
Employee Safety: Risk Management is a Win-Win

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Diane Schweitzer, PhD, RN, CFSP, FMP

meet
ME
in St. Louis

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Affiliation Disclosure

- Diane Schweitzer, PhD, RN, CFSP, FMP
 - Member of American Society of Safety Professionals (ASSP)
 - Member of the Chef Cyndie K-12 Culinary Solutions Team; Culinary Solution Centers, LLC

Purpose of Risk Management

- ◆ Purpose of Risk Management is to Reduce Potential for Accidents and Injuries for Staff, Students, and General Public.
- ◆ OSHA (1970) Guarantees Workers a Safe Workplace; Free From Hazardous Conditions Which May Result in Illness, Injury or Even Death.

What You Will Learn in This Presentation

- A Worker Safety SYSTEM will Cause Your Program to ***Preserve Needed Funds*** for your CN Program
- Strategies to Prevent Losses Due to Workplace Injuries
- Identification of CONDITIONS that Contribute to Workplace Injuries

The “Leaking Bucket” Concept

- Is Your CN Program Leaking Operating Funds as a Result of Workplace Injuries?



School Facilities Can be Dangerous

- ◆ We Operate Potentially Dangerous Equipment
- ◆ Environmental Conditions May Predispose Workers to Injuries
- ◆ Hot Steam and/or Water
- ◆ Slippery Floors, Parking Lot Pavements, Uneven Surfaces
- ◆ Electricity, Unsafe Equipment
- ◆ Poor Design, Overcrowding
- ◆ Improper Body Mechanics; Repetitive Motions

Injuries or Illness as a Result of

- ◆ Lack of Funding for Repairs or Replacements
- ◆ Defective Equipment or Poorly Maintained Equipment
- ◆ Poor Housekeeping, Custodial Services
- ◆ Poor Ergonomics- Bending, Lifting, Reaching
- ◆ Inadequate Lighting
- ◆ Poor Layout or Design, Not Enough Aisle Space
- ◆ Inadequate Storage, Overcrowding with Inventory
- ◆ Improper Ventilation- Carbon Monoxide and Dioxide

Injuries as a Result of:

- ◆ Physical Impairment- Poor Physical Condition, Alcohol, Drugs, Stress, Fatigue, Employee Physical Stature
- ◆ Not Wearing Personal Protection- Oven Mitts, Goggles, Mask, Special Gloves; Improper Footwear
- ◆ Improper Storage (or Use) of Volatile Chemicals
- ◆ Improper Use of Blades- Knives, Slicers, Food Processors, Cutting Boards

Injuries as a Result of:

- ◆ Lack of Knowledge (No Training)
- ◆ Poor or Ineffective or Inadequate Training
- ◆ Lack of Skill (No Experience)
- ◆ Lack of Attention (Distracted)
- ◆ Risk-Taking
- ◆ Failure to Act (Or Report), Complacency
- ◆ Unauthorized Use (Not Trained to Use)
- ◆ Removal of Safeguards

Losses Due to Injuries

- ◆ Safety Incidents Cost About \$54 Billion Per Year in Lost Productivity
- ◆ Lost Days From Work, Service Disruptions
- ◆ Loss in Product; Loss in Quality
- ◆ Loss of Revenue and/or Profitability
- ◆ Increase in Expenses; Increase in Insurance Premiums
- ◆ Loss of Trust, Employee Morale Issues

“Direct Expenses” of Injuries Include:

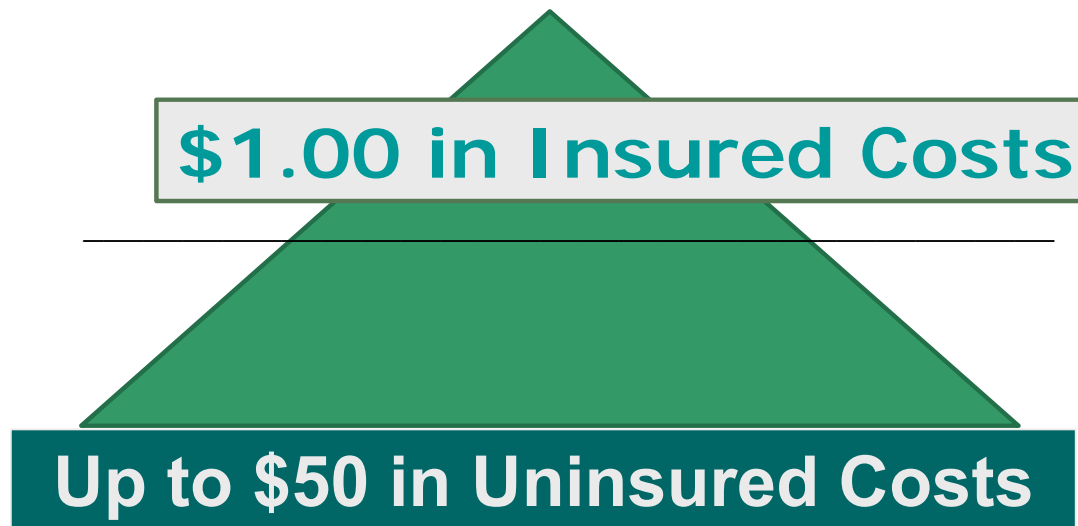
- Medical Care- Emergency Room, Physician, Treatment, Physical Therapy, Medication, Diagnostic Testing, Follow-up Treatment and Care
- Cost of Substitute Employees, Payroll taxes
- Loss of Equipment
- Damage to Facility

“Indirect (Hidden) Expenses” Include:

- ◆ Accident Reporting (Administrative Time)
- ◆ Legal Fees, Lawsuits, Civil or Criminal Fines
- ◆ Administrative Costs for Investigation (Time and Materials)
- ◆ Loss in Quality Due to Inexperienced Replacement Employees
- ◆ Gradual Increase in Insurance Premiums
- ◆ Morale Issues, Gossip, Poor Public Relations

Iceberg Model

- ◆ For Every \$1 in Insured Cost (Direct Expenses), Up to \$50 May be Uninsured (Indirect Expenses).



Costs to Injured Worker and Families

- ◆ Injured Workers and Their Families Absorb About 44% of Overall Injury Cost (Leigh, Fahs, & Landrigan, 2000).
- ◆ Many Uninsured Costs Incurred by Families of Injured Workers (Comfort Measures, Loss of Family Income, Travel to Medical Appointments)

Return to Work Policies

- ◆ The Longer an Employee Remains Off Work, the Less Likely he/she is to (want to) Return (Leigh et al, 2000).
- ◆ Employee Who is in No Hurry to Return to Work May (falsely) Tell the Physician he/she Cannot Return to Work Because Work is too Demanding for Physical Condition (Taylor, 1992).
- ◆ Overall Injury Costs are Reduced When the Employer Finds Work the Employee can Perform (Hwang & Kleiner, 2002).

Return to Work Policies

- ◆ Los Angeles Unified Schools Were Successful in Reducing Number of Injuries and Overall Injury Costs When They Created a Website for Workers' Compensation AND they Hired a Risk Manager (L.A. Schools, 2006)
- ◆ School Districts May Need a Statement in Policy & Procedure Manuals, Union Agreements That *Alternate Work* May (Or Will) be Provided.

A Safety System

- ◆ A Safety SYSTEM Consists of Policies, Procedures, Standards, Strategies to Control, Reduce or Eliminate Hazards and Prevent Injuries.
- ◆ Business and Industry Frequently Employ Corporate Safety or Risk Manager Officers.
- ◆ Schools May Have SOME Safety Initiatives in Place to Reduce Injuries, but not Necessarily a Cohesive Worker Safety SYSTEM.



Administrative Support

- ◆ “It Starts at the Top”
- ◆ Board Policies and Administrative Guidelines
- ◆ Support for a School Safety Committee
- ◆ Implementation of Employee Health and Wellness Programs
- ◆ *Time Support* for Training and Meetings
- ◆ *Financial Support* (Line item in Budget) for Safety Initiatives

Safety Team

- Child Nutrition Director
- School Nurse
- Insurance Coordinator
- Human Resources/Labor Relations
- Business Manager
- Maintenance Supervisor
- Custodial Supervisor
- Insurance Company Representative

Safety Plan

- ◆ Job Descriptions That Include Physical Requirements
- ◆ Drug Testing and Pre-employment Physical Exam Before Hire
- ◆ Workers Matched to Physical Demands of the Job. Not Hiring Medically-Compromised Individuals
- ◆ Medical Evaluation if Employee Can No Longer Fulfill the Job Requirements Because of Physical Condition
- ◆ Employee Discipline as Related to Safety Behaviors

Communication

- ◆ Safety Posters, Newsletters, Social Media
- ◆ Communication and Instruction in Two Languages
- ◆ Safety Meetings Held at Least Quarterly
- ◆ Safety Information Disseminated to Employees
- ◆ Quick Safety Reminders
- ◆ Formal Safety Training at Scheduled Meetings

Education and Training

- Safety Meetings
- Presentation of Safety or Injury Data
- Formal Training by Professionals- Occupational Medicine Physicians, Physical Therapists, Ergonomists, Nurses
- Involving Employees in Safety Inspections

Medical Treatment

- Workers Compensation is Federally Required, State Regulated, but EMPLOYER Driven!
- *Occupational Medicine Physician at District-Appointed Clinic*
- NOT Local Emergency Room
- NOT Employee Personal Physician
- Physician at Clinic Should Have Job Descriptions On Hand to Review Physical Demands of the Job

Protocol

- Treat injury in the Nurse's Office, at the Clinic, at the Hospital, or Call 911?
- How to Transport
- Who Should Accompany the Employee (if Needed)
- Emergency Contact Information (Updated) for Each Employee to Notify Family on Behalf of Employee
- Follow Up with the Injured Employee to Express Care and Concern

Injury Reporting

- When? Immediately
- Within 24 Hours
- See School Nurse for Preliminary Medical Evaluation of How to Treat
- Nurse Fills Out First Report of Injury for Insurance Purposes and Annual Department of Labor (DOL), OSHA Required Report
- Employee is Treated FIRST, Then Get the Details

Accident Investigation

- Follow up Investigation- Who Should Investigate
- Investigation Form (Standardized)
- Review Surveillance Cameras if Necessary
- Take Photographic Evidence (Conditions Change After an Injury)
- Interviews with Injured Employee and Witnesses
- Comparison of Medical Notes to Injured Employee Statement
- Employee Discipline as Related to Injury Reporting or Improper Safety Behaviors
- Make Repairs Based on Information Obtained

Return to Work Programs

- Employee Returns to Work as Soon as Possible
- Light Duty Work Provided
- Honor Physician Orders Explicitly- Meaningful, Relevant Work
- Have List of Light Duty Jobs- Consider Giving Choice of Work
- Costs Are Reduced When the Employer Finds Work the Employee Can Perform (Hwang & Kleiner, 2002).
- Fit for Duty Testing Before Full Release
- The Longer an Employee Remains Off Work, the Less Likely he/she is to (Want to) Return (Leigh et al, 2000).

Hazard Inspections

- Monthly Inspections
- Employee Involvement with Inspections
- Encourage Reporting of Unsafe Conditions
- Corrective Action Immediately
- Include Safety in Physical Facility Design; Material Handling Equipment
- Invest in Safe Equipment
- Remove and Replace Unsafe Equipment
- Partner with Maintenance and Custodial Departments

Analysis of Data

- Which School?
- Which Department?
- Which Location Within the School?
- Type of Injury
- How Many Injuries (Called Frequency)?
- Cost of Injury- How Much (Called Severity)?
- Look for Trends; Watch for “Frequent Fliers”
- ACT Based on Data- Corrective Action
- Compare With Insurance Company

Retraining

- Experienced Workers Become Complacent (and Careless)
- New Employees are Unfamiliar With Potential for Injury
- Analyze and Review Data for Corrective Action Opportunities
- Prevent Future Injuries
- Train and Retrain Based on Analysis of Data

My PhD Dissertation Findings

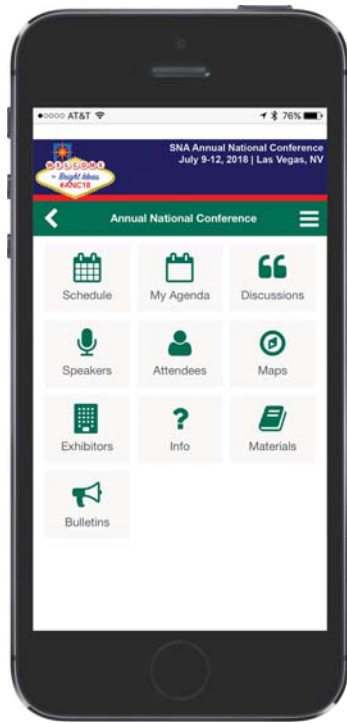
- ◆ As Safety ATTITUDES Increase, Safety PRACTICES Increase
- ◆ As Safety PRACTICES Increase, Perceived CHALLENGES to Safety Initiatives Decrease

A Comprehensive Worker Safety Program “Plugs the Holes” in the Leaking Bucket to Operate a More Efficient and More Effective CN Program, A Real “Win-Win” for All!



Have a
SAFE
and Happy Summer
and a
GREAT
2019-2020 School Year!

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Thank You!