and preparing let's say
7 certain lines of questions, you know, we
8 review the site profile, and we review all of
9 the supporting documentation. And we get to
10 the point where we have a sensibility of areas
11 where we like to learn some more. So really
12 our main mission is to continue with what we
13 call, you've probably heard this term before,
14 with our horizontal review.

15 Think of it like this. We're
16 basically trying to find out are there aspects
17 to the types of operations that took place,
18 the practices that took place, the
19 radioisotopes that were handled, that somehow
20 were missed in the site profile or
21 inadequately evaluated. Because that's really
22 what our mission is.

23 So our role is more one of probative
24 to say are there areas of inquiry that perhaps
25 the site profile could improve upon. And

1 then, of course, once we start to learn more
2 about the richness and complexity of the
3 activities at the site, then we, and we start
4 to zero in on some areas that seem to be
5 especially important -- and you've heard us
6 refer to this also as a vertical review.

7 So all I'm trying to say is, and I'll
8 be glad to be corrected, is that I think when
9 we go out, we're going out more from the point
10 of view of learning much, much more about the
11 site so that we could provide insightful
12 commentary on the site profile. And I think
13 that the feedback that we've gotten from, at
14 least on a number of occasions that I've been
15 involved in, is that that was a bit different
16 than the nature of the outreach communication
17 meetings between, let's say, NIOSH and the
18 workers.

19 And again, I'm meaning this purely as
20 constructive. I think it's one of the
21 mission, and I think our mission is usually
22 fairly simple. We're trying to learn as much
23 as we can. And I think NIOSH's mission on
24 going out probably has multiple purposes.

25 And the benefit, of course, is

1 achieving multiple objectives, but the
2 drawback is that perhaps it's not probative
3 enough in terms of being, especially if it's,
4 you know, if you're building a site profile,
5 if you completed your site profile, probing
6 areas where the site profile might be
7 deficient. That's why we go out there.

8 And all the time and everything that
9 Kathy just described to you is really to try
10 to get a better handle on that. I guess I'd
11 like to put on the table and certainly hear
12 more back from NIOSH whether that perspective
13 that I walk away with as an observer of this
14 operation is a valid perspective. That I
15 think more could be done by NIOSH, and this is
16 by way of constructive criticism and be more
17 of a recipient of information to better probe
18 the granularity of the issues that might exist
19 at a site.

20 **MR. HINNEFELD:** This is Stu. I guess I'll
21 offer something on that. I mean, clearly,
22 when we're doing worker outreach in advance of
23 publishing a site profile there has not been,
24 there is no opportunity to know where are the
25 potential rough places because you're in the

1 middle of your research. And so I think
2 certainly at a preliminary outreach meeting,
3 there's essentially no way to focus inquiry
4 the way there is when you guys then go do it
5 and are reviewing a document already. And so
6 you have issues in mind already.

7 Now with respect to a second visit,
8 because quite frequently we do go back when a
9 site profile document is prepared and do
10 additional outreach. And it's probably been
11 awhile since we've done one of these I think,
12 specifically a roll out, a site profile roll
13 out.

14 I'd say there might be some validity
15 to what you say. I don't know that the author
16 goes there or the people in the outreach
17 meeting went there with the site profile
18 because they describe what the site profile
19 says, but they don't really go with the
20 thought in mind that, well, our research was
21 really strong in these years, and we really
22 feel good about here, but we had to make some,
23 draw some conclusions about these other
24 questions or these other years. And that
25 would be a focus area for this kind of case.

1 So I don't know that that was done exactly.

2 So there might be some validity to
3 what you say there. And I think there are
4 different intents and products and different
5 stages in the process when the two outreaches
6 are done which I think make it, well, for lack
7 of a better word, make it easier for SC&A to
8 proceed the way they do than it is for us to
9 proceed that way when we do these.

10 So I don't know that we'd ever do, I
11 don't know that we would do, which is not to
12 say we shouldn't as we build a site profile.
13 I don't know if we'd ever look as thoroughly
14 as some of you guys do on these
15 investigations, but I think there might be an
16 issue of perhaps if we do roll out site
17 profiles in the future, let's think about
18 before we go where does the evidence we have
19 look strong, and where does it look weaker and
20 we'll have to draw, make more surmise or more
21 suppositions.

22 And let's focus when we go to these
23 roll out meetings on the weaker portions and
24 say, here's the kinds of things we really, we
25 have an opinion that we've drawn from what's

1 available, but we could easily have missed
2 this and so we're really interested in the
3 information here. I suppose we haven't done
4 that, and that might be something possible.

5 And then there are also production
6 schedule constraints on our process as well
7 because until a site profile is written, dose
8 reconstructions for that site by and large
9 don't get done, and so they sit and wait. And
10 so people are waiting still longer. So all
11 those things wrap in I think into why we did
12 what we did.

13 **MR. ELLIOTT:** This is Larry Elliott. Let me
14 harken back to some of my opening comments.
15 It's very important for us to state the
16 purpose and focus of a meeting. And certainly
17 I'm not clear, John, on the meetings that
18 you're familiar with, but I would offer that
19 what Stu said is true and accurate. But in
20 cases like, well, like SEC for some sites, our
21 folks who have been leading the evaluation
22 effort have asked to have an outreach meeting
23 with specific questions in mind and probative
24 interests.

25 At the same time, as Stu said, when we

1 roll out a site profile, we're seeking all
2 information. We don't really have something
3 on the table perhaps that somebody can react
4 to. When we go back out with a meeting and
5 the purpose of that meeting being to explain
6 the site profile as it's been developed and to
7 open up for discussion where it can be
8 improved, I think we have some opportunity
9 ourselves to do a better job in being more
10 probative in that. And we should take
11 advantage of that opportunity, and we perhaps
12 haven't done so.

13 But I think, again, we need to be very
14 clear in the purpose and the focus and state
15 that in each of these meetings because that
16 really sets the stage for what we hope will
17 happen in the meeting. When we have a town
18 hall meeting, when we have a claimant
19 population at hand, we're generally not there
20 with a set of probative questions.

21 We're there to, we may have a part of
22 the focus of that kind of a town hall,
23 claimant population-based, audience-based
24 meeting may be to provide information about
25 their site, about the site profile perhaps,

1 but how we're doing dose reconstructions,
2 answer any questions they may have, hear
3 complaints, hear concerns and react to those.

4 And generally, it's a claimant
5 population so you have a variety of folks in
6 the audience, current workers, former workers,
7 survivors, interested parties who don't even
8 have a claim in. So that's a whole different
9 meeting, and we may, in fact, choose not to be
10 very probative there, more communicative and
11 educational in our presentation than seeking
12 direct input on a direct issue.

13 **DR. MAURO (by Telephone):** I'd like to add
14 to that because I think that SC&A has been the
15 beneficiary of some of the more difficult
16 things that you folks have to deal with. I'm
17 thinking about General Steel Industries. It
18 was an interesting experience. You're about
19 to see our report on that, and there is a, in
20 fact, it's almost like the perfect example of
21 how things unfold in a way.

22 That is, you folks went through a
23 process to generate basically Appendix BB to
24 TBD-6000 which goes into this business at
25 General Steel. And I'm bringing it up because

1 it's something that's very recent, and
2 something we're very involved in. And you had
3 outreach meetings, and you presented your
4 Appendix BB. And in a funny sort of way it's
5 almost unfair. You folks take your best shot
6 at putting together a strategy, a package, a
7 technical approach to how you're going to do
8 dose reconstruction for these Betatrons.

9 Then we come in on the back end of
10 that and say, okay, now we're going to start
11 our review. And then the floodgates open.
12 The next thing you know, without exaggeration,
13 we must have received over 100 e-mails with
14 information, pictures, data, reports, big
15 reports, all of which that was triggered by
16 the fact that you folks have put a straw man -
17 - I'm not going to call it a straw man.
18 That's not fair.

19 You put out your report, and then, of
20 course, we're brought in to have commentary on
21 it, and then the floodgates open. So in a
22 funny sort of way we're in a process that puts
23 you folks in a difficult spot because you're
24 going to be taking your first shot at putting
25 out a site profile as best you can within the

1 constraints of what a site profile's supposed
2 to do.

3 And then I have to say SC&A's in a
4 very fortunate position because then we come
5 in behind that after the claimants and
6 petitioners have had a chance to look at it.
7 And then we become the place where they could
8 unload. So I'm trying to step back and say I
9 think we've got a process that its very nature
10 is such that it does put, make it difficult
11 for NIOSH because you're sort of the first
12 guys hitting the, sort of like hitting the
13 beach. You're hitting the beach first to try
14 to make some inroads, learn things, and put
15 together as best you can a site profile. And
16 that's the tough part.

17 Then we come in behind that learning
18 everything that you guys have done because
19 we've read everything you've written, every
20 document you have, and then we have all that
21 in our pocket. And then we show up and so
22 then we're in a very good position to hear
23 what the folks have to say about your site
24 profile, and we're on the receiving end. So I
25 guess in a funny sort of way maybe the process

1 is working the best it could work, and it has
2 to be this way.

3 It's a strange way to package it, but
4 it's all part of the same process. And SC&A
5 just happens to be in the very fortunate
6 position that we're coming in at a stage in
7 the process where the claimants and the
8 petitioners are given an opportunity to
9 unload, so to speak, and really give us a
10 whole bunch of stuff that maybe they didn't
11 even think about before until they've had a
12 chance to cogitate on the site profile that
13 you guys prepared.

14 **MR. HINNEFELD:** Yeah, it's kind of easier to
15 know what information to provide when you see
16 an example like the site profile --

17 **DR. MAURO (by Telephone):** Yes.

18 **MR. HINNEFELD:** -- and what information is
19 being sought.

20 **DR. MAURO (by Telephone):** Well, I mean, in
21 a way I'm saying that I think that we, SC&A's
22 been fortunate in that the very nature of the
23 process we've been in has put us in a position
24 where we are able to get a tremendous amount,
25 I mean, the amount of information -- I'm using

1 General Steel as the example. You'll see our
2 report. It'll be coming out in a couple of
3 weeks. I have a copy of it actually right now
4 that I'm reading.

5 But there was literally an avalanche
6 of information that came in after you folks
7 published Appendix BB.

8 **MR. HINNEFELD:** I'll be sure to tell Jim
9 that you said that your job was easier than
10 his.

11 **DR. MAURO (by Telephone):** I think it is
12 easier. I have to say it because you guys are
13 the first ones to hit the beach so to speak.

14 **MR. HINNEFELD:** I was going to ask a
15 question on one of the findings, and I want to
16 make sure I'm clear on the meaning of Finding
17 number two, Arjun, where it's procedure does
18 not address follow-up discussions with
19 particular workers and how these are
20 documented.

21 So this is a situation where at an
22 outreach meeting, say a particular worker or
23 set of workers spoke up and knew a
24 considerable amount of information that was
25 valuable, and so to the extent that additional

1 conversations were desirable with those
2 people. And in that circumstance then we
3 would want to go get additional information
4 from those people. Is that the situation
5 you're talking about?

6 Or are you talking about a situation
7 where so-and-so asked this particular question
8 or provided some feedback, and we said, gee, I
9 don't know, but I'll get back to you, and then
10 making sure we actually get back to them? Or
11 making sure we get back to them and let them
12 know that the information they provided to us
13 in the outreach meeting is, in fact, being
14 utilized in the site profile. You see here is
15 in the site profile where we did revise with
16 the information you gave us.

17 So what, I'm not exactly sure in the
18 context or all of the above or what?

19 **DR. MAKHIJANI:** Stu, I must say looking at
20 what we wrote here we weren't exactly the
21 model of providing you with adequate detail.

22 **MR. HINNEFELD:** Well, most of the time you
23 guys are. I guess that's why it was puzzling
24 because normally I've got no trouble.

25 **DR. MAKHIJANI:** It's more detail than you

1 want probably, but here I don't think we did.

2 I think it was more in line with what
3 Larry was saying earlier is workers need to
4 know how their individual inputs resulted in
5 changes, and we didn't see a mechanism for
6 doing that. You do get back to the union
7 about it, and it's not always clear that the
8 people who actually provided you with the
9 input know what happened with their input.

10 **MR. ELLIOTT:** We came, and we left.

11 **DR. MAKHIJANI:** Yeah. And my comments
12 earlier actually were a little bit different
13 and should have been in the review, but I
14 don't see that they are. I'll just make them
15 for good measure here again.

16 Sometimes you need follow-up
17 discussions, and your revised procedures
18 should include some provision for doing those
19 discussions if questions come up. Like when
20 you communicate some findings to the person
21 that's authoring the site profile, then they
22 may want to follow up with some workers. And
23 there has to be a way of doing that and
24 documenting it.

25 **MR. HINNEFELD:** I will just comment that we

1 are now retaining the recordings of the
2 meetings. And I think it's actually a digital
3 recording now as opposed to tape, but we are
4 retaining those.

5 **MR. GIBSON:** Wanda, did you have a comment?

6 **MS. MUNN:** On the previous discussion with
7 respect to horizontal and vertical reviews,
8 since the word of the day seems to be
9 probative, I'm interpreting John's comments
10 about probative work that SC&A does as it's
11 what we've previously considered to be
12 drilling down into finer parts.

13 Am I correct in that assumption, John?

14 **DR. MAURO (by Telephone):** I think it's on
15 both levels, Wanda. I think that probative
16 goes not only toward the vertical, but
17 sometimes my experiences probative is even
18 more important on the horizontal. And the
19 reason I say that is very often when we start
20 our review of a site profile, the most
21 important things that happen are finding out
22 that there were activities that took place,
23 isotopes that were handled, that were not the
24 mainstream activity.

25 The classic example, I mean to go way

1 back is typically Y-12 or Fernald. Everyone
2 zeros in, and rightly so, on the uranium
3 issues. And one of the things that we came
4 away with during our horizontal review is, you
5 know, there are an awful lot of other
6 radionuclides and other practices that took
7 place there primarily dealing with thorium and
8 other isotopes and the exotic isotopes -- if
9 you remember that term -- that I consider to
10 be a horizontal observation that emerged
11 during what I would call our horizontal
12 probative activities.

13 So I would say the horizontal -- and
14 strangely enough, I sort of make it a
15 reversal. At one time I thought our verticals
16 were important, but, you know what? I think
17 it's our horizontals that are really
18 important. Do you know what the verticals do?
19 The verticals simply say, okay, through the
20 horizontal activity we identified a couple of
21 areas that really need a little bit more
22 investigation.

23 And then we go deeply for only one
24 reason. We go deeply only to the extent we
25 have to convince ourselves that it might be

1 important. So, for example, if we left out
2 some exotic radionuclides at a particular
3 site, yeah, we'll go vertical on that for one
4 reason, to say that, well, we don't know how
5 important it is and whether or not this could
6 be a significant area deficiency in the site
7 profile that needs to be explored further.

8 So we go vertical more from the point
9 of view to be able to make a case that, yes, I
10 think this is a real issue, or, no, you know.
11 So at one time I thought the vertical was
12 really where the action was, and I think it's
13 still important. We have to probe a little
14 deeply to make sure that the issue is real
15 that we uncovered during the horizontal, and
16 not only real but of some significance. But
17 it's the horizontal that I think that really
18 catches us and everyone else from the blind
19 side.

20 You're going to see a lot of this in
21 our General Steel Industry. There's a lot of
22 horizontal that came out. Of all the
23 avalanche of information that came in that
24 says there's a lot of granularity to the site.
25 Things that are going on that did not really

1 emerge initially. So I would say both aspects
2 are probative.

3 **MS. MUNN:** Well, heaven knows you've touched
4 on the aspects that give most of us most
5 trouble I think in all of the sites. But when
6 we talk horizontal and vertical, and I
7 immediately see X axes and Y axes and one of
8 the things that is key if you're looking at
9 data in that way, certainly for people with a
10 mindset like this one here, is there's a point
11 of diminishing returns.

12 And something that I know other Board
13 members have asked at various times the fact
14 that we identify another piece of information
15 is informative, but in terms of what its
16 effect is on our ability to do dose
17 reconstructions there is a matter of judgment
18 that needs to be made with respect to how far
19 one has to go with these other pieces of
20 information.

21 And I guess there's really no easy
22 resolution to that other than I did want to
23 make the point that there is a question of
24 diminishing returns with information. We like
25 to say there's no such thing as too much

1 information, but the truth of the matter is
2 there is also so much information that it
3 incapacitates our ability to move forward in a
4 reasonable fashion.

5 **DR. MAURO (by Telephone):** And, Wanda, you
6 just hit on something that has been the
7 subject of intense discussion within SC&A over
8 the last two weeks.

9 **MS. MUNN:** I'll bet it has.

10 **DR. MAURO (by Telephone):** You recall at the
11 last Board meeting in Vegas one of the
12 missions given to SC&A was to give some
13 thought to some innovative ways of thinking
14 about and doing site profile reviews that will
15 accomplish a number of things. One is
16 clearing the backlog. That really is still
17 sitting there. And perhaps other ways of
18 coming at the problem.

19 And what you just described we're
20 going to be presenting to you within two weeks
21 alternative strategies for coming at site
22 profiles in a different way that I think, and
23 there are advantages and disadvantages for
24 each of these other strategies, and we're
25 going to lay out a few of them for you. But

1 it goes to the heart of what you've just
2 described. How do we find a way to navigate
3 our way through this process and not get lost
4 in the weeds and spend lots of time and lots
5 of money on things that maybe we shouldn't be
6 doing?

7 Not that I'm saying we did that, but I
8 think that there are other ways of coming at
9 site profile reviews that certainly I think
10 the Board will want to look at and think about
11 and debate as opposed to it would be basically
12 somewhat different approaches to varying
13 degrees of what we're already doing. And it
14 goes to exactly the issue you raised.

15 **MS. MUNN:** Well, I appreciate that, and
16 thank you very much. I'm sorry. I didn't
17 mean to get us off on a tangent. I kind of
18 feel like we've strayed from the precise
19 nature of our discussion here but felt the
20 point needed to be made. And I'm glad to know
21 that SC&A's addressing that, too.

22 **DR. MAKHIJANI:** Wanda, just to be clear
23 about what we're doing in regard to what John
24 just mentioned is the backlog doesn't refer to
25 a backlog of site profile reviews that we

1 haven't finished. It refers to the backlog of
2 a large number of reviews that we've submitted
3 to the Board, but there hasn't been a comment
4 resolution process. Perhaps there are too
5 many comments and trying to develop some sense
6 of judgment about which ones are important,
7 and which ones we need to go through so we can
8 go through them in a more streamlined way.
9 That's I think the main topic of concern.

10 **DR. MAURO (by Telephone):** Arjun, thanks for
11 that clarification, very good.

12 **MS. MUNN:** It's kind of off of our primary
13 topic.

14 **MR. ELLIOTT:** Well, if I could move us back
15 to the topic at hand, I just want to say that
16 we appreciate the SC&A review of the ORAU
17 procedure, review that Arjun has outlined the
18 five findings on. We've taken those five
19 findings to heart, and you're going to see in
20 this revised procedure that J.J.'s working up
21 how we are addressing those. These are very
22 good comments, and we appreciate them.

23 **MR. GIBSON:** Arjun, do you have anything
24 else?

25 **DR. MAKHIJANI:** No, no, I think both in

1 regard to this and the earlier Procedure-0092,
2 the discussions have been extremely fruitful,
3 and if I can speak for our team, I think we're
4 very gratified that what we've done has been
5 useful to NIOSH. I think it's in all of our
6 interests that the workers and site expert
7 part of the input, and maybe if we can do
8 things that will be more helpful to you,
9 perhaps -- and I'm just laying this out on the
10 table without actually bringing it up with our
11 team just in the spirit of what's gone on. We
12 have quite a lot of detailed individual
13 interviews that are quite voluminous, and we
14 don't actually ever publish those. People
15 would drown in paper because, as Kathy was
16 saying, there's a lot of repetition and the
17 same things come up again and again, and you
18 don't need to hear all that. The Board I
19 don't think needs more paper from us, but we
20 could certainly provide that input to NIOSH --

21 **MR. ELLIOTT:** If you're willing to do so, I
22 think it would be --

23 **DR. MAKHIJANI:** -- if the Board authorizes,
24 and if a publication of those things is part
25 of the ^ there's some way of documenting all

1 the archives without burdening the Board with
2 even more voluminous reports that you already
3 get from us. I mean, John, I hope I'm not out
4 of turn in --

5 **DR. MAURO (by Telephone):** No, not at all.
6 In fact, you're bringing up a part of one more
7 issue that I wanted to bring up, and that has
8 to do with WISPRS (sic). As you know in our
9 PROC-0097 review, one of the things we really
10 never did to -- right now what we have is SC&A
11 has an historical record of interviews that
12 are part of every site profile review which
13 captures our findings.

14 In a similar way WISPRS -- and you may
15 have noticed if you had a chance to review our
16 review of PROC-0097 -- is that one of the
17 things we didn't do, because it wasn't
18 available to us at the time, is to factor in
19 and bring into the story our review of WISPRS
20 and how it deals with the -- because that's
21 very much part of the outreach program. So I
22 guess from both perspectives, SC&A's backlog -
23 - not the backlog but, I guess, compendium,
24 that's the right word -- compendium of
25 interviews and NIOSH's compendium of

1 interviews as captured in WISPRS, right now
2 has not really been brought forth before. And
3 any type of review, discussion of those
4 records, have really not been brought to the
5 foreground yet.

6 **DR. MAKHIJANI:** But wait a minute, John --

7 **DR. MAURO (by Telephone):** Sure.

8 **DR. MAKHIJANI:** First of all, in fairness to
9 NIOSH we did get access to WISPRS, and we were
10 so close to actually sending our review out
11 that we thought we should send it out. But
12 now, as Larry has said, they're moving on from
13 WISPRS, so I think it's a little bit in
14 getting information about certain interviews.

15 But as far our own interviews are
16 concerned, I mean, we've always made the
17 essential substance of that part of our
18 report. So the Board and NIOSH has, I think,
19 available to them all the essential technical
20 substance that arises in our interviews.

21 **DR. MAURO (by Telephone):** You're correct.
22 My apologies, Arjun. I threw them in the same
23 boxes in my head. I said, okay, we have this
24 compendium that's sitting in the back of every
25 one of our site profile reviews, and there is

1 also clearly a compendium of records of a
2 similar nature sitting in WISPRS, and I sort
3 of had them in the same place. But you're
4 right. Of course, our compendium is sitting
5 on the shelves, but there's a lot of material
6 out there to digest.

7 And you're right; we have been trained
8 by the way on the use of WISPRS, we just
9 never, it turned out the timing was such that
10 when PROC-0097 was written, it was actually
11 completed about two, three days before the day
12 we got the training program on WISPRS, and we
13 felt that we should put out that our work
14 product, and in fact, one of the things in our
15 review was to -- and I don't think we've done
16 that yet -- was to pose the question to the
17 work group whether or not there's anything we,
18 SC&A, should be doing in terms of WISPRS at
19 this time.

20 **MR. ELLIOTT:** I would react to both these
21 comments. Certainly, it's the working group's
22 prerogative to tell you whether they want
23 WISPRS reviewed or not or what they want to
24 include in your, again, I encourage you to
25 have a purposeful and focused review of worker

1 outreach here. And I've told you that we
2 don't put a lot of stock into this WISPRS
3 thing right now. We're moving beyond that.

4 But more importantly, I would speak to
5 Arjun's offer. Yes, we would hope that the
6 interviews that SC&A has done is not lost to
7 the program. But my immediate reaction is
8 that they should be, if you want to hand them
9 over to us, we'll compile them into the right
10 folders and associate them with the right
11 review documents to make sure that the Board
12 has full access on the O drive to those.

13 And then if people on the outside feel
14 that they need them, like we have before,
15 we'll get them redacted and provided. But
16 again, in a world of limited resources I think
17 that's the working group's decision to try to
18 make here.

19 **DR. MAKHIJANI:** We've tried to make the
20 summaries in order to look for ourselves. I
21 mean, it's very important to have some kind of
22 sense of the issues rather than what everybody
23 said at some time so we can actually make use
24 of the technical information. And that's what
25 you're trying to do in WISPRS. You're trying

1 to boil it down to a set of issues that you
2 can actually incorporate. And so we had
3 somewhat different methods of doing that, but
4 I think the objective was the same. But there
5 is a fairly rich record and we have all of
6 those interviews. On one occasion it has come
7 up where the Board did want the detailed
8 interviews, and they were provided to the
9 Board. I can't, it might have been the
10 Fernald site. I don't remember which site.
11 But it has come up once, and I don't know,
12 Kathy, but I think we would be able to provide
13 the individual interview records if Mike or
14 the working group --

15 **MR. GIBSON:** As far as the working group
16 we'll ask SC&A to look into what it would take
17 to do that and hand it to NIOSH. But as far
18 as actually giving SC&A to go ahead, I think
19 that I should probably send that request to
20 Dr. Ziemer and let him make that request of
21 the full Board rather than just the working
22 group even though it involves worker
23 information. But I think asking you guys to
24 do something should come from the full Board.

25 **DR. MAKHIJANI:** It also may involve quite a

1 lot of effort on our part, on NIOSH's part in
2 terms of actually --

3 Kathy, would it take a lot of effort
4 on our part to compile the raw interviews and
5 the final records of the individual interviews
6 and provide them to NIOSH?

7 **MS. DeMERS (by Telephone):** It would take
8 some effort.

9 **DR. MAKHIJANI:** I think there's a lot there.

10 **MR. GIBSON:** I think it's safe to say that
11 you guys can go ahead and look into what it
12 would take to do that. In the interim I'll
13 send Dr. Ziemer an e-mail and have him poll
14 the--

15 **MS. HOMOKI-TITUS:** Dr. Branche? I'm sorry,
16 this is Liz Homoki-Titus. I just wanted to
17 let you know since SC&A is not actually an
18 Advisory Board contractor, there's no reason
19 or, I mean, if you want to go to the Board to
20 get their approval that's fine, but SC&A is a
21 NIOSH contractor and every document that SC&A
22 prepares is owned by NIOSH. There shouldn't
23 be any reason for SC&A to withhold anything
24 from NIOSH.

25 **DR. MAURO (by Telephone):** Liz, I was going

1 to just say that. I mean, right now what we
2 do is, you know, we have the raw records. And
3 as you can imagine they're handwritten records
4 or prepared or written on a laptop in
5 shorthand so to speak. And then it's
6 converted into these attachments that we all
7 see in the back of our site profile reviews.
8 What I'm hearing is that is there an interest
9 to get those very raw original records? Is
10 that what the interest is and just turn them
11 over?

12 **MR. GIBSON:** If I could cut in here a
13 minute. Since there's some legal question
14 here, Liz, maybe if you and John could talk
15 about this issue and whether or not the Board
16 even needs to take an action for this to
17 happen and then get back to us. And if there
18 needs to be a Board action for us to recommend
19 SC&A to do that so we could just stay on
20 schedule here.

21 **DR. MAKHIJANI:** We're not withholding any
22 records. We've provided all the information
23 except the underlying, raw documentation.

24 **MR. ELLIOTT:** And maybe in the raw form is
25 okay. That might be suitable. We wouldn't

1 have to clean it up or do anything beyond
2 that.

3 **DR. MAKHIJANI:** Well, they're clean in the
4 sense that each interview has been gone over
5 and proofread and been approved by the person
6 who's been interviewed. So we have clean
7 records we could provide you, and that's not a
8 problem.

9 **DR. BRANCHE:** But, Liz, Mike asked you a
10 question.

11 **MS. HOMOKI-TITUS:** Yeah, I don't, I guess
12 I'm a little confused why there's a legal
13 issue here. SC&A is a NIOSH contractor.
14 Every document that SC&A prepares that is paid
15 for by NIOSH is owned by NIOSH whether it's a
16 handwritten document or whatever. So there
17 shouldn't be a legal issue regarding the Board
18 meeting to direct SC&A to release anything to
19 NIOSH.

20 **MR. ELLIOTT:** It's a procurement issue.

21 **MS. HOMOKI-TITUS:** Now, usually the Board
22 does make those types of directions by giving
23 their opinion to the DFO, and so therefore if
24 the DFO feels that it would be most
25 appropriate to seek that type of opinion from

1 the Board, they can do so. But there's no
2 legal question about who owns those documents.
3 NIOSH owns those documents.

4 **DR. MAKHIJANI:** It's simply a question of
5 the amount of effort and whether it was worth
6 it.

7 **MS. HOMOKI-TITUS:** Right, and that would be
8 between the DFO and the contracting officer to
9 figure out the prices. All I'm saying is that
10 there's no legal question about who owns those
11 documents or whether they can be released to
12 NIOSH.

13 **DR. BRANCHE:** I think we're fine.

14 **MS. HOMOKI-TITUS:** Okay, thanks.

15 **MS. MUNN:** It's a matter of diminishing
16 returns.

17 **MR. GIBSON:** Well, we're into the lunch
18 hour. Do we want to take a lunch break? Do
19 you all that are traveling want to go ahead
20 and see if we can finish up early or it's up
21 to you guys.

22 **MS. MUNN:** I vote for lunch myself.

23 **DR. BRANCHE:** How much longer do you think
24 we have, Mike?

25 **MR. GIBSON:** I think we probably can do the

1 rest of our, the work group's activities and
2 everything else and be ready to hear of their
3 worker or worker reps at one and hear their
4 comments, and probably by 1:30 or so.

5 **MR. ELLIOTT:** You're saying if we stick to
6 it.

7 **MR. GIBSON:** Let's take about a 15-minute
8 break then, and then we'll come back and get
9 stuff in here. We'll resume in about 15
10 minutes.

11 (Whereupon, a break was taken from 12:25
12 p.m. until 12:40 p.m.)

13 **DR. BRANCHE:** We are re-initiating the call.
14 Just a reminder to those of you who are in the
15 room if you could please mute your phones or
16 pagers. And those of you who are
17 participating by phone if you could please --
18 first of all could I hear from someone on the
19 phone to let me know that you can hear me.

20 **DR. MAURO (by Telephone):** I can hear you
21 fine, Christine. This is John.

22 **DR. BRANCHE:** Thanks, John.

23 Now, back to what I was saying. If
24 those of you who are participating by phone
25 could please mute your phones. If you don't

1 have a mute button, then please use star six
2 to mute your phones, and then when you're
3 ready to speak, use star six again.

4 I just admonish you that the quality
5 of the call for the persons participating by
6 phone is far enhanced when those of you who
7 are on the phone can please mute. Thank you.

8 Mr. Gibson.

9 **MR. GIBSON:** We'll reconvene. John or
10 Arjun, is there any additional comments you
11 want to make on your --

12 **DR. MAURO (by Telephone):** No, I'm fine,
13 thank you.

14 **DR. MAKHIJANI:** I think we've covered the
15 points that we want to make.

16 **MR. GIBSON:** Okay, then what we'll do, we
17 have time set aside at one o'clock for
18 workers, their representatives or advocates to
19 give comments so we'll try to wait awhile for
20 that area of the agenda and maybe move ahead
21 to any discussions, action items or paths
22 forward for this work group.

23 **DISCUSSION, ACTION ITEMS, PATH FORWARD, ETC.**

24 The only action that I've reported is
25 that we get periodic future updates from OCAS

1 on their new procedure and the database
2 they're developing. Is there any actions that
3 I've missed?

4 **DR. MAKHIJANI:** We were going to give you an
5 estimate of resources that it would take for
6 us to compile all the interviews and make
7 files for each site and give them to NIOSH.

8 **DR. BRANCHE:** If you could please make
9 certain that when you provide those estimates
10 that you copy me or Larry, if you prefer, just
11 forward it to me in our interaction with the
12 contract staff.

13 **DR. MAKHIJANI:** They will go forward
14 formally as things associated with resources
15 go from John Mauro, I guess, to the ^. I
16 don't even know who all it goes to.

17 **DR. BRANCHE:** John knows the drill. Thank
18 you.

19 **DR. MAURO (by Telephone):** This is John.
20 One question, there is a bit of overlap
21 between this working group and Task Three
22 working group chaired by Wanda in terms of
23 tracking issues and close out.

24 As you know, Wanda, you know, we have
25 our, this is just one procedure, well, two

1 procedures. We're really talking about, the
2 discussion we've had addresses PROC-0092, -
3 0097 and -0010, I believe. And I believe at
4 least two of those are part of our Task Three
5 work.

6 **MS. MUNN:** Yes.

7 **DR. MAURO (by Telephone):** And just from a
8 logistics point of view tracking all these
9 matters, how best to proceed?

10 **DR. MAKHIJANI:** Isn't this working group
11 part of Task Three also because of worker
12 procedures?

13 **MS. MUNN:** Yes, it is.

14 **DR. MAURO (by Telephone):** Okay, that
15 answered the question. Thank you.

16 **DR. MAKHIJANI:** And that's what I was
17 assuming anyway.

18 **MS. MUNN:** I think we're all in the same
19 box.

20 **MR. ELLIOTT:** So the Procedures work group
21 matrix would speak to Procedure-0097 being,
22 review Procedure-0097 being handled in this
23 work group.

24 **MS. MUNN:** Yes.

25 **DR. MAKHIJANI:** We have not prepared a

1 matrix for Procedure-0097. I don't know if
2 it's necessary, but the findings are --

3 **MS. MUNN:** I really don't think it is.

4 **MR. HINNEFELD:** We've already accepted them.

5 **DR. MAKHIJANI:** -- and NIOSH already has
6 accepted them, so --

7 **MR. HINNEFELD:** It's up to you guys.

8 **DR. MAKHIJANI:** --but they're not part of
9 the, I don't believe they're part of the
10 matrix we've given you, Wanda.

11 **MS. MUNN:** No, to the best of my knowledge
12 they're not, and I see no reason why they
13 should be actually.

14 **DR. MAKHIJANI:** Maybe you could just make a
15 note of it in that database that Kathy has
16 prepared as to what has happened.

17 **MS. MUNN:** We'll indicate it.

18 **DR. MAKHIJANI:** So I'll send an e-mail to
19 Kathy asking her to do that.

20 **MS. MUNN:** That should be all it takes.

21 **MR. GIBSON:** Does anyone have any ideas of
22 what they see as the path forward here as far
23 as we don't seem to be really getting into
24 depth on procedure reviews. It's mainly
25 trying to look at process and --

1 **MS. MUNN:** It would be of interest to me to
2 know whether additional worker group meetings
3 are planned at this time, and if so, where
4 they are.

5 **MR. GIBSON:** NIOSH or ATL?

6 **MR. McDOUGALL:** I think we're, well, Mark
7 and I are going to go to meet with the
8 steelworkers at their headquarters next week.
9 But pending that right now I don't think we
10 have anything on the agenda.

11 **MS. MUNN:** You see, I'm so far out of your
12 loop, I don't even know where the steelworkers
13 headquarters is.

14 **MR. McDOUGALL:** Pittsburgh.

15 **MS. MUNN:** Thank you. That makes sense.

16 **MR. ELLIOTT:** I think it does beg a question
17 though of how to make sure that this working
18 group is notified or knowledgeable of our
19 timeline of events. And I think we should
20 talk about that a little bit. I mean, I've
21 asked J.J. to make sure Mike knows and so Mike
22 could distribute, if that's not sufficient we
23 should examine that and see if we want to
24 enhance it. But I think there's also things
25 that we do that we need to think with regard

1 to this working group whether you want to know
2 about them or want to just know about worker
3 outreach meetings where we go out in the
4 field.

5 Or do you want to know like, for
6 example, two weeks ago we had a meeting here
7 in Cincinnati at the Taft Labs with the Metal
8 Trades Council, entirely different type of
9 meeting than we've been talking about. Maybe
10 Vern wants to speak a little more about this,
11 but we brought the Metal Trades Council here
12 really to build a better relationship and
13 answer questions that they had of us.

14 **MR. McDOUGALL:** That's exactly what the
15 purpose of this meeting was. And this is the
16 kind of meetings that I used to participate in
17 with government agencies when I was a union
18 representative. And it was a meeting to
19 establish process, to understand, you know,
20 just to understand how, so union people
21 understand how this works. The meeting was
22 asked for by the Metal Trades Department of
23 AFL-CIO, and then they brought in all their
24 affiliated Metal Trades Councils from the
25 different sites.

1 For those of you who don't know what a
2 Metal Trades Council is at some sites, notably
3 Hanford, Oak Ridge, Sandia, Pantex and
4 Fernald, there are really consortiums of
5 unions in the same way that Mike's local union
6 represented all the workers at Mound, there
7 were probably I'm guessing 12 or 13 different
8 local unions in the Metal Trades Council at
9 Fernald that represented essentially the same
10 classes of workers.

11 So these are, these and the
12 steelworkers and the building trades are
13 probably the three biggest stakeholder groups
14 at least in organized labor, a bunch of
15 others. But we felt it was time to really
16 bring these people together and talk about
17 what they had in common in terms of their
18 concerns at the sites and how we can move
19 forward with them to accomplish some new
20 things.

21 **MR. ELLIOTT:** Is that a type of meeting you
22 want to be notified of and offered an
23 opportunity to participate in or observe? You
24 know, we've also, so you can consider that.
25 We've also had workshops here where I told the

1 Board about our conduct in these workshops
2 have been to describe the dose reconstruction
3 process, and we've invited in organized labor
4 reps and worker advocates and activists to sit
5 in on these workshops.

6 We're planning another workshop for
7 later this spring, early summer timeframe
8 where we have a specific focus and
9 specifically targeted audience. And in that
10 focus we're thinking of responding to things
11 that this group has expressed they would want
12 to hear, want to know more about. So do you
13 want to know about those kind of things? I
14 would pledge to you we'd put together a
15 calendar of events and keep that updated so
16 that you know if we know what kind of events
17 you want to be made aware of.

18 **MS. BREYER:** We have an SEC outreach meeting
19 Denise and I are doing in Pinellas.
20 Originally it was at the end of February, but
21 it might go into March now whenever we're
22 planning it. Usually I send out an e-mail to
23 the full Board, but I can send that just to
24 Mike and let him distribute it as he needs.
25 But that's one we have coming up as well.

1 **MR. HINNEFELD:** Would it be easier to make
2 announcements to the whole work group?

3 **MS. MUNN:** It was my assumption when I asked
4 to be a member of this particular group that
5 this is the kind of information to which we'd
6 be privy, things that were coming up and
7 whether they were of a nature and of a focus
8 that seemed it would be reasonable for one of
9 us to attend.

10 But what has transpired for the most
11 part is that in most instances I personally am
12 aware after the fact that you've had meetings
13 somewhere, that Laurie has had meetings
14 somewhere, and unless it's something that Mike
15 has been notified that he has sent out a
16 message does anybody want to go, then I'm
17 completely unaware of them. I was under the
18 assumption that the work group as a work group
19 would have knowledge of what was transpiring,
20 by whom, where, ahead of time.

21 **MR. ELLIOTT:** So a calendar of events will
22 be more inclusive. We will try not to exclude
23 anything. Like, for example, we were invited
24 by DOL to a town hall meeting for Pinellas
25 that Laurie went to that I don't believe we

1 told you about.

2 **MS. BREYER:** Yeah, that was the Nuclear
3 Workers of Florida Advocacy Group. It was
4 just kind of getting started and invited DOL
5 out to one of their meetings. And then Monday
6 -- Tuesday and Wednesday and I have a press
7 release here from DOL, they're holding a town
8 hall meeting in Pittsburgh and invited NIOSH.

9 **MR. ELLIOTT:** For NUMEC.

10 **MS. BREYER:** For NUMEC. And they're taking
11 their traveling resource center, so I'll be
12 interested in seeing kind of how DOL holds one
13 of these town hall meetings. That's more of
14 the non-traditional in the sense of what NIOSH
15 holds from what we usually do, but we still
16 are invited to those regularly if that makes
17 sense. So there's even some of us going out
18 to that.

19 **DR. BRANCHE:** And there's no problem with
20 our turning the invitation over --

21 **MR. ELLIOTT:** Including the Board members.

22 **MR. HINNEFELD:** That meeting's north in
23 Kiskee Valley.

24 **MS. BREYER:** New Kensington.

25 **MR. HINNEFELD:** New Kensington, it's not

1 actually in Pittsburgh.

2 **MS. BEACH:** Well, and I'm curious, does
3 SC&A's site visits, does that have any bearing
4 on any of this? And, Mike, you might know
5 that. I don't. I know SC&A does site visits
6 to do interviews. Do we want to include those
7 or not?

8 **DR. MAURO (by Telephone):** This is John.
9 What we're doing is once we get a site profile
10 review authorization, for example, right now
11 we're authorized to do Argonne East and Weldon
12 Springs. The automatic process goes like
13 this. Kathy DeMers then begins the process
14 that she described earlier. Once she gets a
15 tentative date for such a meeting, then we,
16 usually me, I send out an e-mail to all Board
17 members and to Jim Neton that a meeting has
18 been scheduled, is about to be scheduled, for
19 a given date at a given location, and
20 certainly extend an offer to any Board members
21 or NIOSH folks to join us. So that's how
22 we've been handling that. And I think that's
23 been working out pretty good because we
24 usually get one or two Board members that do
25 want to join us.

1 **MS. MUNN:** Yeah, that's worked well from my
2 perspective.

3 **MR. ELLIOTT:** From the NIOSH perspective
4 I'll ask J.J., if he will, to put, this needs
5 to go to J.J., not ATL, because there's a lot
6 of other things like the SEC counselor and
7 ombudsman efforts and town hall meetings that
8 we're asked to participate in or that we set
9 up without ATL support. So we really need
10 J.J., if he will, to put together this
11 calendar of events and update it as it's
12 needed.

13 And if the Board members want to take
14 that and then add to it whatever SC&A events
15 are identified, that's fine. But we'll do
16 that for you. We'll try to make sure that you
17 are knowledgeable of the events as we know
18 them to be committed to and scheduled.

19 **MS. MUNN:** That would be more than
20 satisfactory from my perspective, very nice to
21 have.

22 **DR. MAKHIJANI:** Larry, is there a calendar
23 of events that's posted somewhere like on the
24 O drive or some place?

25 **MR. ELLIOTT:** There's not, and it's

1 something I've kind have been thinking we
2 should have. So unfortunate to have this
3 mechanism. And this would be specifically for
4 outreach. I'm going to call it an outreach
5 calendar.

6 **MS. MUNN:** Right.

7 **MR. GIBSON:** Sounds good.

8 **MS. BEACH:** I have one more comment/question
9 I guess. Is there some kind of a flowchart or
10 how the process works from beginning to end
11 when you start off with the worker outreach
12 and then you take those comments, what happens
13 to the comments? Is that part of the
14 procedure or is that not --

15 **MR. ELLIOTT:** I think that's a good
16 suggestion.

17 **MR. HINNEFELD:** I think flowcharting as part
18 of the procedure would be an effective way to
19 make sure your procedure's complete.

20 **MS. BEACH:** That way you could track what
21 happens and what, make it easier.

22 **MR. ELLIOTT:** Good suggestion.

23 **MR. GIBSON:** As far as the next meeting for
24 this group, Wanda, you have a Procedures work
25 group meeting scheduled on the 13th of March,

1 right, here in Cincinnati?

2 **MS. MUNN:** Uh-huh, yeah.

3 **MR. GIBSON:** Maybe a Wednesday or a Friday,
4 the day before or after that meeting would be
5 good for another meeting for this group?

6 **MS. MUNN:** Will we have material at that
7 time that will be --

8 **MR. GIBSON:** That's a month and a couple
9 weeks.

10 **DR. MAKHIJANI:** Is it a face-to-face meeting
11 or a call?

12 **DR. BRANCHE:** Procedures is a face-to-face
13 meeting.

14 **MR. ELLIOTT:** I don't know that we'll have a
15 procedure.

16 **MR. HINNEFELD:** Yeah, I don't know if the
17 procedure will be done. We can give a status
18 report on the procedure and the database that
19 we're developing. But I don't know that
20 either database might be done. But I don't
21 know that either will be done, so we could --
22 see, at least two of the members here are on
23 the Procedures work group, right? Or is that
24 just...

25 I was going to say we can provide it

1 at that, you know, rather than get this work
2 group together, we can provide a summary there
3 or, of course, that leaves out a couple
4 members. But I don't know that we'll have
5 much by March 15th. You know, we could give
6 you a status, but getting together for a
7 status seems like a long trip for some people
8 just to come here.

9 **MR. GIBSON:** This may be looking at a
10 teleconference call on the 12th or the 14th.
11 How would that be?

12 (no response)

13 **MR. GIBSON:** Did you have anything else?

14 **DR. BRANCHE:** No, I was just going to say
15 that if you had everyone assembled, most of
16 the people assembled for the Procedures
17 meeting, that tends to be a long meeting. But
18 if you wanted to incorporate a phone call at
19 the end of that or somehow incorporate an
20 update on this work group on that day later in
21 the day, it might be a matter of just
22 involving a few more people, and you can plug
23 them in by phone.

24 If Wanda -- I'm trying to think --
25 because you'll already be here. And then

1 you'd have to patch in two of the Advisory and
2 Josie and Phil in by phone, but you'll already
3 have assembled a lot of the SC&A staff, and
4 you'd have to plug in Laurie and J.J.

5 **DR. MAKHIJANI:** And John and I will be here.

6 **DR. BRANCHE:** It'll just be a logistical
7 issue.

8 **MR. GIBSON:** If it's okay with Wanda.

9 **MS. DeMERS (by Telephone):** Could you repeat
10 the dates? This is Kathy DeMers.

11 **MS. MUNN:** Well, our Procedures meeting is
12 March the 13th, Thursday, the 13th.

13 **MS. DeMERS (by Telephone):** I may be tied up
14 in a site visit that week.

15 **DR. MAKHIJANI:** Well, it's just a NIOSH
16 update so --

17 **MS. MUNN:** Yeah, it would be a short update
18 for us, I think, for this work group.

19 **MR. GIBSON:** Right.

20 **DR. BRANCHE:** And, Wanda, how long do you
21 anticipate that your meeting would be?
22 Starting off around nine or 9:30 and --

23 **MS. MUNN:** Yeah, we'll start at nine or
24 9:30, and we'll have certainly more than a
25 morning's worth of work ahead of us. We might

1 be able to do this especially since if our
2 other Board members are in a western time
3 zone, we might be able to do this after the
4 Procedures group if everyone was still here
5 since we don't anticipate a great deal of
6 time. Let's see if we can arrange that. And
7 perhaps if we did --

8 **DR. BRANCHE:** Two, 2:30 or three?

9 **MS. MUNN:** I was leaning toward more like
10 four. But maybe three if you think that's
11 reasonable.

12 **MR. ELLIOTT:** Three o'clock p.m. on the 13th.

13 **MS. MUNN:** Let's tentatively say three
14 o'clock, three eastern on the 13th, Thursday,
15 the 13th.

16 **DR. BRANCHE:** Mike, is that okay with you?

17 **MR. GIBSON:** Yes.

18 **MS. BEACH:** You might have a better idea
19 then of when the procedures will be ready.

20 **DR. BRANCHE:** Well, you're going to give
21 some sort of status report no matter what.

22 **MR. GIBSON:** I guess now before we, the only
23 thing I'd like to do now before we move on to
24 the comments from workers or their advocates,
25 we received a notice today, and I'd just like

1 to go on the record and say that it's with
2 deep regret that I learned this morning that
3 Ed Walker has passed away.

4 And I'd just like to offer my personal
5 condolences and hope I can speak for the work
6 group to his family and to the workers he
7 represented. Ed was a wonderful man and did a
8 lot for the process, and he certainly helped
9 all of us along and kept us on our toes in
10 standing up and fighting for what he believes
11 in representing the workers at Bethlehem Steel
12 and the rest of the claimants. If anyone else
13 would like to comment.

14 **MR. ELLIOTT:** He will be missed. He had a
15 wonderful smile. And you're right. He did
16 keep us on the task.

17 **DR. MAKHIJANI:** I'd like to make a sort of
18 personal statement. This is Arjun. He was at
19 the very first worker outreach meeting when I
20 was associated with this program. And he
21 provided this immense amount of very useful
22 information. He and his wife Joyce escorted
23 me personally to other workers' houses, people
24 who were too ill to come to public meetings.
25 He was responsible for a worker who actually

1 made that diagram so all of us could
2 understand what it was actually like in the
3 '50s that we published in one of our reviews.
4 His wife Joyce was also extremely helpful. I
5 really want to extend my condolences to her in
6 my personal behalf, on behalf of all our SC&A
7 team. She was always very, very gracious and
8 very helpful to us.

9 **WORKERS, WORKER REPRESENTATIVES/ADVOCATE COMMENTS**

10 **MR. GIBSON:** We'll move on. Do we have any
11 workers, worker representatives or worker
12 representative advocates on the phone that
13 would like to give comments as far as worker
14 outreach?

15 **UNIDENTIFIED:** Yes.

16 **MR. GIBSON:** Could you identify yourself for
17 the record and go ahead and make your
18 comments?

19 **DR. MERRITT (ph) (by Telephone):** This is
20 Dr. Maureen Merritt. I'm a physician and
21 advocate for New Mexico claimants and workers,
22 generally working with Los Alamos National
23 Labs' folks. And we have an organization, New
24 Mexico Alliance and Nuclear Worker Advocates,
25 and just to give you a brief background. I

1 have a history of occupational medicine and a
2 fair amount of expertise in this particular
3 area though I'm not a health physicist.

4 In addition, I was instrumental in
5 setting up the first state Office of Nuclear
6 Worker Advocacy for, probably the only one in
7 the United States at this point in time. And
8 I appreciate you giving me a couple minutes to
9 make comments. I'll try and keep them brief,
10 but I did want to go over a couple of items
11 that caught my attention as you discussed the
12 various issues before you.

13 One of the things is -- and you can
14 hear me?

15 **DR. BRANCHE:** I can hear you.

16 **DR. MERRITT (ph) (by Telephone):** I would
17 question, is when you talked about worker
18 input, testimonials or meetings where you
19 gather information. Does every factual
20 statement by a worker have to be substantiated
21 by research and/or proof on paper by NIOSH
22 before being used as part of your information
23 base?

24 **MR. ELLIOTT:** Not necessarily. Again, we
25 take stock of anything that's given to us as

1 far as input or information in the full
2 context of all available information that we
3 have. So if we hear something from a worker,
4 it may lead us to at that point, just on the
5 face of what has been said, we would say, yes,
6 we understand that. We agree. We see a need
7 to make a change in our documentation and in
8 our approach.

9 Or it may appear to us that we need to
10 find we may need to examine what has been
11 provided to us in closer, with closer scrutiny
12 and more detail to determine whether or not
13 there are other information sources that
14 corroborate what we have just heard. So to
15 answer your question, not necessarily do we
16 just disregard or need to have more
17 information to believe the provider of the
18 information.

19 **DR. MERRITT (ph) (by Telephone):** Is this
20 Larry?

21 **MR. ELLIOTT:** Yes, this is Larry Elliott.

22 **DR. MERRITT (ph) (by Telephone):** Thank you
23 for that. And it occurs to me that the
24 corroboration could be potentially other
25 workers' testimony that correlates with the

1 particular statement as well as just the
2 written record. Is that correct?

3 **MR. ELLIOTT:** Certainly, yes.

4 **DR. MERRITT (ph) (by Telephone):** Okay,
5 because I want to tell you that the perception
6 out here on the ground, so to speak, is that
7 the workers' testimony is discounted.

8 **MR. ELLIOTT:** I understand that perception.

9 **DR. MERRITT (ph) (by Telephone):** As a
10 result of that we find that it's difficult to
11 get participation at your outreach meetings.
12 So that's something that if you don't already
13 know, you should be aware of.

14 **MR. ELLIOTT:** Thank you. I am aware of it.

15 **DR. MERRITT (ph) (by Telephone):** And the
16 other question is, what is the threshold of
17 credibility or proof required for statements
18 of workers? In other words when does it
19 become truth and not just anecdotal, verbal
20 testimony?

21 **MR. ELLIOTT:** I don't have a ready easy
22 answer for that. Again, I would refer back
23 and hearken back to what I said earlier this
24 morning, that whatever information is provided
25 to us will be accepted and used, providing it

1 is reasonable, and it is supported by
2 substantial evidence or is not refuted by
3 other evidence. That's the -- and it's
4 consistent with the information that we have
5 available. So you have to take all of that
6 into consideration.

7 I know that's not a very, an answer
8 that's very easily absorbed and understood.
9 People would like to think there's a bright
10 line that I can give you, but we are required
11 to take into consideration all information
12 that is provided to us.

13 **DR. MERRITT (ph) (by Telephone):** And I
14 think the workers' testimony, if they can come
15 away with the new perception that the workers'
16 testimony is not just opinion but rather is
17 fact based on the many years that they've
18 worked at a facility and all of the gold mine
19 of information that they potentially could be,
20 it would go a long way toward creating, I
21 believe, a more collegial kind of a
22 relationship with them.

23 **MR. ELLIOTT:** Understood.

24 **DR. MERRITT (ph) (by Telephone):** And then
25 there's one other comment I want to make. I

1 think Phil -- I believe that's who it was --
2 Schofield brought up the pueblos briefly. And
3 I wanted to indicate to you that as an example
4 of this communication problem that we have
5 here, the native people traditionally teach
6 their history and culture almost entirely
7 verbally; and therefore, it's no less a truth
8 to them just because it's verbal rather than a
9 written record.

10 And a lot of the same could hold true
11 for the Hispanic population which is fairly
12 large here as it happens in New Mexico and
13 with LANL, and I know you guys are aware of
14 that. But the point is is this is an example
15 of a cultural type of bias that is happening
16 whereby the insistence on a written record
17 negatively influences NIOSH's attempt to
18 gather information.

19 And I happen to have knowledge of
20 Native American culture because I've worked
21 with various tribes around the country for a
22 very long time. And I am currently working
23 with pueblos to bring them on board more so
24 that we can have better input from them when
25 you come out for these outreach worker

1 meetings.

2 One other little suggestion, you were
3 wondering how there are other ways to reach
4 folks out here on the ground. And I believe
5 that there are many worker groups, some of
6 them in different states, that are kind of
7 grass-roots organizations. We have one here,
8 Los Alamos Workers Group, and they meet every
9 month. I go there in the line of my duties
10 here as an advocate and a claimant assistant
11 to help effect changes.

12 And so that's just one that comes to
13 mind. I know there are others across the
14 country. And as you're aware, there are other
15 advocacy groups around the country, too, that
16 are quite influential and have many contacts
17 with workers. Perhaps you could make an
18 effort to bring the advocacy groups on board
19 in trying to increase participation.

20 And that's pretty much what I have
21 today. Thank you.

22 **MR. GIBSON:** Thank you very much for your
23 comments, and I'd just like to tell you that
24 it is the purpose of this working group to,
25 the reason it was established is to make sure

1 that workers' comments and input is taken
2 seriously and incorporated into the process.
3 And also, this issue of perception is also
4 important, and we're looking at that. So
5 thank you for your comments.

6 Is there any other worker or worker
7 advocate on the phone?

8 **DR. McKEEL (by Telephone):** This is Dan
9 McKeel.

10 **MR. GIBSON:** Yeah, Dr. McKeel, go ahead.

11 **DR. McKEEL (by Telephone):** Well, thank you
12 very much for this very interesting
13 discussion. I've learned quite a bit today.
14 As you all know, I'm the SEC petitioner for
15 two sites currently at Texas City and also at
16 Dow and have been instrumental in getting the
17 GSI dose reconstruction moving along which I'm
18 pleased is happening. And so these comments,
19 I've provided more comments to Kathy DeMers
20 and so forth, but these are sort of my
21 reactions to what I've heard today and that I
22 wanted to put on the record today.

23 The first comment is that there are
24 different ways that have been used over the
25 stretch of time to document outreach meetings:

1 summaries, minutes and verbatim transcripts.
2 My reading, not all of them but of many of
3 them, is that most of the summaries are
4 extremely skimpy, and they couldn't possibly
5 reflect everything that went on at the
6 meeting. One in particular was the Weldon
7 Springs session that Denise Brock mentioned
8 earlier.

9 The second point is that at the
10 meetings that I've been to, even though
11 they're outreach meetings and a major mission
12 announced by NIOSH, the focus of the meeting
13 was to improve the site profile, you know,
14 number one, Dow and GSI until there was an
15 Appendix BB, there was no site profile. At
16 Texas City the same, there is no site profile.

17 But even the other meetings like
18 Blockson where there was a site profile, it
19 seems to me that more could be done to make
20 sure that number one, the true site experts
21 are identified, and that they actually get a
22 copy sent to them of the site profile. Now I
23 know they're on the website and so forth, but
24 I also know that many of those folks have a
25 big problem with downloading a 60-page

1 document and printing it out. So that's just
2 a suggestion.

3 I have a very strong feeling about the
4 way that the reports of outreach meetings have
5 been redacted over time, and I would simply,
6 you all know it's a bigger issue. But my
7 comment would be that they're highly selective
8 and inconsistent. Sometimes just names are
9 omitted. Sometimes the participant lists are
10 omitted but not in others. And in some cases,
11 with Dow for example, the workers' jobs and
12 the years of employment were redacted out, and
13 that makes the value of those outreach
14 transcripts much less.

15 My suggestion kind of tying all those
16 three together is I think it's fine to make a
17 recording, and I'm very happy -- I think I
18 heard that those recordings are now being
19 retained. But what comes out of those
20 recordings is not a verbatim transcript but
21 rather in some instances a very short summary
22 that just summarizes what was said without
23 giving particular workers' precise comments.

24 And more recently there have been
25 minutes that are better, but they're still not

1 the same as a verbatim transcript. And since
2 the Board and work group meetings are
3 documented by verbatim transcripts, my
4 suggestion is that y'all consider doing the
5 same for outreach meetings.

6 I think those meeting summaries,
7 minutes, transcripts, whatever, need to be
8 released in the same timeframe as the Board
9 and the work group meeting transcripts which
10 is currently 45 days according to the new
11 schedule. I think that'd be a great idea.
12 Right now I'll mention I'm waiting for minutes
13 from the October 9th, 2007 GSI worker meeting.
14 There was a NIOSH outreach and a satellite
15 SC&A outreach. I'm also waiting for the
16 November 15th, 2007 town hall meeting minutes
17 at Texas City Chemicals.

18 I perceive that there is a really
19 tremendous problem in the process of getting
20 the outreach minutes released, and that that
21 is occasioned by the redaction process. I
22 wish that that process were delineated in
23 great detail. I've tried very hard to figure
24 out who the decision-makers are, actually
25 where it's been done, what the process is, and

1 I have to date not been able to find out how
2 that's done. But in any case it needs to move
3 along much faster.

4 A personal comment, and this is
5 probably the most important thing I want to
6 say today, is as you all know a major issue of
7 the Dow Madison SEC 79 is whether or not part
8 of the thorium activities at that site were
9 related to AEC production of nuclear weapons.
10 And we made the point -- and I'm talking about
11 we as a co-petitioner at that site -- I made
12 the point more than two years ago that there
13 was testimony from multiple workers that some
14 of the thorium work was AEC related and
15 subsequently reproduced four sets of verbatim
16 transcripts of meetings, all of which we paid
17 for the court reporter, sent those to NIOSH,
18 made sure that SC&A had them. And I would say
19 that the perception was, even though as Larry
20 Elliott mentioned, that data was accepted, but
21 we could never get a assurance from NIOSH or
22 Department of Labor or DOE until very recently
23 that any of that information was believed and
24 accepted as fact as Maureen Merritt just
25 mentioned.

1 Now as you know, on January the 8th,
2 DOE finally did confirm that Dow Madison
3 thorium was used in nuclear weapons
4 production, and that will be a major
5 difference now in the way that SEC is handled.
6 We've not gotten decisional documents which
7 are said to be from Livermore, from the FBI
8 and NNSA, so I can't tell you why it took more
9 than two years to arrive at this point.

10 But I do think it raises the point
11 whether all of that evidence from 11 workers
12 that Dow shipped thorium to Rocky Flats, that
13 there may not be something to that. And maybe
14 the same process that was used to uncover the
15 Livermore documents and NNSA documents and so
16 forth, maybe they could be applied at Rocky
17 Flats. It occurs to me that the problem may
18 be that those documents are classified. And
19 so anyway, that's the comment.

20 My final point was one that John Mauro
21 raised, and it was that SC&A has gotten an
22 avalanche of e-mails regarding GSI operations
23 related to Appendix BB and the forthcoming
24 SC&A report on that document. The reason that
25 that happened is because John Ramspott and I

1 felt that we had already sent the vast
2 majority of that information to NIOSH and that
3 NIOSH had it before they prepared Appendix BB,
4 and had either just not used the material we
5 sent them, or they had in some way
6 misinterpreted or gotten it distorted.

7 And so we felt that we needed to
8 ensure that SC&A was aware of all that
9 relevant GSI information. And so really it
10 was overkill. It shouldn't have been
11 necessary to send all that in, but our
12 perception was that it definitely was. So I
13 guess that's the end of my thoughts, so I
14 thank you all for listening to them.

15 **MR. GIBSON:** Thank you, Dr. McKeel.

16 Follow ups for anything?

17 (no response)

18 **MR. GIBSON:** Is there any other workers or
19 worker representatives or advocates on the
20 phone?

21 **MS. BARRIE (by Telephone):** This is Terrie
22 Barrie with ANWAG.

23 **MR. GIBSON:** Hi, Terri, go ahead.

24 **MS. BARRIE (by Telephone):** Thank you, Mike.
25 I wasn't able to be on the entire call so if I

1 raise some issues that have been resolved so
2 please forgive me.

3 I just hope everyone realizes that
4 it's now 2008, a full seven years since this
5 program has been around. And if I understand
6 correctly, it is just recently that NIOSH has
7 decided to contact the metal trades and
8 steelworkers union. And I just think that's a
9 little bit late in the game for this.

10 The perception of what NIOSH uses for
11 their site profiles and SEC evaluation reports
12 is very bad when it comes to the opinions of
13 the claimants. As you know I've been involved
14 with the Rocky Flats SEC petition, and I know
15 that workers and advocates have not only
16 submitted testimony at the Board meetings but
17 also documents. We have no idea if they were
18 ignored by NIOSH, discounted or if it was
19 investigated by NIOSH and found to be
20 irrelevant.

21 We need to figure this part out, not
22 only for the Rocky Flats SEC petition but also
23 for the other sites. I was surprised, in
24 fact, when I believe it was Stu stated today
25 that NIOSH doesn't look as thoroughly as SC&A

1 does at the evidence. Why is this? Just like
2 Dr. McKeel said, information is submitted to
3 NIOSH, but it appears that it's just
4 discounted. That needs to be changed.

5 And I don't understand what the plan
6 is. Does NIOSH plan to revisit the sites and
7 acquire the information that may affect those
8 reconstructions for, let's say, Rocky Flats or
9 is this planned for this worker outreach for
10 the sites that have not been visited yet?

11 **MR. ELLIOTT:** Let me speak first. This is
12 Larry Elliott, Terrie, and then Stu will make
13 a comment I'm sure. My comment is in reaction
14 to the perception that you speak of.

15 Again, I will say, I think I said this
16 probably for the fifth or sixth time today,
17 all information that is given to us is
18 considered in the full context of information
19 we have available for consideration. And what
20 I said earlier also is that we admit and need
21 that we need to do a better job of responding
22 back to individuals who provide us information
23 that has benefit, that does influence the work
24 we do.

25 And so we are working on a procedure

1 and a set of processes that will make sure
2 that we react to this perception as well as
3 make sure that we get back to the individuals
4 who have provided us information and give them
5 an understanding of the benefit derived from
6 what they have given us.

7 **MR. HINNEFELD:** This is Stu Hinnefeld. What
8 I tried to say awhile ago was in the lines of
9 extent and thoroughness or digging in, I
10 guess, thoroughness of questioning and
11 focusing of questioning during a site profile
12 meeting. What I said is I think that you
13 could argue that SC&A has had better, more
14 focused questioning during their worker
15 interaction than perhaps was done during the
16 site profile development work. So it was
17 related to the focus of the questions rather
18 than the extent to which the evidence
19 available was considered.

20 **MR. ELLIOTT:** The other thing I'd offer, too
21 -- this is again Larry Elliott -- you
22 mentioned the metal trades. This is not just
23 a new thing we've started. We've had contact
24 with organized labor folks and other
25 representatives, advocates, et cetera, from

1 the very start of this program.

2 What you heard earlier today is just
3 that we had recently invited the Metal Trades
4 Council here to Cincinnati to have a very
5 special and focused discussion with them. So
6 this is an ongoing, continuous effort that we
7 have engaged in talking with various entities
8 who, and interested parties, about what we do.

9 **MS. BARRIE (by Telephone):** Okay, well,
10 thank you for that.

11 The other concern I have is I believe
12 John Mauro, and there was a discussion about
13 SC&A submitting the actual interviews to
14 NIOSH. Did I understand that correctly that
15 NIOSH has not looked at the raw data or the
16 raw interviews from SC&A?

17 **DR. MAURO (by Telephone):** This is John
18 Mauro. The material that NIOSH receives from
19 us is after we take our notes and after those
20 notes are converted into what I call the
21 appendix that describes our interviews, and in
22 some cases that has to go through DOE
23 clearance, that product is what's published.

24 The actual handwritten notes
25 themselves, we provide them only if requested.

1 There have been occasions where we have
2 received requests from NIOSH to provide the
3 original -- I'm going to call them handwritten
4 notes. But, no, typically we do not provide
5 those documents.

6 **DR. MAKHIJANI:** Terrie, this is Arjun. Let
7 me just explain the process and why SC&A has
8 the process that we do. You might not have
9 been on when Kathy DeMers was explaining our
10 procedure. Typically, we do quite a number of
11 interviews as you know. And many of these
12 interviews have the same information in them
13 and the raw records are very, very voluminous.

14 And when we compile a summary, we
15 don't mean that any issues are omitted. We
16 try to be very faithful to including all of
17 the issues that were raised, but we omit the
18 duplications. And sometimes we will also omit
19 the personal claim information that people
20 provide us. You know, when you're talking to
21 them, people will talk about their own claims,
22 and we may include the technical information,
23 but we exclude the claim information for
24 privacy purposes. But we do take the
25 technical lessons from that and whatever is

1 relevant to our SEC or site profile reviews.

2 And the summary is intended to be
3 complete so far as all the technical
4 information is concerned. So it's not that
5 anything is being left out. It's just that we
6 haven't been attaching hundreds and hundreds
7 of pages of raw data, raw interview
8 information that would contain a lot of
9 repetition. There has been some movement that
10 we would actually compile all of these for
11 each site where they have happened and provide
12 them to NIOSH so they can have a complete
13 record of that. And I think the process for
14 that was begun here today.

15 **MS. BARRIE (by Telephone):** Thank you, but
16 my purpose of this line of questioning, I
17 guess, is once SC&A has interviewed these
18 people, does NIOSH follow up with those
19 individuals or is that left to SC&A?

20 **MR. ELLIOTT:** In some cases we do follow up.
21 In many cases we don't follow up. Larry
22 Elliott again.

23 **MS. BARRIE (by Telephone):** Well, I have one
24 last issue then. There's a new blog on the
25 NIOSH website, and it's meant to be a

1 dialogue. Is there a plan to have
2 representatives from NIOSH or DOL to respond
3 to the concerns listed there?

4 **MR. ELLIOTT:** Well, we won't have DOL.

5 **DR. BRANCHE:** That's the science blog,
6 right?

7 **MR. ELLIOTT:** It's a science blog, and OCAS
8 was featured. The program of dose
9 reconstruction and SEC petition processing was
10 featured on a couple, we're into the second
11 week, and next week will be some new feature
12 on the science blog.

13 And our intent was to engage in a
14 scientific discussion about what we do and
15 avoid claimant concerns and complaints on this
16 because this is really not the place for it
17 because we're limited in what we can say and
18 do with regard to individual, sensitive
19 information and third party sensitive
20 information. So, yes, we are preparing
21 responses to those entries to the blog that we
22 feel have either an educational opportunity
23 for us to clarify or give a better
24 understanding of what is being done under this
25 program, and more specifically, those entries

1 that lead us to discussing the science that's
2 been put in play in this program.

3 **DR. BRANCHE:** Excuse me, this is Christine
4 Branche.

5 So, Larry, you would still want
6 workers or their representatives to still use
7 the other mechanisms that are open to them and
8 to OCAS to be able to have their individual
9 issues addressed, not the science blog.

10 **MR. ELLIOTT:** Right, exactly.

11 **DR. BRANCHE:** Because of the sensitivity of
12 the information that could be shared with an
13 individual claimant that cannot appear on the
14 science blog.

15 **MR. ELLIOTT:** Does that answer your
16 question, Terrie?

17 **MS. BARRIE (by Telephone):** Yes, it does,
18 and if I may humbly suggest this, if you could
19 make that an entry and advise the people who
20 have already made comments on there, that
21 would be very helpful.

22 **DR. BRANCHE:** It probably would be.

23 **MR. ELLIOTT:** Yeah, we have been having
24 numerous discussions here about the blog and
25 the OCAS feature, and so I know that there's

1 going to come out some new labeling and stuff
2 that we will incorporate here. So we thank
3 you for your suggestions.

4 **DR. MERRITT (by Telephone):** This is Dr.
5 Merritt. I just have one more comment if I
6 may.

7 **MR. GIBSON:** Yeah, go ahead.

8 **DR. MERRITT (by Telephone):** I think Larry
9 Elliott made a comment earlier about not
10 putting a lot of stock in WISPRS right now,
11 and I would like some clarification on that.
12 It has to do with compiling the various
13 interviews as I understand it, worker input.
14 And then how many interviews have been
15 conducted by NIOSH and then separately by SC&A
16 total? If you have the figure or can obtain
17 one, that would be helpful.

18 And then my last impression was that
19 you'd indicated that you are working on
20 compiling these so that there's access on the
21 O drive after redaction so the public can use
22 them as well. Is that correct?

23 **MR. ELLIOTT:** No, no. This is Larry
24 Elliott. To answer your last point there, we
25 were talking about the O drive which is a

1 shared drive that the Advisory Board members
2 and its contractor can get access to
3 information that is not Privacy Act reviewed
4 and redacted. That is not a drive or an
5 access point for the general public.

6 If the general public wants
7 information from us, they need to file a FOIA
8 request and be specific in what you want, and
9 then we'll respond to that request. But the O
10 drive situation is a place where the Advisory
11 Board and its contractor can, where we can
12 post information that's not redacted that they
13 can see.

14 Take me back to your other two points
15 here? WISPR, why do I feel it's not worthy of
16 a lot of study at this point in time? It's a
17 very clunky database. It is a snapshot of
18 time from the start of ORAU's work in the area
19 of outreach on site profiles, et cetera. And
20 I just think there's bigger and better things
21 that are coming along that this working group
22 can spend its time on. But that's up to their
23 prerogative as to how they want to pursue the
24 focus of their review.

25 The second point you had there that

1 you asked for, numbers of interviews. Well, I
2 can only ballpark that for you and say
3 thousands, on the order of thousands upon
4 thousands. And I say that because we
5 consider, again, if you heard my early opening
6 comments today, there are a variety of
7 outreach efforts.

8 So when we talk to a claimant on the
9 phone who is a worker, we enter into the claim
10 file, into the phone log, the summary of that
11 interaction, that discussion. That's one
12 interview. There are probably 60,000 of
13 those.

14 We have a number of interviews that
15 are conducted as part of our outreach to
16 either get information to develop a site
17 profile or review a site profile and improve
18 upon it. There are probably hundreds to a
19 thousand or more of those kinds of interviews.

20 We do interviews of SEC petitioners
21 and people that they identify for us to talk
22 to, and I'd say they're on the order of now
23 hundreds of those. So that's just a ballpark
24 response to your question about NIOSH's
25 numbers of interviews.

1 **DR. MERRITT (by Telephone):** And that's not
2 including SC&A's interviews, right?

3 **MR. ELLIOTT:** I can't speak to SC&A's
4 interviews.

5 **DR. MAKHIJANI:** SC&A has done hundreds of
6 interviews, and we will be, at the direction
7 of the working group, giving that information
8 and what it will take to compile them all and
9 pass them on to NIOSH in the next couple of
10 weeks.

11 **DR. MERRITT (by Telephone):** Thank you for
12 those answers.

13 **MR. GIBSON:** Is there any other worker or
14 worker representative on the phone?

15 **MR. WALBURN (by Telephone):** Yes, Jeff
16 Walburn.

17 **MR. GIBSON:** And Jeff could you tell us
18 where you're from or who you represent or are
19 you a claimant?

20 **MR. WALBURN (by Telephone):** I'm
21 representing myself now. I worked at the
22 Piketon Plant in Ohio. Some of the comments
23 that were made by the other representatives
24 throughout the country, Terrie Barrie and Dr.
25 Merritt, right now there seems to be a

1 clearing house of information for you all.
2 You get it through SC&A and interviews, and
3 you get it through the Board's information
4 that comes to you.

5 But for the workers, the advocacy, and
6 I've spoken to so-called worker advocates up
7 there in your organization, but when I speak
8 to somebody like Terrie Barrie, I'll get the
9 truth right on the ground and the grass roots
10 point of view. But if you -- by the way, I
11 testified in the original 2000 Senate hearings
12 in front of Fred Thompson and Joe Lieberman
13 along with Sam Ray and then the people from
14 Oak Ridge when the special cohort status was
15 started.

16 I also testified in front of the OCAS
17 June 14th, 2006 meeting. I gave you 43 hard
18 documents. I've given those documents to John
19 Howard. I've given those documents to Larry
20 Elliott. Now I've given those documents to
21 SC&A, and those documents show that DOELAP
22 certified records were falsified at our site.
23 I don't know how many times that I have to
24 prove this.

25 You give 30 days for an individual who

1 has an illness that has no access to
2 documents. You don't even have the access to
3 the documents. It took me a federal subpoena
4 under a qui tam court suit to get those
5 documents. On line 16 of page 132 of your
6 hearing on June 14th, Dr. Ziemer says, "I'll
7 post those documents. Everyone can look at
8 them." And that's what went out in the
9 meeting, and everyone went away with a good
10 feeling. But those documents have not come
11 out. They've not been shown.

12 Kathy DeMers, I like Kathy. She's
13 honest and forthright. She's doing a good job
14 for SC&A. And she looked at our documents,
15 hard documents -- these aren't allegations.
16 They're hard documents that show what I'm
17 saying, not just about me but about the work
18 site. She said that they were the smoking gun
19 for the entire industry in what they showed.
20 There's not even been so much as a pin prick
21 of a noise come back from that.

22 And I realize SC&A is still compiling
23 their information, but Larry Elliott had that
24 information, the POEF report 150-96-dash-L-O-
25 8-8 of February 16th, 1996, from Martin-

1 Marietta concerning their lab practices. They
2 admit they were falsifying, that the database
3 was irrefutably corrupted. But I don't know
4 how much more data we've got to provide.

5 I believe it was Wanda that made the
6 exclamation about vertical and horizontal
7 investigations. What I see on X and Y axes
8 (sic) is that you have intersects, and at
9 points you can see, and if you have the
10 documents that show it, and that people are
11 getting sick. Those should be the intersects
12 that you should be looking at if you have
13 practices at these sites.

14 I mean, how could you have such a
15 difference in information at Portsmouth, the
16 site profiles went away saying that we had 3.5
17 assay when, in fact, we were working with 97
18 percent assay, and we have given them that
19 information. What I don't see out of your
20 groups is you have working groups, but there's
21 no clearing of information that once hard
22 documents or the people from different locales
23 that represent specific areas like Terrie
24 Barrie that you set down to clear the
25 information between information that you have

1 that you can work with, clear it out and to
2 settle these incidences once and for all.

3 There's no effort to clear them. It
4 just keeps going on and on and on, and it's
5 like a go get me another rock. That's not the
6 right rock. I can show you -- if you look in
7 the Senate testimony of 2000, you can see that
8 I identified that document there. No one has
9 ever done a proper investigation. From the
10 Senate, I've told Gene Schmidt. I've told
11 Senator Voinovich. I told Governor
12 Strickland.

13 No one has done a proper investigation
14 in behalf of the workers, and that's what
15 everyone is expecting of this program. And I
16 think if that's what they're expecting they're
17 going to be disappointed because it doesn't
18 look like they are directed towards doing any
19 clearing of information and compiling of
20 documents that prove the allegations that we
21 say, hard documents.

22 Like I said just one comment was made
23 that SC&A had to go through DOE. We have
24 documents that show that DOE knew what was
25 going on at Portsmouth. So SC&A's going

1 through DOE. How does that work? If they
2 become a perpetrator of information and
3 withholding information, how is it that they
4 are the final say? That's what I have to say.

5 **MR. ELLIOTT:** Jeff, this is Larry Elliott.
6 I'd like to respond to a couple points you
7 made there. And for the record the folks
8 around this table know that we did, in fact,
9 respond to with our position and our review of
10 the information that you had provided to us
11 before, I guess this is back in 2004, I
12 believe. So we're on the record with you and
13 Mr. Boone who was the Guards representative,
14 union representative --

15 **MR. WALBURN (by Telephone):** Mr. Dave Burrow
16 (ph) and Mr. Greg Bocook (ph) was at that
17 meeting. You and Larry Elliott -- excuse me,
18 you and Dr. Neton were at that meeting. Your
19 comment was that there was a conspiracy. And
20 Dr. Neton's comments was that it was criminal.
21 I didn't bait you to say that. Those were the
22 --

23 **MR. ELLIOTT:** We did say that. We did say
24 that, but we also said that it's not within
25 the purview of this program. We do not have

1 the authority to institute an investigation of
2 criminal activity, and we advised you such.
3 We've also documented our position of
4 reviewing the information you provided in a
5 letter to you all. That's my comment on that.

6 The other comment I'd like to offer is
7 when Dr. Ziemer, I think he misspoke. He made
8 a commitment that he couldn't follow through
9 with. We can't post all of that information
10 that you provided on the website just because
11 you wanted it placed there. And Dr. Ziemer
12 inadvertently made a commitment to you that it
13 would be done. That is just not going to
14 happen and for a variety of reasons. There's
15 some information there that cannot be posted.
16 Some information would have to be reviewed and
17 redacted for posting, and then it has to be
18 tied to a specific effort, review effort,
19 action effort that we have underway, an SEC
20 petition review or a site profile development
21 review. So just to clarify that point.

22 **MR. WALBURN (by Telephone):** I'd like to
23 respond to that. That 41-page report, the
24 POEF report, if you take every name and title
25 out of it, it still says that the database was

1 irretrievably corrupted. And then the
2 corresponding documents we provided to SC&A
3 shows that the very regulatory agencies of DOE
4 knew that, but they didn't act on it.

5 And then the information gets buried
6 at the site, and it took me -- information
7 wasn't given to me by DOE, it was on the site,
8 and it was in their records file. And when I
9 filed a third-party subpoena, that's how I got
10 to view it. No one had been forthcoming even
11 when DOE was elected by Senator Thompson in
12 2000 to do an investigation. They were quite
13 aware of what had happened in 2000. They're
14 aware now.

15 The fact you don't have a mission to
16 find out these criminal things when they are
17 found out that seems like that casts a shadow
18 over the investigations and that's not
19 followed up on. And, I mean, like I said, I
20 didn't make the documents. The documents come
21 from the site. The allegation when you lay
22 the documents end to end, the allegation forms
23 on timeline. It's not me saying it. They
24 very documents say it.

25 **MR. ELLIOTT:** Thank you for your comments.

1 **MR. WALBURN (by Telephone):** Thank you.

2 **DR. MAKHIJANI:** Kathy, do you want to
3 clarify anything in terms of the status of
4 SC&A's review and use of information from
5 Picketon?

6 **MS. DeMERS (by Telephone):** Do you mean as
7 far as the report?

8 **DR. MAKHIJANI:** Yeah, the report and the use
9 of the interview information.

10 **MS. DeMERS (by Telephone):** The report has,
11 John knows the status of the report itself.
12 The summary of the --

13 **DR. MAURO (by Telephone):** The report has
14 not yet been delivered. It's been run through
15 DOE clearance review, and it's going through,
16 as we speak, PA review and final editing. So
17 we're in the home stretch. But, of course,
18 your attachment, the interviews, is part of
19 that report.

20 **MS. DeMERS (by Telephone):** Yes.

21 **MR. GIBSON:** Will you keep us updated on the
22 status of that report, John?

23 **DR. MAURO (by Telephone):** Oh, we're very,
24 very close to delivering it to the entire
25 Board. I spoke to the technical editor

1 yesterday, and she's in the home stretch. In
2 fact, the area that is slowing things down is
3 the attachment dealing with the interview
4 notes trying to get that into a form that we
5 can deliver.

6 **MR. WALBURN (by Telephone):** Can I add one
7 more thing? At Picketon, and this is commonly
8 done, you all work with the USW, but there was
9 a police force there, a guard force, and were
10 commonly left out of the loop. It was done,
11 you can see evidence of it in the very hard
12 documents that I gave you. We're not
13 considered workers, but we were there 24/7.

14 When those workers left and went home
15 or went to lunch or went on break, we stayed
16 there right around 97 percent assay. And the
17 question of neutron exposure and the slow
18 cookers that has come up repeatedly at
19 Portsmouth, we've been working on this and in
20 pursuit of this since 1996.

21 We've had the documents that have
22 proven that records were systematically
23 falsified there since 1996. We went through
24 OSHA investigations. Everyone stopped short
25 of doing a proper investigation on this, and

1 they constantly leave the guards out of
2 discussions. I don't care how small the group
3 is there compared to the OCAW workers. If
4 you're sick, you're just as sick. Or if you
5 are dead, you are just as dead.

6 **MR. GIBSON:** Okay, thank you.

7 Is there any other workers or
8 representatives on the phone?

9 (no response)

10 **MR. GIBSON:** If not, I'm ready to call this
11 meeting adjourned, and we'll post the
12 information on the next meeting of this work
13 group. Thank you very much. Meeting's
14 adjourned.

15 (Whereupon, the meeting was adjourned at
16 1:50 p.m.)

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CERTIFICATE OF COURT REPORTER
STATE OF GEORGIA
COUNTY OF FULTON

I, Steven Ray Green, Certified Merit Court Reporter, do hereby certify that I reported the above and foregoing on the day of Feb. 1, 2008; and it is a true and accurate transcript of the testimony captioned herein.

I further certify that I am neither kin nor counsel to any of the parties herein, nor have any interest in the cause named herein.

WITNESS my hand and official seal this the 24th day of Oct., 2008.

STEVEN RAY GREEN, CCR, CVR-CM, PNSC
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