

SCOTT AND DIANA ANDERSON  
6146 Piping Rock  
Houston, Texas 77057

CP-97-1  
CPSA 6 (b)(1) Cleared  
5/2/97  
No Mfrs/Prvt blrs of  
Products Identified  
Accepted by *Petrick*  
Firms Notified,  
Comments Processed:

April 9, 1997

U. S. Consumer Products Safety Commission  
Office of the Secretary  
4330 East West Highway  
Bethesda, MD 20814-4408

PETITION

After petitioning the assistance of God our Father, we, the undersigned, formally petition the Consumer Products Safety Commission as outlined in Section 10 of the Consumer Products Safety Act, to commence a proceeding, together with an investigation which will lead to the issuance of a Consumer Product Safety Rule to insure greater safety for persons of all ages on escalators, particularly our children.

There is an injustice that has been taking place in communities around the country for too long. That injustice is the inherent danger of escalators and how they are harming our children.

On Saturday, February 17, 1996, our little four-year-old boy, Scooter, was injured in an escalator accident. He and his father had gone to his office to pick up some information. As they were leaving, they got on the down escalator to exit through the tunnel to the parking garage. Scooter was on the same escalator step as his daddy and was holding on to the rail when his foot became entrapped between the sidewall and the step. Fortunately his daddy was able to pull his foot out of his tennis shoe. We have since learned that it is a very common injury to children. As they ride down the escalator, their tennis shoes rub against the metal sidewall causing the rubber to soften and slip into the gap. In Scooter's case, the impact of the machine pulverized half of the big toe and he lost his second and third toes instantly. The bottom of his foot was completely sliced back. After the second surgery, the big toe was amputated and skin was taken from his hip and used for grafting. His foot was sewn back together with over one hundred stitches. After seven surgeries, we are thankful he has a foot. After months in a wheelchair, walker and several walking casts, we are thankful he can walk. As the parents of a child who has been injured, we are committed to educating the general public of the inherent dangers of escalators.

Office of the Secretary  
U. S. Consumer Products Safety Commission  
April 9, 1997  
Page 2

The first week our son was in the hospital we were furnished with a news article outlining how often entrapment accidents occur to children (Exhibit "A"). We later requested the Consumer Products Safety Commission's most recent injury statistics (Exhibit "B"). We were appalled to learn that 1200 children under the age of 5 years were the victims of escalator accidents and approximately 500 of those children suffered side entrapment injuries. These numbers are the annual average for 1990-1994. Through further investigation, we found the CPSC was petitioned to review escalator safety in 1978 (Exhibit "C"). In the CPSC's denial of that petition (Exhibit "D"), it claimed that 125 accidents associated with escalators had been reported between January 1, 1977, and May 31, 1978. At that time there were approximately 18,000 escalators operating in the United States. Currently there are approximately 30,000 escalators operating nationally, and the CPSC reports 5900 accidents annually. That is almost 30,000 accidents over a five-year period, and a 5000% increase in injuries over the 1977 injury report. These numbers alone should be cause enough for the Commission to develop mandatory safety standards for escalators, but there is more injustice in these numbers. Of the 5900 accidents annually, over a third of the victims are children under the age of 15. These children make up over a third of the victims, yet they represent less than 10% of the riders on escalators. These statistics are outrageous and show that escalators, as they are presently designed and/or governed by safety codes, do present an unreasonable risk of injury to children. The escalator industry has shown itself to be a poor watchdog as indicated by these sky-rocketing number of annual injuries. The CPSC must adopt mandatory safety standards instead of allowing the escalator industry to set their own voluntary standards.

As stated in the **Boston Globe** article (Exhibit "E") dated Sunday, July 21, 1996: Page 3A, "the Consumer Products Safety Commission reversed its long-standing position and has determined that escalators pose a special threat to children. The USCPC concluded that escalators can be made less hazardous to children with the addition of safety devices that have been on the market, but were never before required." The article claims that the Consumer Products Safety Commission wrote in a July, 1996, letter to the chairman of the committee that sets the national escalator safety code, that "ALL of the information suggests that regular occurrences of entrapment, particularly of the legs and feet of small children, can be almost completely eliminated by the installation of after-market safety devices."

In conclusion, we agree completely with the CPSC's position stated in the **Boston Globe** on their concerns with escalator

Office of the Secretary  
U. S. Consumer Products Safety Commission  
April 9, 1997  
Page 3

safety. We hope that our petitioning the CPSC will push the agency forward and cause real changes to take place with regard to:

- a) design--more specifically closing the gap between the moving stair and the sidewall;
- b) notifying the public how dangerous escalators can be and what type of accidents can occur while riding one;
- c) creating better warning signs that will educate and inform riders.

We are a well-educated couple forced to learn of escalator entrapment injuries from stark reality. Please grant this petition so that other parents will not get educated the same way we were.

Respectfully submitted,

  
\_\_\_\_\_  
Diana Anderson

  
\_\_\_\_\_  
Scott Anderson

DA/SA/cc  
Enclosures

# most often harmed in escalator accidents



Ted Mase / Detroit Free Press

ole Gaincross of Canton Township, Mich., lost a big toe in 1992 when the face of her high-top sneaker caught in a department store escalator. She's had to give up gymnastics and dance.

all the accidents that have occurred and given the number of deaths over the years," said Fox, who retired from the state in January and now does consulting work. Fox considers himself to be a member of the American Society of Mechanical Engineers' code committee that sets the national standards for escalator design and safety.

For example, escalators can come to an abrupt stop for no apparent reason, sending riders tumbling. Sometimes it's the result of a malfunctioning safety trigger; sometimes someone has hit a safety stop button. At other times, the cause remains a mystery.

White said public education is the key to escalator safety.

"Education is good, but it doesn't go far enough," said Carl White, president of a prominent escalator manufacturing firm and an outspoken member of the industry's national code committee for 11 years. His firm is Carl J. White & Associ-

ates, is in Colorado Springs, Colo.

In pushing to create a perception that riders cause accidents, White contends the industry is trying to avoid the costs of fixing safety hazards on escalators. Manufacturers and suppliers dominate the code committee that sets safety standards, White said. "The politics and the control of the manufacturers is unreal."

Russell Kramer, an escalator-elevator consultant who has testified in more than 575 court cases nationally, often for plaintiffs, agrees that rider safety and maintenance are important. But the machines still will be dangerous, said Kramer, whose firm recently moved from Detroit to Las Vegas.

"An escalator is inherently dangerous from day one," Kramer said. "You have a moving object next to a stationary object, so you have pinch points. Children's fingers, toes, feet and hands get cut off constantly. The industry knows this. There are

devices to correct this. But the industry won't do anything about it."

The most important change needed on escalators is closing up the gaps in the machinery that catch people's fingers and toes, Kramer and White agreed.

For example, foot entrapment is the second-most-common cause of escalator accidents, after falls, according to White and an Otis Elevator ad. The main problem area for these accidents is the clearance gap between the sides of each moving stair and the stationary escalator wall.

A space is needed to keep the stairs from gouging into the wall. For safety reasons, the national escalator code mandates that the gap can be no more than three-sixteenths of an inch on each side. But as the escalator runs, the stairs can shift and cause larger gaps.

In 1983, White patented an invention of escalator step safety side plates, which close up this gap and

limit the chances of injury. He said escalator manufacturers weren't interested in making them a part of their standard equipment.

Today, about 600 escalators nationwide have been retrofitted with White's side plates, mostly at public buildings and transit authorities. It costs about \$5,000 per escalator.

Since installing the side plates in 1985, the Metropolitan Atlanta Rapid Transit Authority has not had any entrapment injuries on its 140 escalators, MARTA officials said. Prior to installing the side plates, the escalators had caught about 75 shoes.

They didn't help Weston Goldsmith, unfortunately. His left hand was irreparably crushed in the side gap of an escalator at a Sears store in 1989. He was 3 at the time. And although he was holding his mother's pant leg, he put his left hand on the escalator stair to steady himself from falling. Sears spokeswoman Paula Davis said company policy prohibits discussing specific cases.

Phillip Morosco, general manager of the center where the accident occurred, said he relies heavily on a contractor to maintain eight escalators in the mall's common areas and make sure they are in compliance. Additional escalators are controlled by stores at the mall.

Industry consultants like White say there are plenty of changes that could be made to escalators to make them safer:

- Painting colored lines on stairs can make it easier for people to judge their movement.

- More signs can warn of the dangers.

- Improved sensors within the side walls could stop the machinery more quickly and reduce injuries.

But there are no safety mechanisms for the escalator comb plates that could have spared Nichole and Donovan their amputations, White said.

White is especially critical of the Consumer Product Safety Commission for not making escalator manufacturers report injuries and for doing little to force changes in escalator design.

EXHIBIT "B"

Table 3  
**Injuries Associated with Escalators by Age of Victim and Type of Hazard**  
 Annual Average Estimates for 1990-1994

Age	Type of Hazard			
	Total	Falls	Body Part or Shoe Caught	Other
Total	5,900	4,400	1,000	500
Under 5 Years	1,200	700	500	*
5 - 14 Years	800	400	300	100
15 - 64 Years	2,200	1,700	200	300
Over 65 Years	1,700	1,600	*	*

Source: U.S. Consumer Product Safety Commission / EHHA. National Electronic Injury Surveillance System.

\* Estimate is less than 100. Estimates are rounded to the nearest hundred.

CO-CHAIRMAN  
Sister Mary Therese Zammitel, P.C.C.  
Monastery of Poor Clares  
3501 Rocky River Drive  
Cleveland, Ohio 44111  
(216)941-2820

CO-CHAIRMAN  
Thomas C. Sinelle  
Director of Finance  
City of Berea  
11 Berea Commons  
Berea, Ohio 44017  
(216)234-5436

EXHIBIT "C"

CO-CHAIRMAN  
Thomas C. Sinelle  
Counselor at Law  
Fairview Professional Bldg  
21270 Lorain Rd.  
Cleveland, Ohio 44125  
(216)323-7707

*Zammitel  
is still a nun.*

February 22, 1978

*835-  
3795*

Office of the Secretary  
U. S. Consumer Product Safety Commission  
Logan Bldg. (L)  
1118 18th Street Q N.W.  
Washington, D.C. 20207

Dear Sirs:

After petitioning the assistance of God our Father, we, the undersigned, formally petition the Consumer Product Safety Commission, as outlined in Section 10 of the Consumer Product Safety Act, to commence a proceeding, together with such investigation as you find necessary, which will lead to the issuance of a Consumer Product Safety Rule to insure greater safety for persons of all ages on escalators, particularly children and the elderly.

After a member of our family was injured on an escalator (a four year old boy whose right foot was crushed) here in the Cleveland area in October, 1976, we felt obligated to look into the matter, hoping to alert the particular escalator manufacturer (Montgomery Elevator Co.-Moline, Ill.) that such a terrible accident had occurred on their product, and certainly hoping that such an alert would lead to an investigation and follow-up modification of any engineering defects. This all seemed eminently reasonable in view of the fact that this child's foot was pulled into the mechanism as he quietly was standing beside his mother, on the escalator, holding her hand, his other hand resting on the handrail.

Not only did our effort to gain any worthwhile results fail, but we had to experience an attempt on the part of the particular escalator manufacturer to counter any possible lawsuit on the part of the child's parents, by sending an agent from the Commercial Union Assurance Company to get information from the mother, under the guise of an engineering investigator from the company, whose supposed interest was solely in protecting other youngsters from a similar accident.

Within two months of this accident, we were sent the enclosed clipping from a Pittsburgh newspaper, regarding two children injured on an escalator in Gimbel's Department Store in Pittsburgh. Both accidents occurred in December, 1976.

The shock of these three accidents led us to contact the Cleveland Consumer Action Foundation which referred us directly to Mr. John Gilmore of the Cleveland field office of the Consumer Product Safety Commission. At the same time, we contacted Mr. O. Earl Lowe, Executive Vice-President of the Greater Cleveland Safety Council, who encouraged our interest and furthermore provided us with the enclosed photostated information obtained from various branches of the National Safety Council. Mr. Lowe informed us that escalator injuries were very much a concern to the Safety Council. He spoke of one case in Chicago where a young boy was so seriously injured that brain damage resulted, from which the child will never recover. Until we received the photostated information from Mr. Lowe, especially the Inter-Office correspondence of the Otis Elevator Company, we had no idea accidents on escalators were this prevalent, numbering in the hundreds and even thousands.

Mr. Gilmore, of the Cleveland branch of your Commission, courteously informed us that, as a result of our written complaint to him, we might proceed to make a formal petition to you in Washington, and he added to our accumulated evidence the enclosed statistics which your Washington office has currently on file, statistics drawn from NEISS Hospital reports.

Gentlemen, these statistics are frightening, and they graphically show that escalators, at least as they are presently designed and/or governed by any safety codes, do present an unreasonable risk of injury:

- a) to children, the elderly and the handicapped particularly,
- b) because of the frequency of accidents upon them, and the degree of severity of these accidents, ranging from mild injury to lifelong disability and in some cases, death,
- c) due to lack of clear and adequate warnings or instructions by the manufacturers, even though they are aware of the potential dangers of their product,
- d) due to the withholding from the general public, in most cases, knowledge of the accidents, and frequency,
- e) due to the number of possible-injury sites in both design and construction, and/or possible lack of safety mechanisms.

The statistics we have been able to gather, which are only a fraction of a total which is overwhelming, point to a very urgent need that a C.P.S. Rule be issued to insure greater safety in the future. We are aware that the American National Standards Institute has published a Standard Safety Code for Elevators, Escalators, Dumbwaiters and Moving Walks (ANSI A 17.1-1971). It was prepared by the American Society of Mechanical Engineers Committee on Protection of Industrial Workers. Copies of this Code are available at a cost. However, we submit that the Code is insufficient, however comprehensive it might attempt to be.

In the enclosed photostated material, please note in the first article (WHAT YOU SHOULD KNOW ABOUT ESCALATORS taken from the Summer, 1972 issue of FAMILY SAFETY) that the instance of children's feet being pulled into the escalator mechanism is clearly explained:

"Feet and toes get caught because they are drawn into the pinch points. George Matwes, the safety director of Bamberger's department store in Newark, NJ, explains it this way: 'Children get caught by their footwear--sneakers, boots, galoshes--shoes with soft rubber soles. When a shoe or boot sole is run along the skirt (bottom edge of the side panel) of the escalator, the rubbing of the plastic-type soles creates friction which in turn heats the sole so that it stretches and gets into the mechanism.

"The shoe or boot then draws the foot into the crack and it may not be possible to pull free.' The safety director of another large department store says the escalator probably would pull the rider up or down to the limit of the switches located below the skirt guard on both sides of the steps. These switches automatically shut off the power when they're intercepted by a hand or foot that's caught between the escalator stair and the skirt guard on the side.

"Some escalators use only two switches on each side of the stairway, about 4 feet and 1-1/2 feet from the comb plate. Others have as many as six to 11 switches at intervals along the skirt guard."

The article then goes on to say that advisory signs and admonitions are prominently displayed, seeming to refer to this and other escalator hazards. Gentlemen, that simply is not true of all places where escalators are installed. Perhaps it is common in other cities; it certainly is not done in Cleveland. We do not think it an exaggeration to say that most parents are totally unaware that any such danger exists for their children.

In any event, escalator manufacturers (and anyone who may know that the periodical FAMILY SAFETY exists, and had carried an article in the Summer of 1972 about escalator dangers) are clearly aware that these possible-injury conditions exist, and have had this knowledge since said Summer of 1972 at least. We submit that the simple warning at the entrance of every escalator "Please Hold Handrail" does not convey the all-important "clear and adequate warning or instructions" to parents and all riders of escalators. It was only after yet another Cleveland child was injured in the Spring of 1977 that a department store in this area displayed a sign warning riders of the dangers of getting rubber soles caught in the mechanism. This was at Halle Bros. Co. in the Westgate Shopping Center. It is commendable that the department store itself displayed such a warning, but we submit that the real responsibility in this matter rests with the escalator manufacturers.

We have concentrated attention on only one area of unreasonable risk to children on escalators. There are others which your investigation will undoubtedly bring to light, and still more, with regard to safety to the elderly. Indeed the NEISS Hospital reports of injuries showed that all age groups are affected. One case was that of resultant death for a 43-year old male who suffered crushing injuries from an escalator mechanism.

Therefore, we ask that your Commission initiate an investigation which will hopefully lead to a sorely needed Safety Rule for all escalators. The entire scope of such a Rule has yet to be determined by the investigators and your Commission. Lacking engineering and technological expertise we can

only call your attention to the number and frequency, as also severity, of accidents. We sincerely request that positive action be taken. We would hope that such a Rule would provide that

- a) the entire nation be made aware that these accidents are occurring, and why.
- b) That clear and adequate written warnings be displayed at entrances to all escalators.
- c) That the entire matter of safety mechanisms and emergency shut-offs be examined by impartial engineers not connected with the Elevator-Escalator industry, and needed modifications made.
- d) That all employees of stores using escalators be obliged to learn how to shut off an escalator should an accident occur. (When our small relative was injured, nearby employees did not know how to stop the moving stairs.)
- e) That engineers be encouraged to develop "injury-proof" escalators by means of sensor systems or changes in construction or design preventing contact of shoes with the skirt guard. If our modern technology has taken men to the moon and brought them back safely, surely this is not an idealistic, unattainable feat.
- f) That legislation be adopted requiring some form of marking be applied directly on the surface of all escalators delineating areas beyond which persons are prohibited to step.

We appreciate any consideration your Commission may give to this petition, as small a voice as it may be challenging the giant of corporate industry. In helping us your Commission will be helping itself, yourselves and your children. To quote the three Medical Doctors in (the last photostated article included) HAZARDS TO HEALTH from the December 17, 1964 issue of the NEW ENGLAND MEDICAL JOURNAL:

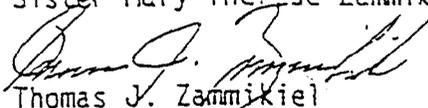
"Injuries in the pediatric age group are a substantial percentage of the total escalator injuries and are thus a proper concern of the medical profession and public-health agencies. Four cases of serious escalator injury are reported.

"No substantial reduction in the frequency or severity of these accidents to children can be expected until there is a concerted effort to eliminate the conditions known to cause these accidents."

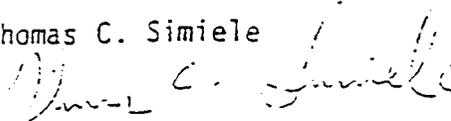
Our gratitude and kind regards,

AD HOC COMMITTEE FOR GREATER SAFETY ON  
ESCALATORS

Sister Mary Therese Zammikiei, P.C.C.

  
Thomas J. Zammikiei

Thomas C. Simiele



## NOTICES

[4355-01-A]

CONSUMER PRODUCT SAFETY  
COMMISSION

Petition No. CP 78-121

## ESCALATORS

Denial of Petition

AGENCY: Consumer Product Safety  
Commission.

ACTION: Denial of Petition.

SUMMARY: The Commission denies a petition requesting it to develop a mandatory safety standard addressing risks of injury associated with escalators. The Commission denies the petition because the currently available information is insufficient to indicate that escalators as they are presently constructed and designed present an unreasonable risk of injury to consumers.

FOR FURTHER INFORMATION  
CONTACT:

Irwin L. Grefl, Office of Program  
Management, Consumer Product  
Safety Commission, Washington,  
D.C. 20207, 301-492-8754.

SUPPLEMENTARY INFORMATION:  
Section 10 of the Consumer Product  
Safety Act (CPSA) (15 U.S.C. 2059)  
provides that any interested person  
may petition the Consumer Product  
Safety Commission to commence a  
proceeding for issuance of a consumer  
product safety rule. Section 10 also  
provides that if the Commission denies  
such a petition, it shall publish its  
reason for denial in the FEDERAL REGISTER.

On April 18, 1978, the Commission  
received a petition and supporting docu-  
ments from members of the Ad Hoc  
Committee for Greater Safety on Escalators,  
of Cleveland, Ohio. The petition  
alleged that escalators present an  
unreasonable risk of injury, particularly  
to children and the elderly, due to  
inadequate warning signs and unsafe  
construction and design. The petition  
called particular attention to the risk  
of body parts being pulled into the  
escalator mechanism.

In analyzing this petition, the Com-  
mission considered injury information  
submitted by the petitioners, its own  
investigation of injury data, economic  
and engineering data, and applicable  
voluntary standards.

Two major hazards patterns  
emerged from a search of the Commission's  
National Injury Information  
Clearinghouse data: Falls, and entrapment  
of body parts or shoes between  
two components of the escalator.  
Falls appear to be the most common  
type of accident associated with esca-  
lators and usually involve the elderly.  
Entrapment of shoes, feet, hands, and

go forth is the second most common  
type of accident associated with esca-  
lators. This hazard seems to involve  
primarily children under 12.

The causes of entrapment accidents  
are generally quite specific—the victim  
is typically wearing soft soled shoe  
which becomes caught in the mecha-  
nism, or a child is playing on the esca-  
lator in such a way as to expose fin-  
gers or clothing to moving parts of the  
escalator. Most reports of falling inci-  
dents give only general statements as  
to cause, such as "lost balance," with  
no identifiable reason for losing bal-  
ance.

A search of the National Electronics  
Injury Surveillance System (NEISS)  
revealed 125 accidents associated with  
escalators during the period January  
1, 1977 through May 31, 1978. The age  
range of the victims was from five to  
65+, with injuries ranging from contu-  
sions, to strains and sprains, to lacer-  
ations and fractures, with virtually all  
body parts being affected. A review of  
21 in-depth investigation reports  
dating from 1967-77 disclosed 13 en-  
trapment incidents and eight falls. In  
addition, 6 deaths involving escalators  
have been reported to the Commission.  
It appears that 2 of the 6 deaths  
may be classified as industrial in  
nature due to the type of injuries in-  
volved. The other 4 victims were in-  
jured when they fell down escalators.

Commission investigation reveals  
that these accidents are occurring in  
the context of at least 32 billion esca-  
lator rides per year, on 18,000 esca-  
lator units (a unit is either an up or  
down escalator).

The Commission notes that many  
States have statewide elevator and esca-  
lator codes. The American National  
Standards Institute (ANSI) Code for  
Elevators, Dumbwaiters, Escalators,  
and Moving Walks (ANSI A17.1),  
which has been adopted at least as a  
technical basis for a State code in 22  
States, contains many safety features  
relating to fall, entrapment, and  
pinching hazards. In addition, Com-  
mission staff have been informed that  
the ANSI Escalator Subcommittee has  
recently approved and transmitted to  
the Executive Subcommittee a pro-  
posed revision of the escalator stand-  
ard which would provide for the uni-  
form placement of emergency on-off  
stop switches and would establish re-  
quirements for the size, wording, and  
location of warning signs for esca-  
lators. It is anticipated that this revision  
will be approved some time before the  
end of the year.

However, the Commission has noted  
that the current A 17.1 may be inad-  
equate in two other respects. The  
injury data involving escalators sug-  
gest that the severity of injuries suf-  
fered once a foot entrapment occurs  
may be related to the duration of en-

trapment and the distance the victim  
is dragged along the length of the es-  
calator before the escalator stops. A  
17.1 presently requires one automatic  
shutoff device (skirt obstruction  
device) near the lower combplate. Fur-  
ther investigation is needed to deter-  
mine whether and to what extent in-  
creasing the number of skirt obstruc-  
tion devices on an escalator will reduce  
the severity of entrapment injuries. In  
addition, the maximum 1/4" side clear-  
ance (between the step and the balu-  
trade) permitted by the ANSI Code  
may be too large to prevent many en-  
trapment accidents.

The Commission has carefully con-  
sidered the matters raised in the peti-  
tion and the injury and technical data  
submitted by the staff. Based on this  
information, the Commission con-  
cludes that considering that million  
of consumers use escalators daily, the  
injury data are insufficient to indicate  
that escalators present an unreason-  
able risk of injury. Accordingly, the  
Commission has denied the petition.  
In reaching this decision, the Commis-  
sion considered the relative priority of  
the risk of injury associated with esca-  
lators in the context of Commission  
resources available for rulemaking for  
all hazardous consumer products.

The Commission recognizes, howev-  
er, that skirt obstruction devices and  
allowable side clearance may be fac-  
tors in the number and severity of en-  
trapment injuries. Therefore, the  
Commission has indicated an interest  
in the staff encouraging an industry  
effort to determine whether skirt ob-  
struction devices capable of detecting  
entrapment along the entire length of  
an escalator, and whether less side  
clearance than that currently permit-  
ted by A 17.1 would appreciably  
reduce the number and severity of  
these injuries. If a determination is  
made that the presence of more skirt  
obstruction devices and less side clear-  
ance would result in a significant re-  
duction in number and severity of en-  
trapment injuries, Commission staff  
would then encourage and monitor ap-  
propriate amendments of ANSI A 17.1.

Copies of the petition and the staff's  
briefing package to the Commission of  
the petition may be obtained from the  
Office of the Secretary, Consumer  
Product Safety Commission, 1111 18th  
Street NW., Washington, D.C. 20207.

Dated: October 10, 1978.

SADYE E. DUNN,  
Secretary, Consumer Product  
Safety Commission.

(FR Doc. 78-29008 Filed 10-12-78; 8:45 am)

The Sun : Sunday, July 21, 1996 : Page 3A

EXHIBIT "E"

## Federal government agency seeks tougher standards on escalator safety

BOSTON GLOBE

The federal government, in a reversal of a long-standing position, has determined that escalators pose a special threat to children and is pushing for an overhaul of most of the country's 30,000 escalators.

The U.S. Consumer Product Safety Commission concluded that escalators can be made less hazardous to children with the ad-

dition of safety devices that have been on the market but were never before required, according to documents obtained by the *Globe*.

"All of this information suggests that regular occurrences of entrapment, particularly of the legs and feet of small children, can be almost completely eliminated by the installation of aftermarket safety devices," the agency wrote in a letter this month to the chairman of the committee that sets

the national escalator safety code. The agency is calling for tougher standards for new equipment, saying that a redesign of escalators could "reduce or eliminate many of the other hazards as well."

Safety commission spokesman Rick Frost said the agency is most concerned about the gap between the moving stair and the sidewall on an escalator. The agency estimates that about 1,000 people a year seek emergency treatment after a body part or shoe is sucked into that gap. Of that number, half are children under 5, the agency said.

An estimated 7,300 people sought emergency-room treatment for escalator injuries in 1994.