

How to *Involve* Your Employees in the Safety Process



HOW TO INVOLVE YOUR EMPLOYEES IN THE SAFETY PROCESS

NFIB/Ohio WORKPLACE SAFETY PROGRAM GUIDELINES


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The video and guidelines do not attempt to tell you how to comply with the many specific safety regulations or requirements that may be applicable to your business. While the guidelines and the video are designed to provide methods and approaches to involve your employees in the safety process, both may either directly or indirectly refer to various state or federal regulations that are applicable to workplace safety.

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This video and the guidelines are not designed to provide you with the specific steps to take in order to comply with safety regulations and requirements. Instead, both should be used as tools to involve your employees in the safety process.



The NFIB and GatesMcDonald & Company recommend that you consider using the appropriate safety consulting agency in your state, or hire a safety consultant to assist you in utilizing the approaches outlined in these materials to both implement safety as a value process in your business and complying with applicable regulations and requirements. They further recommend that if your business adopts these guidelines, each be should implemented to the fullest extent possible.

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SECTION I - INTRODUCTION

Benefits

Experience shows that compliance-based safety is necessary, but not sufficient, for effective prevention of accident-related losses. Traditional approaches fail to deliver satisfactory results.

Today's successful businesses rely on safety systems and processes that add value and improve overall business performance. Safety systems for the 1990s and beyond must incorporate cultural change, behavior-based approaches and employee involvement.

To be effective, safety must be managed like any other part of the business. Prevention efforts will be most fruitful in a safety culture where everyone values, takes responsibility for and is accountable for safe performance.

The payoff is a culture whereby all members of the organization value the safety of individuals and operations, share accident prevention beliefs, and actively manage workplace safety and health. The results include:

- increased economic value for the organization;
- reduced workers' compensation cost;
- increased safety awareness;
- increased employee ownership for success;
- enhanced communication and trust;
- lasting change in the culture.

How to Use This Manual

This manual walks you through the 10 Business Steps and offers suggestions for developing and implementing approaches with employees that will allow your business culture and safety culture to evolve together.

Managing organizational risk successfully involves putting in place an extensive array of systems and processes. Success requires that all staff members understand the value placed on safety and health by the organization's leadership, be clear on their individual performance expectations and acquire increased knowledge in safety and health. Because managing safety is such a very complex endeavor, this manual provides an overview rather than a comprehensive treatment of the subject. Consult the reference section on page 20 for additional information on specific aspects associated with managing risk in today's business environment.

This manual is designed to be a guide for an organization charting a course toward achieving its vision of safety. Progress toward that vision may come in spurts, with setbacks likely. However, a safety culture and an organization's culture evolve together, requiring persistence and patience. Integrating the 10 Steps into the normal way of conducting business will help companies develop a new safety culture and identify safety as a "core" organizational value.

The first section, **Introduction**, introduces the 10-Step Plan and discusses reasons for developing sound safety and health management approaches to accident prevention and cost containment.

Section II, **10-Step Business Plan**, examines each increment in the 10-Step Business Plan. Every section begins with the definition associated with each step and includes requirements plus additional implementation suggestions.

Since it is impossible to cover everything on safety and health approaches in this manual, Section III **Resource/Reference**, contains an article that appeared in the December 1994 issue of *Ohio Monitor*, along with a listing of resources to assist you in understanding contemporary concepts and in generating ideas.

Section IV, **Checklist**, is for use in tracking your business' progress toward successfully developing excellence in your accident prevention systems and processes.

Investing in an Effective Safety and Health Process

Ineffective accident prevention management results in occupational injuries and illnesses, significantly decreases profitability through reduced efficiency and escalates insurance costs. It's not unusual to see a company with poor injury and illness performance paying three or even four times the insurance premium its competitors are paying!

The insured costs, or direct costs, of injuries and illnesses are obvious and include items such as medical bills, rehabilitation costs, disability payments and lost-time benefits. However, those costs are often the "tip of the iceberg" of expenses for the employer. The "hidden" costs of injuries and illnesses are indirect or uninsured costs. Studies indicate that uninsured or indirect costs are from four to 10 times greater than the insured costs.

Examples of indirect or uninsured costs:

- administrative costs;
- failure to meet schedules;
- loss of production/service capability;
- overhead costs that continue while work is disrupted;
- spoiled work or damaged product;
- damage to tools and equipment;
- loss of efficiency due to breakup of crew;
- cost of training a replacement worker;
- lost staff time
 - when damaged equipment is out of service
 - by employees either helping or discussing the incident
 - by supervisors investigating accidents and following up.

On-the-job injuries and illnesses have an adverse effect on both public image and employee relations. While a company's safety achievements often go unnoticed, a catastrophic accident is more likely to be the subject of articles in local newspapers and conversation in coffee shops. Employees and the community remember a major company accident long after safety achievements have been forgotten.

A good workplace safety program strengthens employee relations by demonstrating to employees that you sincerely care about them. Having a strong sense that the "organization cares" helps employees feel better about their jobs and about themselves. By implementing managed approaches to accident prevention, you show your employees that you DO care. This has a strong influence on employees in terms of:

- improved morale
- lower absenteeism
- higher productivity.

Controlling both insured and uninsured accident costs is best accomplished by developing the organizational belief that safety is a "core" value within the organization and by managing safety as you do quality, customer service and productivity. Actively managing safety and health systems minimizes the cost of workers' compensation insurance, reduces the uninsured cost of accidents, and improves public and employee relations. Safety is more than an investment in your employees. It also adds economic value to the organization.

However, success in managing safety and health systems usually will not be measurable in the short term. Correcting unsafe conditions and complying with Occupational Safety and Health Administration (OSHA) regulations do not guarantee success in accident prevention. People must make decisions to perform their tasks in ways that prevent accidents and illnesses. Those decisions are made hundreds of times daily. It is only when the people of the organization truly believe that it is in their best interests to perform their work safely, that permanent performance improvements occur and safety becomes a core value and part of the organizational culture.

It takes more than attitude improvement tactics, like posters and incentive programs, to draw employees into a workplace safety program. Applying recognized, good business practices to accident prevention systems and processes, leadership by the top officials of the organization, involvement of employees at all levels, "bottom-up" communication, positive reinforcement of safe practices and behaviors and a culture that requires the integration of safety considerations into each and every decision by each and every employee are characteristics of world-class organizations. Yet, even the smallest of companies can use those same principles to achieve greatness.

SECTION II - 10-STEP BUSINESS PLAN

1. Visible, Active Senior Management Leadership

"Visible senior management leadership that promotes the belief that the management of safety is an organizational value."

KEY CONCEPTS

Contemporary businesses establish safety and health as a core value of their organizations. Senior management, including the top executive on site, must be role models to all employees for creating a safe work environment. Active leadership includes, at a minimum:

- authorizing the necessary resources for accident prevention;
- discussing safety processes and improvements regularly during staff or employee meetings;
- ensuring that all members of management are held accountable for accident-prevention activities and for managing accident-prevention processes;
- assessing the success of the safety process annually by utilizing perception surveys, personal interviews and behavior-sampling;
- encouraging employees to take an active part in maintaining a safe workplace.

IMPLEMENTATION

Senior management must assume a leadership role in establishing the importance of safety in all operations. By taking the safety and health lead, management contributes to profitability by reducing losses due to accidents. Leadership, support and active commitment by senior management encourages managers and employees to make the safety and health systems and processes successful.

Management can take these actions to show active leadership in your safety and health processes:

- issue a written safety policy identifying safety as a core value of the organization and assigning roles and responsibilities;
- establish both annual and long-term safety goals;
- include safety as an agenda item in all regularly scheduled business meetings and ask systems and process related questions;
- regularly review progress of the safety and health processes with supervisors and employees;
- accompany supervisors, safety team members or safety committee members during periodic departmental safety surveys;
- review and discuss all accident-investigation reports with the supervisor or foreman;
- personally present safety recognition awards to deserving employees;
- openly discuss safety issues with employees during periodic tours or meetings;
- participate, as a student, in employee safety training programs such as safety management and hazard identification;

- participate in meetings with accident-prevention coordinators;
- review minutes of safety team or committee meetings;
- review safety survey reports.

2. Employee Involvement and Recognition

"Employee involvement and recognition that affords employees opportunities to participate in the safety-management process."

KEY CONCEPTS

Both management and employees must actively participate in the safety and health management process for it to be effective.

Participation:

- safety and health involvement teams, focus groups, and safety and health committees;
- accident investigations;
- safety and health audits;
- acting as instructors for safety and health training programs.

Recognition-Establish an ongoing process to identify and formally recognize employees for excellence in accident prevention. Possible recognition opportunities include:

- consistently high contribution to safety and health;
- contribution to continuous improvement through participation in problem-solving, decision-making or perception surveys;
- suggesting safety and health improvements or completing special safety and health projects.

IMPLEMENTATION

Involvement-Labor/management safety and health teams facilitate dialogue on safety and health matters between management and non-management employees. The safety involvement team effectively handles problem-solving and decision-making for safety and health issues confronting the company. Team composition includes managers and direct labor employees in roughly equal numbers. Team members participate as equals and represent all areas. Teams may be natural work groups, associated with a single function area, or cross-functional and represent a variety of different work areas.

Objectives include:

- meeting regularly, but not less than quarterly;
- preparing and making available records of the safety and health issues and outcomes discussed during meetings;

- using recognized problem-solving techniques, like brainstorming, fault-tree analysis, cause-and-effect diagrams, decision analysis, charting, etc. to reach highly effective solutions to problems;
- reviewing investigations of accidents and causes of incidents resulting in injury, illness or exposure to hazardous substances and recommending specific action plans for the prevention of future incidents;
- recommending specific actions to be taken in response to valid employee safety suggestions;
- conducting surveys of the safety culture periodically (2-year intervals).

The team facilitator, who is a member of the team, is responsible for scheduling meetings, arranging for a meeting place and notifying members of meetings. The facilitation role should rotate frequently. All team members should share responsibility for other team functions.

A team member should record the minutes of each meeting and distribute them to all team members. Also, post a copy of the minutes on the company safety bulletin board for all employees to read.

Establishing the safety team's responsibility and accountability to make decisions and implement solutions is important. Empower the team to be responsible for developing effective solutions to safety problems facing the organization. Allow the team to participate in the implementation of solutions, as well. Understand that team members require education in a variety of areas, such as team-building, conflict resolution, interpersonal skills, problem-solving and decision-making skills, in order to fulfill their responsibilities productively. It takes time. Mistakes will occur, but the team will learn and improve if afforded the education and support.

Recognition—Two methods that encourage employees to use safe work practices and to integrate safety into the fabric of their jobs are:

- **Positive safe behavior reinforcement**—involves recognizing employees for their actions in integrating safety into business operations and making the right decisions. Expressing gratitude and complimenting employees for their safe performance encourages the continuation of these safe behaviors.
- **Negative safe behavior reinforcement**—involves constructively correcting employees for their poor behaviors and decisions. Constructive discipline is intended to discourage unsafe behaviors and decisions, with the intention of preventing that type of behavior in the future.

Companies use both positive and negative reinforcement to encourage their employees to perform their jobs safely. However, the tendency is to use predominantly negative approaches that leads to fault-finding and blaming employees. The result: safety is perceived as a negative by supervisors and employees. Develop a positive approach to managing the safety process by heavily involving employees, and extensively reinforcing safety behavior.

Positive safe behavior reinforcement by supervisors recognizes the safe behavior of employees. Advise supervisors to recognize and praise a minimum of one employee each day for following prescribed safe work practices or contributing to the accident-prevention systems. Recognition costs nothing, but is a visible reminder of the importance the supervisor and the organization place on integrating safety into the culture of the organization and into day-to-day operations.

3. Medical Treatment and Return-to-Work Practices

"Early intervention strategies to help injured or ill workers return to work."

KEY CONCEPTS

Establish a post-injury or disability management policy and procedures to help injured or ill employees obtain quality medical care and return to work."

Components of the disability management procedure include, at a minimum:

- procedures for obtaining medical treatment;
- immediate reporting of injuries and illnesses to a supervisor;
- regularly scheduled supervisory communication with off-work employees while they are convalescing;
- investigating all injuries or illnesses within 24 hours to identify system or process improvements so corrective measures can be taken;
- when not prohibited by labor agreement, a modified-duty program that allows employees to return to work in a productive capacity during the recuperative period.

IMPLEMENTATION

Quality medical care provided in a timely manner helps employees who are involved in an accident or illness, and promotes cost containment for those occupational injuries and illnesses. Establishing effective working relationships with medical providers is crucial for overall success. Establish an effective return-to-work process before a disabling injury occurs:

- set up lines of communication within the organization and with medical providers;
- ensure that all employees understand the modified-duty process and their responsibilities.

Three basic steps can facilitate the entire medical process and serve as the foundation for early intervention and successful medical management:

- create effective open lines of communication with a clinic, hospital or physician;
- educate the medical provider(s) about the nature of your business, its risks and your control strategies;
- build strong working relationships with the medical provider(s), so each party understands roles, responsibilities and expectations.

Modified duty process, a cost-containment strategy, involves returning employees as soon as they are able to work in a productive capacity. Returning injured employees to work will:

- enhance the employer/employee relationship;
- accelerate the injured worker's recovery process;
- minimize disability and insurance costs;
- maintain an experienced work force;
- promote employee job security.

Once the modified-duty process is established, should an injury or illness require a worker to be away from work for an extended period of time, actively help the employee to return as quickly as possible:

- define the employee's normal job requirements and compare them with the employee's capabilities;
- decide if the job can be modified, and to what extent;
- if modification of the normal job is not possible, identify other modified-duty opportunities on a limited or full-time basis;
- work closely with the claims administrator, employee and physician to determine the employee's capability of returning to work in a full or modified-duty capacity;
- if appropriate, work with a rehabilitation specialist to return the employee to a productive capacity and to place him/her in an appropriate job.

4. Communication

"A program of regular communication on safety and health issues to keep all employees informed and to solicit feedback and suggestions."

KEY CONCEPTS

Include regular verbal and written communication on matters affecting employee safety and health in your approach to managing safety and health.

Communications must include:

- quarterly written and/or verbal feedback to all employees on their accident prevention performance;
- a process for upward communication, as well as downward, and throughout the organization;
- tools for communication, which could include memos, bulletin boards, staff and general meetings;
- feedback, which includes assessment of the organization's overall safety and health performance.

IMPLEMENTATION

Safety communication is a two-way process between employer and employees. Many traditional safety "programs" emphasize top-down communication and vir-

tually overlook communication from the bottom-up. To be effective, a "bottom-up" communication process must be incorporated into the safety system.

Soliciting employee input and participation on safety and health issues will do more than simply help the organization communicate more effectively. The December 1989 issue of *Training and Development Journal* cited a Kansas study that asked employees to rank, by importance, the 10 attributes of a good workplace. Employees rated "the feeling that they are in on things" as second in importance. Encouraging employees to share their ideas and concerns on safety and health matters, and asking them for their help in decision-making and problem-solving, will help them not only feel "in on things," but actually contribute to successful outcomes. High morale and productivity also result. Experienced safety professionals acknowledge that some of the best accident-prevention ideas come from discussions with employees.

Communication with employees needs to be understood. If you have languages other than English spoken in your facilities, you must ensure that all safety and health communication is provided to employees in the language they understand. In addition, some employees may not read, requiring verbal communication.

Encourage employees to inform you of accident-prevention problems at the work site without fear of reprisal. It is crucial that a system of open, honest and trusting communication be developed and nurtured in order for a safety culture to evolve.

Whatever communication strategies are used, it is important that employee concerns and suggestions receive timely and appropriate responses. It is also important that employees feel they are being listened to and that their opinions matter.

The following communication ideas may be useful in designing your communication systems and processes:

- **One-on-one discussion**—involves the supervisor, foreman or team leader sitting down with each employee on a scheduled basis to discuss safety concerns, suggestions and ideas. Dialogue could last anywhere from 10 minutes to an hour. Ideally, discussions should be monthly, but should not be less frequent than every quarter.
- **Informal discussion**—involves an open-door policy when it comes to employee safety and health concerns. Inform employees that the accident-prevention coordinator, supervisor and/or team leader is available to discuss confidentially their safety and health questions, problems and suggestions.
- **Suggestions**—involves establishing a safety and health suggestion program. Ask employees to contribute their written comments and suggestions. Some companies provide a form for employees to use when submitting their suggestions.

- **Group discussion**—provides the opportunity for executives, supervisors, team leaders and employees to discuss safety issues at employee gatherings. Regularly schedule meetings to share information and seek input on safety and health matters. Meetings offer an opportunity to use problem-solving and decision-making techniques, as discussed for labor/management safety teams on page 7. Meetings can be formal or informal; in a conference room or on the job site; a few minutes or longer.
- **Written communication**—is important when relaying key information. Written information can be motivational, developmental or informational.
 - ◆ In-house company publications—many companies have an in-house company newsletter where accident prevention information is provided on a regular basis.
 - ◆ Safety and health booklets—safety and health information provided to employees at work or mailed to their homes.
 - ◆ Safety alert notices—use to inform employees of causes for accidents and how they can be prevented. Discuss the alert notices with employees, post notices on the safety bulletin board, or send to individual employees.
 - ◆ Memorandums—summarize discussions and plans, provide information on performance goals and expectations, give feedback on safety performance, etc.
- **Postings**—there are two types of postings:
 - ◆ safety bulletin boards—used for posting safety-related policies, notices, articles, meeting schedules, meeting minutes, memos, etc.
 - ◆ safety signs—a constant reminder of safe work practices, dangerous conditions and special precautions. Safety signs are often posted as reminders on machinery, entrances to work areas and in high hazard areas.

5. Timely Notification of Claims

“Timely notification of accidents, including lag-time reporting standards.”

KEY CONCEPTS

In the event a work related injury occurs, the following steps need to occur:

1. Supervisor should be notified immediately.
2. Supervisor will call 1-800-551-4312 to report the injury and receive a provider referral if you have not already identified one in the Provider Directory.
3. Send the employee to the MCO Doctor or clinic for treatment.
4. Reporting an injury does not preclude your decision to deny a claim.

In an emergency, seek immediate medical attention. The provider is required to call the MCO within 24 hours of treatment to report the injury.

IMPLEMENTATION

When an injury occurs, first arrange for medical care for the employee. The next steps are investigating and documenting the circumstances and reporting the injury to the claim handler.

Reporting claims quickly:

- demonstrates care and concern for the employee;
- prevents delays and/or confusion in the claim process;
- reduces the potential for fraud or abuse;
- reduces the potential for needless litigation.

Through timely reporting of claims, you:

- establish an open line of communication;
- develop accurate information to manage the workers' compensation claim;
- provide benefits to the injured employee on a timely basis;
- prevent penalties due to untimely benefit payment or late reporting of claims.

6. Safety and Health Process Coordination

"Assigning an individual the role of coordinating safety efforts for the company."

KEY CONCEPTS

Designate an individual as the accident prevention coordinator, and give that person responsibility for coordinating safety efforts and the authority to facilitate the organization's safety and health efforts.

A person acting as coordinator does not assume operational responsibility for safety and health, but supports line management, supervision and employees to prevent accidents. Duties must include:

- helping management and employees identify accident prevention and safety and health training needs (possibly through perception surveys, interviews, behavior sampling or other methods);
- helping supervisors make changes or develop strategies that improve safety and health;
- identifying and communicating new safety and health requirements;
- compiling injury and illness-related records;
- tracking progress on safety and health-related projects;
- working with employees to optimize safe work practices.

You may choose to delegate coordinator duties to more than one person. A small company owner may assume those duties or delegate them to a manager. In either case, it is suggested that the accident prevention coordinator(s) attend at least one safety and health management seminar each year. The Division of Safety & Hygiene's Training Center provides numerous seminars for employer representatives at no additional cost. For information, please call 1-800-644-6292.

IMPLEMENTATION

The accident-prevention coordinator should be committed to safety and health, and have the time, authority and resources to facilitate developing the company's safety systems and processes. The accident-prevention coordinator acts as the

internal consultant helping the organization make important safety-related decisions. The accident-prevention coordinator must be committed to employee well-being and must have a high degree of credibility with supervisors, team leaders and employees.

In smaller companies, the accident-prevention coordinator is usually the owner or chief executive officer. Geographically dispersed companies often name the branch or plant manager as the accident-prevention coordinator.

Medium-sized employers usually designate staff managers as their accident-prevention coordinators. Effective accident-prevention coordinators can also be human resource managers, engineers or financial services managers.

Larger companies sometimes employ a full-time accident-prevention coordinator. When determining the need for a full-time accident-prevention coordinator, consider the accident history, expenses associated with accidents and the degree of hazard inherent in the operations.

The accident-prevention coordinator is an internal consultant, not a "doer." Many of the activities that make up the safety and health system are carried out by line managers and supervisors. The accident-prevention coordinator provides advice and support to line managers, supervisors and employees regarding safety management responsibilities. Specific functions performed by an accident-prevention coordinator may vary from company to company.

7. Orientation and Training

"Workplace safety orientation and training for all employees."

KEY CONCEPTS

Identify and respond to the specific training needs of your employees including supervisors, managers and team leaders. Develop a written safety and health training process that documents specific training objectives and instruction procedures.

Orientation must include:

- company safety and health policy;
- employee responsibilities;
- medical procedures, such as how and when to report injuries or illnesses;
- actions to take in case of emergency;
- how to report unsafe practices or conditions;
- return-to-work procedures.

Safety and health training must include:

- hazard communication;
- bloodborne pathogens, if applicable;
- specific job/task safe work practices and hazard recognition.

At a minimum, training must cover procedures for the safe and efficient use of machinery and tools, including:

- ergonomic risk factors and the prevention of cumulative trauma disorders;
- chemical hazards and how to prevent contact or exposure;
- if appropriate, procedures for lockout-tagout, hot work permits and confined-space entry.

Document all training to include the date, topics covered, instructor's name and the names of employees attending the training session. On the day training is completed, have each attending employee sign the documentation form.

IMPLEMENTATION

No matter how safe a work environment you provide, the success of your safety and health systems depends upon the managers, supervisors, team leaders and line workers.

The goal of any safety and health training program is not just to impart knowledge, but also to establish or change behaviors and improve one's ability to make good decisions. Through safety training, employees are provided with information and understanding about hazards, procedures, processes, decisions and expected behaviors.

Training must be provided for the following:

- **Current employees**—Provide all current employees with a general safety and health orientation and job-specific safety and health training, similar to the orientation and training provided to new employees.
- **New employees**—New employees are vulnerable to mistakes. U.S. Bureau of Labor Statistics studies found that 48 percent of all injured workers had been on the job for less than one year. Assume that new employees know little or nothing about the job hazards and processes associated with their job functions.
After new employees participate in safety orientation, supervisors should provide new employees with job-specific safety and health training. Employees should not be permitted to start a job until they have received instructions on how to perform the work safely.
- **Transferred employees**—When employees are given a new job assignment or transfer, the supervisor provides them with the same job-specific safety and health training as they would a new employee. Often, transferred employees are not given safety training because they are only temporarily filling in for the regular employee. That is an unacceptable reason and only increases the potential for an accident.
- **Introducing new substances, equipment, processes or procedures**—Provide safety and health training before or at the time of introducing new substances, equipment, processes or procedures. Training does not need to be formal. It may simply be an informal "toolbox" safety meeting held at the workplace. It is important that employee safety and health training be responsive to changes in the work environment.

- **Identifying a newly reported hazard**—Provide safety training whenever a new or previously unrecognized hazard is identified. Employees who may be exposed to the hazard should be instructed on the nature of the hazard and how to protect themselves. Also, encourage employees to report potential hazards immediately.
- **Leadership**—It is important to build supervisor and manager competency levels in safety and health. Their knowledge of effective safety process management (ESPM) helps drive accident-prevention success resulting in higher profitability levels. In addition to developing managers', supervisors' and team leaders' knowledge in contemporary safety management, developing communication, team building, interpersonal and problem-solving skills within leadership elevates management performance levels.

Fully document your training. When documenting safety and health training, include the date, topics covered, instructor's name, and the names of employees attending the training session. Ask employees to answer written questions about the content of educational material that was presented. This helps provide a sense of importance to the training, demonstrates understanding and retention of the material, provides the opportunity for constructive feedback from the employees and documents the effectiveness of the training. In any case, have each employee attending sign the documentation form on the day of completion.

8. Written and Communicated Safe Work Practices

"Publish safe work practices so that employees have a clear understanding of how to accomplish their job requirements safely."

KEY CONCEPTS

Guidance for employees in the form of written safe-work practices is important for a clear understanding of job requirements and responsibilities. Both general and job-specific safe-work practices must be identified, documented and made available. Provide employees with a copy of the general safe-work practices. Have all employees sign a statement to indicate they have read, understood and will follow the safe-work practices.

Examples of general safe-work practice knowledge expected of most employees includes:

- good housekeeping of workplace areas
- personal protective equipment
- first-aid procedures
- ergonomic principles
- respiratory protection
- lockout/tagout procedures
- confined-space entry
- hazard communication
- bloodborne pathogens, if applicable.

Job-specific safe-work practices apply to operations and tasks that involve recognized hazards and risks associated with those specific tasks. Job-specific safe work practices must be posted or made readily available in writing at the work area.

IMPLEMENTATION

Safe-work practices are essential for any organization because they prescribe the accepted behavior and practices that are expected of all employees. A safety involvement team might develop an employee safety handbook. The handbook could include general, company-wide safe work practices and specific safe-work practices that apply to each department. A suggested approach is to ask employees for their assistance in composing a safe-work practices handbook. The handbook might also include the company's safety policy.

Each department's management must review all safe-work practices with the employees on a recurring or quarterly basis, but at least annually.

To help ensure that safe-work practice handbooks are read, have employees acknowledge reading their copy by signing a statement certifying that they are familiar with the safe practices and policies outlined in the safety handbook and agree to abide by them. Maintain this signed document in the employee's personnel file.

9. Written Safety and Health Policy

"A written safety and health policy signed by the top company official that expresses the employer's values and commitment to workplace safety and health."

KEY CONCEPTS

The top executive must sign a safety and health policy document to be given to all new hires. Communicate the policy to all employees, and then review the policy with them on an annual basis. It must include:

- manager, supervisor, team leader and employees' responsibilities and the organization's commitment to workplace safety and health;
- commitment to returning injured or ill employees to work at the earliest opportunity.

IMPLEMENTATION

A written safety and health policy clearly states the company's commitment to effective safety process management and to providing a safe working environment.

Although that seems to be a minor step, it is often the initial step in implementing effective safety and health systems and processes. It expresses the commitment of the ownership, management and employees to providing and maintaining a safe work environment for all employees.

Communicating the organization's commitment to safety is as important as the company's statement of quality. In fact, both statements of philosophy should be mutually supportive. The two statements might be integrated into one comprehensive policy. This would be beneficial to employees to see the integration of safety and quality.

10. Recordkeeping and Data Analysis

"Internal program verification to assess the success of company safety efforts, to include audits, surveys and record analysis."

KEY CONCEPTS

Compile injury and illness-related data in order to:

- identify safety and health process problems;
- help manage the compensation process;
- provide information necessary for developing solutions to problems.

IMPLEMENTATION

Good injury and illness records are an essential component of successful safety and health systems. However, assessing why accidents are occurring, what specific systems or processes are in need of change and how changes will be made are the goals of this section.

Analyzing statistics does not need to be done in detail, but it should develop information comparing current injury and illness experience with preceding periods and also how performance compares to similar businesses. Results-oriented data (frequency rates, severity rates, costs of compensation, etc.) help relate trends and show the results of past effort. However, these numbers do not reveal system weaknesses, poor decisions or inappropriate behaviors. Numbers do not tell how or by what means the results were achieved.

Performance-oriented measures do provide information for the identification of the system weaknesses and enable improvements that drives great performance to be made. For this reason, it is important to measure and assess the processes by which results are obtained.

Techniques for exploring the processes that drive performance might include: conducting perception surveys, assessing the effectiveness of the accountability system, using an observation system that develops information on safe behaviors in the work setting, or assessing the effectiveness of the communication and/or training processes.

An effective way to use performance-related safety data is to track and post successful performance information for everyone to see. Charts are very effective for this purpose. It is helpful to track safety performance the same way that pro-

duction measures and quality data are. Process-related data can be collected and used for statistical process control information.

Examples of process recordkeeping and charting opportunities that can be tracked by time frame, such as by month:

- types and number of unsafe behaviors observed by supervisors or employees;
- number of safe behavior recognition communications by supervisors or employees;
- number of safety discussions conducted;
- number of "near misses" reported;
- number of dangerous operations completed safely and successfully, e.g., lockout/tagout operations, confined space entries, etc.;
- number of safety suggestions and problems solved;
- number of safe miles driven without incident;
- amount of material moved, installed, sawed, erected, etc., without incident.

Individual company data that can be tracked varies greatly, depending on the nature of the business. Use the list above to identify meaningful performance measures.

Over time, a database can be built that shows changes in critical behaviors. By comparing month-to-month data and year-to-year trends, a picture of actual performance is created. This technique incorporates statistical process control (SPC) into the organization's safety system. Critical problem areas become noticeable. From this information, needs can be identified with a high degree of confidence, and improvements developed to enhance the safety systems and processes of the organization.

The benefit is that, in almost every case, all employees can participate in the process of acquiring the information and sharing the results.

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Integrating Safety into TQM

by Dan Petersen
Consultant in safety management
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Safety and total quality management (TQM) fit hand-in-hand—unless safety practitioners choose to block the union because they perceive it to be different and threatening. Some within the profession contend that the goal of a safety practitioner is to work himself/herself out of a job. Integrating safety into TQM may be the best way to do just that.

The real question: Do safety practitioners want this marriage? Consider these potential consequences:

- Replacement of job safety analyses (JSAs) with flow diagrams, which will diagnose system weaknesses. These weaknesses should be diagnosed by those who know—the employees.
- Replacement of accident investigation procedures with fishbone diagrams to search for multiple causes.
- Use of behavioral sampling and perception surveys to measure effectiveness and identify weaknesses.
- Management acceptance and understanding of the safety management process.
- A new organizational culture, with safety perceived as a high corporate value.
- Accountability.

TQM and Traditional Safety

In most companies, quality of performance means initial quality of product and increased productivity. Some companies include quality safety performance at a much later point, often as an afterthought.

Employee involvement is central to TQM philosophy, which also includes these concepts:

- building a new organizational culture that embraces safety;
- using new tools to solve problems;
- continuous improvement of the process;
- using upstream measures to monitor progress.

Perhaps the best description of TQM is captured in Deming's 14 "Obligations of Management." Although the total quality approach differs greatly from traditional safety concepts, the TQM philosophy works well when applied to safety.

If Deming's "Obligations of Management" were rewritten in safety jargon, they might read as follows:

- 1) Concentrate on the long-range goal of developing a world-class system, not on short-term annual accident goals.
- 2) Discard the philosophy of accepting accidents—they are not acceptable.
- 3) Use statistical techniques to identify the two sources of accidents—the system and human error.
- 4) Institute more thorough job skills training.
- 5) Eliminate dependence on accident investigation. Instead, use proactive approaches such as behavioral sampling, fishbone diagrams or flow charts to reveal system flaws and achieve continuous system improvement.
- 6) Provide supervisors (and employees) with knowledge of statistical methods such as sampling and control charts and ensure that these tools are used to identify areas needing additional study.
- 7) Reduce fear throughout the organization by encouraging all employees to report defects and help find solutions.
- 8) Reduce accidents by designing safety into the process.
- 9) Eliminate the use of slogans, incentives, posters and gimmicks to encourage safety.
- 10) Examine work standards to remove accident traps.

Other aspects of TQM are valuable as well. In fact, measures for the following are necessary in safety:

- Ask employees to define and solve company problems and identify system weaknesses.
- Provide employees with simple tools to solve problems. These include pareto charts to determine problems; fishbone diagrams to help brainstorm problem causes; flow charts to observe the system; and scatter diagrams to determine correlations.
- Replace accident-based statistics with other upstream measures such as behavioral sampling.
- Replace accident-based statistics with alternative downstream measures including employee perception surveys and employee interviews.

The 10 safety obligations represent a marked departure from traditional safety beliefs. Under these new corporate obligations:

- progress is not measured by accident rates;
- safety becomes a system, rather than a program;
- statistical techniques drive continuous improvement efforts;
- accident investigations are either reformed or eliminated;
- safety sampling and statistical process control tools are used;
- blame for "unsafe acts" is completely eliminated;
- focus is on improving the system;
- "whistle blowers" are encouraged and supported;
- employee involvement in problem-solving and decision-making is formalized via corporate procedures;
- ergonomic well-being is designed into the workplace;
- safety slogans and gimmicks are eliminated;
- emphasis is placed on removing system traps that cause human error.



Reduce fear throughout organizations by encouraging all employees to report defects and help find solutions.

Moving Beyond the Traditional

The move toward TQM in safety means refuting many traditional concepts such as:

- 1) Irresponsible acts and conditions cause accidents.
- 2) The three Es of safety—engineering, education, enforcement—are essential to safety programs.
- 3) Low compliance is sufficient.
- 4) The executive role is only to sign policy.
- 5) Management creates safety rules; employees follow them.

These beliefs should be replaced with the following axioms:

- 1) Accidents are caused by a defective management system and a weak safety culture.
- 2) Many methods can be used to shape behavior, not merely the three Es.
- 3) No magic pill can be prescribed. Practitioners must determine which approaches will work best, depending on situational demands.
- 4) Low compliance has limited influence on safety results.
- 5) Executives must provide safety leadership.
- 6) Decisions made at the bottom—by affected employees—are most effective.

Why Is Change Necessary?

TQM can seem complicated (although it is not). Since many traditional beliefs must be



changed to achieve success, safety practitioners may ask: Why bother? Some answers:

- Traditional safety programs no longer work (if they ever did). Most are not based on fact (no scientific research), and they tend to conflict with both management and behavioral research.
- Accident records continue to deteriorate, as companies focus on complying with regulations based on traditional safety beliefs.
- The safety system must be built into an organization's management structure. Historically, safety has been kept separate from regular management. As management has experienced numerous transitions, safety has been suspended in the classical model: management decides, employees follow orders. As a result, safety has become a foreign subject to many managers and executives.
- As management familiarity with safety has decreased, the external environment has increased management's vulnerability to such areas as legislation, criminal liability and higher fines.
- More "injuries" (such as cumulative trauma disorders and stress) are compensable today than ever before. Practitioners cannot address these problems via machine guarding technology.
- The nation's workers' compensation (WC) system is not only in trouble, it is ill—perhaps terminally. WC carriers are withdrawing from some markets, a trend expected to continue.

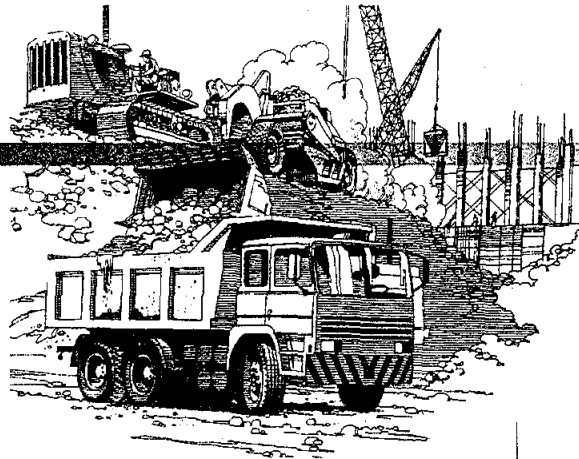
Although the future is largely unknown, some suggest that : 1) Accident costs will continue to increase each year. 2) Growing numbers of illnesses will become compensable. 3) State laws may be replaced by federal laws, which will likely be more costly. 4) Occupational injuries may eventually be paid under a national healthcare plan, funded completely by taxpayers. Such a system will remove management's incentive for safety.

The bottom line: If safety is not incorporated into the regular management system now, the window of opportunity may permanently close. Is this "overboard thinking"? Practitioners must decide. Incorporating safety into the TQM process seems the best route to achieve real success—and the sooner the better.

14 Obligations of Management

by W. Edwards Deming

- 1) Innovate and allocate resources to fulfill the long-range needs of the company and customer, rather than short-term profitability.
- 2) Discard the old philosophy of accepting defective products.
- 3) Eliminate dependence on mass inspection for quality control. Instead, depend on process control through statistical techniques.
- 4) Reduce the number of multiple source suppliers. Price has no meaning without an integral consideration for quality. Encourage suppliers to use statistical process control.
- 5) Use statistical techniques to identify the two sources of waste—system (85%) and local faults (15%); strive to constantly reduce this waste.
- 6) Institute more, thorough job-related training.
- 7) Provide supervision with knowledge of statistical methods. Encourage the use of these methods to identify which defects should be investigated for solutions.
- 8) Reduce fear throughout the organization by encouraging open, two-way, non-punitive communication. There is an appalling economic loss resulting from fear to ask questions or report trouble.
- 9) Help reduce waste by encouraging design, research and sales personnel to learn more about the problems of production.
- 10) Eliminate the use of goals and slogans to encourage productivity, unless training and management support is also provided.
- 11) Closely examine the impact of work standards. Do they consider quality or help anyone do a better job? They often act as an impediment to productivity improvement.
- 12) Institute rudimentary statistical training on a broad scale.
- 13) Institute a vigorous program for retraining people in new skills, to keep up with changes in materials, methods, product design and machinery.
- 14) Make maximum use of statistical knowledge and talent within your company.



What Steps Are Involved?

Let's examine the basic TQM concepts outlined earlier:

- **Employee Involvement.** Decide what employee involvement means. Does it mean: Asking for input before management decisions are finalized? Sharing the decision-making process? Allowing employees to make decisions?

Once the level of involvement is defined, take the short-term steps needed to move in that direction. These include confirming that management is credible and has done everything possible to ensure safety.

- **A new culture.** Safety must be perceived as a key value. Again, ensure that management is credible. Determine the status of the company's safety culture and take steps to establish a new culture.
- **New tools.** Train employees to use problem-solving tools. Create a structure in which they can effectively use these tools.
- **Continuous improvement and use of the best upstream and downstream measures.** These concepts require that the influence of accident-based rates be completely removed from upstream measures (and likely from downstream measures). Rates must be replaced by behavioral sampling, perception surveys and other tools that reveal a company's statistical reliability. ■

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During his career, Petersen has held numerous safety positions, including director of the graduate program in safety management at the University of Arizona, associate professor at Colorado State University and professor at Arizona State University. A widely published author, he is a professional member of ASSE's Arizona chapter.

SECTION IV - 10-STEP BUSINESS PLAN CHECKLIST

Indicate your assessment of the current level of your company's performance associated with each business plan step by placing a check mark in the box following each line item. Key:

None = no attempt, activity or use.

Fair = some effort to utilize the element, but more needs to be done.

Good = a solid and credible effort at incorporating the element into organizational operations and processes. Continued efforts will bring success.

Not applicable = this tactic is not relevant to this organization and will not likely be of value.

1. Visible Active Senior Management Leadership

Contemporary organizations establish safety and health as a core value of their organization. Senior management, including the top executive on site, must be the role model for how they want all other employees to act in creating a safe working environment. Active leadership must include, at a minimum, the following:

- authorizing the necessary resources for accident prevention;
- ensuring that all members of management are held accountable for accident prevention activities and for managing accident prevention processes;
- empowering employees to take an active part in maintaining a safe workplace;
- annually assessing the success of the safety process by utilizing perception surveys, personal interviews and behavior sampling strategies;
- other _____

	none	fair	good	N/A

2. Employee Involvement and Recognition

Both management and employees must actively participate in the safety and health management process in order to maximize effectiveness. Employees must be afforded the opportunity to participate in the safety management and the decision-making/problem-solving processes. Employee participation opportunities include but are not limited to:

- safety involvement teams
- focus groups
- safety committees
- accident investigations
- safety audits
- safety training programs
- other _____

none	fair	good	N/A

Note: It will be helpful or necessary to provide employees more education in the following areas so they can participate in meaningful discussions. Do believe that the company should empower employees with these skills?

- problem-solving skills, such as brainstorming
- use of cause and effect diagrams
- use of decision analysis techniques, or
- other _____

none	fair	good	N/A

Note: A process should be established to identify and formally recognize employees for excellence in accident prevention. Recognition opportunities could include:

- consistently high contribution to safety and health;
- contribution to continuous improvement through participation in problem-solving, decision making or perception surveys;
- suggestions for safety improvements or employees who complete special safety projects;
- other _____

none	fair	good	N/A

3. Medical Treatment and Return-to-Work Practices

Employers must establish a post-injury or disability management policy and procedure to help injured or ill employees obtain quality medical care and to return to good health. Components of the disability management procedure should include at a minimum:

- establishing and communicating the procedures for obtaining medical treatment;
- reporting accidents/illnesses immediately to the supervisor;
- regular supervisory communications with the off-work employees while convalescing;
- investigation of all accidents within 24 hours to identify system/process improvements so corrective measures can be taken;
- incorporated in the disability management procedure must be a modified duty program that allows employees to return to work, if possible, in a productive capacity during the recuperative period;
- other _____

none	fair	good	N/A

EMPLOYEE INVOLVEMENT

4. Communication

Regular communication, verbal and written, on matters affecting the safety and health of employees must be included in each organization's approach to managing safety and health.

- communications must include: Quarterly written and/or verbal feedback to all employees on their accident prevention performance;
- communication processes must allow for communicating upward, as well as downward and throughout the organization;
- feedback should include the organization's overall safety and health performance;
- other _____

	none	fair	good	N/A

5. Timely Notifications of Accidents/Claims

Employers must report all cases involving lost time of seven days or more within one week of being notified by the injured or ill employee of the incident. Immediate reporting of accidents is available through BWC's Compline.

To report a claim or to obtain information about Compline, call 1-800-528-1859. If you are in the NIFIB/Ohio Workers' Compensation Group Rating Program, you are to file all claims through GatesMcDonald, call 1-800-551-4312.

- claims are reported to BWC in a timely manner;
- other _____

	none	fair	good	N/A

6. Safety and Health Process Coordination

An individual must be designated as the Accident Prevention Coordinator and given responsibility and authority to act as a resource to coordinate and facilitate the organization's overall safety and health approach for accident/illness prevention.

A person acting in this capacity does not assume operational responsibility for safety and health, but supports line management, supervision, and employees to prevent accidents. Duties should include:

- helping management and employees identify accident prevention and safety training needs (possibly through the use of perception surveys, interviews, behavior sampling, or other method);
- assisting supervision to implement changes or develop strategies that improve safety and health;
- identifying and communicating new safety and health requirements;
- compiling accident or illness-related records;
- tracking progress on safety-related projects;
- working with employees to optimize safe work practices
- other _____

	none	fair	good	N/A

Note: An employer may choose to delegate these functions to more than one person. A small company owner may assume these duties or delegate them to a manager. In either case, the Accident Prevention Coordinator(s) must attend at least one safety and health management seminar each year.

7. Orientation and Training

Each organization must identify and respond to the specific training needs of its employees including supervisors, managers or team leaders. Employers must develop a written safety and health training program that documents specific training objectives and instruction processes.

Orientation must include:

- the company safety policy;
- employee responsibilities;
- medical procedures such as how and when to report injuries or illnesses;
- actions to take in case of emergencies;
- how to report unsafe practices or conditions;
- return to work procedures;
- other _____

none fair good N/A

none	fair	good	N/A

Safety training must include:

- specific job/task safe work practices and hazard recognition; at a minimum, training must cover procedures for the safe and efficient use of machinery and tools;
- ergonomic risk factors, including the prevention of cumulative trauma disorders;
- if appropriate, training should also focus on chemical hazards and how to prevent contact or exposure;
- procedures for lockout/tagout, hot work permit, and confined space entry;
- other _____

none fair good N/A

none	fair	good	N/A

Note: All training must be documented to include the date, topics covered, instructor's name, and the names of employees attending the training session. Each employee in attendance must sign the documentation form on the day of completion.

8. Written and Communicated Safe Work Practices

Guidance for employees in the form of written safe work practices is important for a clear understanding of job requirements and responsibilities. Both general and job-specific safe work practices must be identified, documented and made available.

Employees must be provided a copy of the general safe work practices. All employees should sign a statement indicating that they have read, understand and will follow the safe work practices. Examples of general safe work practices knowledge expected of most employees include, but is not limited to:

- contributing to good housekeeping;
- utilizing personal protective equipment;
- first aid procedures;
- ergonomic principles;
- respiratory protection;
- confined space entry;
- other _____

none	fair	good	N/A

Note: Job-specific safe work practices apply to operations and tasks that involve recognized hazards and risks associated with specific job functions and procedures. Job-specific safe work practices must be posted or made readily available in the work area.

9. Written Safety & Health Policy

Employer's top executive must sign a safety policy document which is to be given to all new hires. The policy should be communicated to all employees and then reviewed with them on an annual basis. It must include:

- management, supervisory and employees' responsibilities established in support of the organization's commitment to workplace safety and health;
- commitment to getting injured or ill employees returned to work at the earliest opportunity.

none	fair	good	N/A

10. Recordkeeping and Data Analysis

Organizations must compile occupational accident and illness-related data in order to:

- identify safety process problems;
- help manage the compensation process;
- to provide information necessary for developing solutions to problems.

none	fair	good	N/A

Note: Timely feedback on accidents, causes and trends for managers, supervisors and employees is important for identifying system improvements and for tracking progress.

Claims and cost information, especially when linked with specific operating units, helps the organization understand their role in help to achieve maximum profitability. Is the company demonstrating on a regular basis for its employees, the following types of information?

- the linkage between accident prevention and profitability;
- effective operations;
- specific costs associated with safety and health problems and accidents.

none	fair	good	N/A

Summary of Evaluation

Key Areas

Visible, Active Senior Management Leadership

Assessment:

Recommendations:

Employee Involvement and Recognition

Assessment:

Recommendations:

Medical Treatment and Return-to-Work

Assessment:

Recommendations:

Communication

Assessment:

Recommendations:

Timely Notification of Claims

Assessment:

Recommendations:

Safety and Health Process Coordination

Assessment:

Recommendations:

Orientation and Training

Assessment:

Recommendations:

Written and Communicated Safe-Work Practices

Assessment:

Recommendations:

Written Safety and Health Policy

Assessment:

Recommendations:

Recordkeeping and Data Analysis

Assessment

Recommendations:

Action Plan

Safety Element	Person Responsible	Follow Up	Date Completed
1			
2			
3			
4			
5			
6			
7			
8			
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11			
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SECTION V - CONCLUSION

These NFIB/Ohio Workplace Safety Guidelines are intended to provide you with an approach on how your business can design or enhance its safety process. Every business is different and is subject to federal, state and local requirements depending on the type of commerce the business is engaged in. Specific safety approaches already in place, as well as any additional initiatives, can be arranged to fit into these guidelines and form your company's overall safety systems and processes.

To meet your specific challenges, the Ohio Division of Safety and Hygiene offers outstanding resources to help you determine the individual needs of your business. Services include publications that give "how to" information to develop and implement specific safety systems and processes; publications, posters and videos; training courses to instruct you or your employees on establishing specific safety systems; and individual consultation with Division of Safety and Hygiene consultants who have specialized training. The Ohio Division of Safety and Hygiene can be reached directly at 1-800-644-6292.

As always, NFIB/Ohio and GatesMcDonald are committed to helping you create a safe working environment and safety culture for you and your employees. Please call the NFIB/Ohio toll-free safety help-line 1-800-551-4312 for assistance or further information.

