

# TerranearPMC Safety Share

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## Week of July 8, 2019 – S&H in the Cannabis Industry

On June 25, 2019, Illinois became the eleventh state (along with the District of Columbia) to legalize the use of marijuana for adult recreational use. Meanwhile, there are 33 other states that permit the use of marijuana for medicinal purposes. And with the exception of Idaho, South Dakota and Nebraska (which prohibit the use of marijuana for any purpose) the remaining states have laws that limit THC content, for the purpose of allowing access to products that are rich in cannabidiol (CBD), a non-psychoactive component of cannabis. And at the same time, many state laws are showing an increased support for compensating workers for using cannabis products for medicinal purposes. Despite the widespread wave of marijuana legalization in the United States, marijuana remains an illegal drug.

Marijuana was first regulated as a taxable substance under the Marihuana (sic) Tax Act of 1937. In 1970, Congress passed the Controlled Substances Act (CSA) that classified cannabis as a Schedule I narcotic, which made possession and use a federal offense; the premise being that, according to the Drug Enforcement Administration (DEA) there is a high potential for abuse for which there is no current accepted medical use. The federal government has remained firm in this classification, even after a 2016 DEA review of marijuana's many applications, chose to keep marijuana on the Schedule I list. Schedule I drugs cannot be prescribed by doctors or distributed at pharmacies. Possession and distribution of a Schedule I substance can be criminally prosecuted in federal court. Approval for research and clinical studies on Schedule I drugs is extremely limited; even for university or other learning institutions. Schedule I drugs receive no oversight or regulation by the Food and Drug Administration (FDA).

Yet, despite the Federal Governments' Schedule I classification for marijuana, ever since its legalization in Colorado and Washington State, marijuana use has been increasing at an accelerated rate. Currently there are over 200,00 persons in the US that are employed on a full-time basis in the marijuana industry and is the greatest job-creator in the country. When indirect and ancillary jobs (i.e. lawyers, accountants, security consultants, media companies, and marketing firms) that service the cannabis industry are added, the total number of full-time jobs in America that depend on legal cannabis, rises to 296,000. Thus, there are more legal cannabis industry workers than dental hygienists in the United States. By comparison, there are currently about 52,000 coal mining jobs in the United States. American beer makers employ 69,000 brewery workers. And 112,000 people work in textile manufacturing. And by the end of 2020, employment within the cannabis industry is expected to double (note: The Bureau of Labor Statistics currently does not count or report employment in this growing field because cannabis remains a federally illegal substance).

The burgeoning industry has now reached the attention of many organizations that specialize in occupational safety and health. Historically, the illicit nature of marijuana often led people to try to grow it in rooms with poor ventilation and no windows to prevent detection. These practices created potential health hazards for growers and cultivators. Such conditions remain a concern for legal indoor marijuana producers who are not aware of the proper health and safety precautions they should be taking to protect their workers.



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One story that was recently presented at a conference that focused on S&H in the cannabis industry, described management's concern for controlling crops from developing diseases caused by human contact. To control crops from potential human transmitted diseases, persons entering into the plant environment were required to be disinfected by being sprayed with isopropyl alcohol. Isopropyl alcohol has a flash point of 53 °F; thus, creating a very dangerous fire hazard in the presence of an open flame (not to mention the health concerns to be sprayed down with isopropyl alcohol!).

The first guidelines to protect humans from the hazards associated with marijuana contact were drafted to help protect law enforcement who came across marijuana during drug raids. However, these policies typically did not address how to protect against cannabis production safety hazards that stem from prolonged exposure and continuous handling, such as those that work in farms, or retail clinics and storefronts.

Local and state government entities, as well as grow operation owners, are recognizing a need to have better health and safety protocols to protect workers in the marijuana industry. For instance, issuing guidelines about care, handling and protection might address the many hazards for which workers may encounter. These include:

- Respiratory, eye and dermal exposures to 8-9-tetrahydrocannabinol (THC) while handling plant buds
- Exposures to different pesticides and fertilizers used for certain strains of the plants
- Excessive ultraviolet (UV) exposure from grow lamps used in indoor facilities for the vegetative states and flowering cycles
- Disproportionate carbon dioxide (CO<sub>2</sub>) exposure in greenhouses calibrated to optimize growing environments
- Accidental carbon monoxide (CO) and oxides of nitrogen (NO<sub>x</sub>) exposure from CO<sub>2</sub> producing devices used to help promote plant growth
- Burn and shock risks resulting from the improper wiring of grow lamps and other equipment, including butane extraction
- Cuts, nicks, scrapes that may occur while harvesting the buds, flowers and other elements of the plant
- Pinches, carpal tunnel and repetitive stress injuries of shears and gardening equipment during harvesting
- Mold exposure related to indoor growing operations where improper ventilation is a concern
- Heat-stress from working in outdoor facilities, especially greenhouses.

Because the cannabis industry remains unregulated, employers – many times based on their ignorance of their responsibility to provide their workers with an environment free of recognized workplace hazards – do not have formalized safety programs as well as assigning S&H to a dedicated person that is “qualified” to identify hazards and having the authority to correct hazardous conditions within this new and growing industry. Fall hazards (from make-shift ladders and improper scaffolds), exposure to chemicals (extraction processes), sensitization, mold exposure as well as ergonomic and cumulative trauma incidents have become pressing issues. Presently, it is not clear if employees in the cannabis industry can qualify for workers compensation benefits or if workplace accidents can be recorded as work-related.

**You're only as young as the last time you changed your mind - Timothy Leary**