# **OregonOSHA** Health and Safety

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OHSU-Doernbecher

Volume 18 — online

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# RESOURCE

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**On the cover:** Sierra Walker, community safety liaison with Oregon Health and Science University in Portland, discusses an issue with Stephen Buchtel, Chief Public Safety Officer, outside the hospital's emergency room.

## Administrator's message: Making sense of the hierarchy of controls

By Michael Wood

have had several opportunities recently to talk about one of my favorite topics – the hierarchy of controls. You're probably thinking that only a regulatory bureaucrat could get excited about a topic like that, but the truth is that I like it because of both its simplicity and its power.

You can find descriptions of the hierarchy of controls in various safety and health rules, in texts on occupational and environmental health, in Oregon OSHA online courses, and in a variety of other places. But when we have those discussions, we sometimes lose sight of the fundamental principles involved.

The notion of the hierarchy of controls is simply that some approaches to addressing hazards work better than other approaches. And over the years, I have come to realize that the basic principles involved are really very simple, even though we sometimes let the details become more complicated than they need to be.

For me, the best working application of the hierarchy of controls involves the following two principles:

- To the degree a method of addressing a hazard does not rely upon individual employee behavior for its effectiveness, it is preferred.
- To the degree a control method that does rely upon individual employee behavior relies upon "natural" rather than "forced" behavior, it is preferred.

These principles illustrate a simply reality. At its heart, the hierarchy of controls recognizes that training will fail and humans will make errors. Rather than training employees to do something that is complex or difficult or unnatural – we need to make the training natural and, ideally, to make the most important training unnecessary.

However we choose to describe the hierarchy of controls, and whichever text

we choose to follow, at its heart, it's about reducing the risk of human error – and reducing the potential consequences of those errors when they occur. And that prevents injuries and illnesses. It even saves lives.





Michael Wood, Administrator





# OHSU program arms employees with knowledge to manage the unexpected

#### By Mark Peterson

A patient with a history of substance abuse is wheeled into the emergency room with a traumatic injury. As doctors and nurses begin their work, the patient sees them as a threat and attempts to attack them.



Family members become agitated that they must stay in the waiting room and threaten a nurse.

A nursing home Alzheimer's patient, without realizing his actions, assaults an orderly.

These are some of the many potential circumstances of workplace violence those in the health care industry face in their daily life. In fact, workplace violence in health care can come from many areas: patients, visitors, co-workers, students, and even former employees.

"It is not possible to completely prevent or predict workplace violence," said Sierra Walker, community safety liaison with Oregon Health & Science University in Portland.

Sierra Walker, community safety liaison with Oregon Health and Science University in Portland, discusses an incident with Stephen Buchtel, OHSU Chief Public Safety Officer. Plus, there is always the chance of someone's personal life spilling over into the workplace.

"Since we consider stalking and harassment to be workplace violence at OHSU, we are unable to predict these types of events as an employee may be attempting to end a relationship and the other person in that relationship can become aggressive and may stalk or harass them," said Walker, who is in her ninth year in her current job.



Walker instructs the staff at OHSU on being prepared and responding appropriately.

A major problem health care professionals deal with is the unknown.

"We don't live in a perfect world. We rely on the information we have on hand at the time, which may not be all the information, but is what we have to make a decision with," said Walker, who was a uniformed public safety officer at OHSU for five years before her current position.

"We don't live in a perfect world. We rely on the information we have on hand at the time, which may not be all the information, but is what we have to make a decision with." – Sierra Walker OHSU takes great effort to minimize and prevent workplace violence. The university's Department of Public Safety runs the workplace violence program and uses a Clinical Violence Risk Assessment Sheet for those in the clinical setting that allows them to have a reference to primary and secondary risk factors, as well as violence triggers. The sheet not only lists those risk factors, but also offers safety steps to help prevent the violence that could arise from the risk factors.

"We encourage early intervention and de-escalation as well," Walker said.

In the clinical setting, OHSU uses an alert symbol to notify staff of identified risk factors by placing it outside the room of patients with an identified risk factor to alert those who don't know about the violence potential, but will be interacting with the patient or the patient's family.

"If staff see the symbol, they talk with the registered nurse for the patient to determine what the risk factor is and what safety precautions they should take prior to contacting the patient or the family," Walker said. "Since we rolled this program out, we have decreased the number of second incidents of workplace violence."

Public safety officers also play an important role at OHSU. Staff members can call to request officers to respond and stand by while they help a patient to minimize the chance of a violent situation. Plus, OHSU has a non-violence statement, emergency response, a threat assessment team, panic alarms, and an emergency phone number.

Continued on page 6

#### Preventing violence in the workplace,

Continued from page 5

"We also have an emergency code phrase that staff can use when communicating with dispatch to notify us that violence is taking place or is imminent without saying a lot," Walker said.

Having a central hub responsible for recording, tracking, and trend analysis of workplace violence incidents is important, Walker said. This type of information can drive a program and help determine where improvements or education is needed. The clinical violence alert symbol was one improvement made to the program when it was found that the lack of communication around violent situations from shift to shift can lead to more staff being victimized by the same patient just a day later.

The OHSU threat assessment team (TAT), a relatively new addition to the workplace violence program, primarily focuses on assessing those threats to people at OHSU using a multidisciplinary

approach involving a number of key departments at the university. The team was formed to help protect against the "silo effect" that can occur when several departments manage a specific situation and none are sure of the actions or processes other departments may be engaged in.

Education is imperative. Walker offers education on demand, after an incident, when an employee is hired, when new students arrive, and annually as a refresher.

"As an organization, our goal is to provide a safe environment for our community," Walker said. "We are continually working towards providing a work environment free from violence by providing education and tools that will aid in prevention as well as how to respond when violence does occur.

"My ultimate goal is to make OHSU and its staff so knowledgeable, self-sufficient, and safety conscious that I won't be needed anymore."



Walker said that OHSU's goal is to provide a safe environment for the community.

#### TEAM UP FOR WORKPLACE SAFETY!



Thank you

to all the organizations who participated in Safety Break for Oregon 2011, particularly the following employers who signed up online.

- American Red Cross
- Aramark Uniform Services
- ASSE Columbia Willamette
- Big J. Construction
- Cascade Warehouse Company
- CH2M Hill
- Cintas
- City of Sweet Home
- City of Portland Bureau of Environmental Service
- City of Portland General
- City of Warrenton
- Coleman Industries
- Coleman Seed & Hay, LLC
- Comcast Beaverton
- Comcast Eugene
- Comcast Headeds
- Comcast Salem
- Comcast SWWA
- Comcast SW Washington
- CS Construction
- Danville Services
- Durham and Bates Agencies, Inc.
- Empire Risk Management
- Epson Portland, Inc.
- EWEB
- Finer Cabinetry and Woodwork, Inc.
- Fred Shearer and Sons
- Frontier Communications
- HBA of Marion & Polk Counties

- Hewlett Packard, TDO Org, Corvallis
- Industrial Safety Services, Inc.
- Interpath Laboratory, Inc.
- Laird Plastics, Inc.
- Mc Cormack Construction Company
- Medford SSO
- Mosaic Medical
- National Frozen Foods
- Oregon Bridge Delivery Partners
- Oregon Institute of Technology
- Oregon Parks and Recreation (Salem)
- Oregon Parks and Recreation (Statewide)
- Oregon Water Resources Department
- Portland General Electric
- Portland General Electric
- Portland Water Bureau
- RDO-Calbee Foods, LLC
- R & H Construction
- Roof Life of Oregon
- Safeway
- Sulzer Pumps, Inc.
- Tualatin Hills Park & Recreation
  District
- Western Bus Sales, Inc.
- Weyerhaeuser-Springfield Woods Operations
- Weyerhaeuser Springfield TOPS
- Willamette Lutheran Retirement Community



# Workplace violence: can it happen where you work?

#### By Ellis Brasch

Between 2007 and 2009, assaults and other violent acts injured 1,102 Oregon workers where they work. (That's about 367 incidents each year in which workers are unable to do their jobs when they become victims of workplace violence.)

In Oregon, victims of workplace violence tend to be nurses and nursing aides, police officers, guards, and teachers. The offenders? Health care and residential care patients, criminal suspects, shoplifters, prison inmates, and students. And the workplaces? State hospitals, private health care and social services, public schools, protective services, and correctional facilities.

## Is it aggression ... or violence?

When people talk about workplace violence, they may be referring to a range of hostile acts – from threats and intimidation to homicide. *Workplace violence* includes acts such as physical assault, arson, bombing, sabotage,



and hostage taking. *Workplace aggression* includes violent acts as well as nonviolent acts such as harassment, intimidation, bullying, and threats that create a hostile work environment.

You may never encounter aggressive or violent people where you work but you should think seriously about the risk that something could happen. Even one violent incident is expensive; costs may include medical care, liability, legal fees, and lost business and productivity. In 2009, the temporary disability and medical costs for claims from Oregon workers injured by workplace violence averaged more than \$16,000 per worker.

#### Workplace violence in Oregon: Where the risks are highest

- Victims: Nurses and nursing aides, police officers, guards, and teachers
- **Offenders:** Health care and residential care patients, criminal suspects, shoplifters, students, and prison inmates
- **Workplaces:** State hospitals, private health care and social services, public schools, protective services, and correctional facilities

## How are employers responsible?

Oregon OSHA can cite employers who do not protect their employees from violent acts under provisions of the state's Safe Employment Act, which requires all workplaces to be safe and healthful.

Oregon courts have also ruled that employers may be liable if they do not adequately protect their employees from aggressive or violent acts. Typically, courts weigh their decisions on employers' answers to questions about whether they knew about the acts and what steps they had taken to prevent them.



## What can employers do?

**Assess the risks at your workplace** – An effective risk assessment can help you uncover the root causes of hostile acts and decide how to respond to them appropriately. A risk assessment should also identify weaknesses in your physical facilities that could increase the risk of a hostile act.

**Develop a policy** – A brief, written policy should tell employees that aggressive or violent behavior will not be tolerated and that all incidents will be taken seriously and dealt with appropriately.

**Establish safety procedures –** If you know the types of hostile acts that could occur in your workplace and where they are likely to occur, you can establish procedures that tell employees how to respond to them. You should have one procedure that tells employees how to respond if they feel threatened and a set of follow-up procedures to evaluate an incident and prevent it from happening again.

**Train employees** – All employees must understand your organization's policy, recognize situations that may become hostile, and know how to respond to them. Managers and supervisors should also know best practices for dealing with layoffs and terminations, disciplining employees, and resolving conflict.

**Evaluate your effort** – At least once a year, take stock of your effort to control the risk of violence. Review all acts of aggression: determine why existing procedures did not prevent them and what needs to be done to prevent them from happening again. Also, consider new risks that may require an update to existing policy, safety procedures, or required employee training.

# A shocking experience that can save a life

#### **By Ellis Brasch**

Before you started reading this article, you probably weren't thinking about your heart. That's because, when they're working properly, hearts don't need much attention. Just be thankful for a specialized group of cells high in your heart's upper right side that keep it beating with a stream of stable electrical impulses.

But each year in this country, for an estimated 325,000 people, those electrical impulses suddenly become erratic

for any number of reasons, including a heart condition, electrocution, an allergic reaction, or a drug overdose. This erratic rhythm, called *ventricular fibrillation*, can cause the heart to stop beating. The result is cardiac arrest, which is not the same as a heart attack. [See text box.] Without an immediate electric shock delivered through the chest wall directly to the heart to restore its rhythm, fewer than 5 percent of victims survive.

Not long ago, attending to victims of cardiac arrest meant waiting for an ambulance or EMTs to arrive with an *automatic external defibrillator* (AED). Today, almost anyone can use an AED. And there's probably one nearby if you take a moment to look around the next time you're in a large public building.

What exactly are they? AEDs are portable, battery-operated devices. A microprocessor inside the device analyzes the heart's rhythm and determines if a shock is necessary. The shock is delivered through two monitoring pads placed on a victim's chest. Most AEDs guide



the operator through the steps necessary to deliver a shock with visible or audible prompts.

Even bystanders can be lifesavers. Cardiac arrest victims need immediate attention – the first three to five minutes after an incident are critical. So, unless emergency responders are standing by, alert bystanders and AEDs become real lifesavers under such circumstances. In fact, a recent study published in Journal of the American College of Cardiology showed that when bystanders used AEDs to treat victims of sudden cardiac

arrest, the victims had a much greater chance of survival than victims who had to wait for emergency responders.

#### **Heart attack or cardiac arrest?**

Many people think that "heart attack" and "cardiac arrest" describe the same condition, but they're different.

During a heart attack, blood flow to part of the heart is blocked and the blockage damages part of the heart muscle; however, the heart doesn't necessarily stop beating and the victim may not lose consciousness.

During cardiac arrest, the heart stops beating and the resulting loss of blood to the brain causes an immediate loss of consciousness. Cardiac arrest happens suddenly; victims have no detectable pulse or blood pressure and must be treated without delay. The most common cause of cardiac arrest is ventricular fibrillation and the only effective treatment is immediate defibrillation.



**AEDs in the workplace.** Oregon OSHA doesn't require employers to have AEDs, but, of course, they're just as effective in workplaces as they are in public places. On-site AEDs save precious time and can improve survival odds because co-workers – just like bystanders – can treat victims immediately.

That's been especially apparent for employers such as Hoffman Construction Company. In 2011, AEDs saved the lives of two Hoffman subcontractor employees. In February, a 57-year-old laborer suffered a heart attack, but because of the quick response of on-site Safety Managers Clark Vermillion and Eddie Lemos, the laborer lives today. Then, in April, a 58-year-old carpenter went down. Hoffman Engineer Noelle Spencer acted quickly and this person is alive and is recovering after quadruple bypass surgery.



Where to get AED training. The Red Cross offers AED and CPR training as well first-aid training. The American Heart Association offers CPR and AED training through its community training centers. Contact your local Red Cross or American Heart Association office. Many fire departments, hospitals, and ambulance services also offer training.



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#### Case Report

Incident type | Electrocution Industry | Construction Employee | Crane operator



# The operator of a knuckle-boom crane, delivering building materials to the second story of a new residential home strikes an energized, 7,200-volt, overhead power line.

A three-man crew drove a truck-mounted knuckle-boom crane to a new residential home to deliver building materials.

The victim drove the truck onto the site near the power line and the home. He saw the power line but thought there would be enough clearance to raise the boom and deliver the materials.

The other two employees entered the home and went up to the second floor to receive the materials through a window.

Before unloading the materials, the victim looked around and noticed that there was not much room to maneuver the truck. In back, the site was soft and muddy, there was a temporary power pole on the street side, and the other side was blocked by another home. The victim positioned himself in the crane operator's seat on top of the truck, rested his arm on the metal armrest, raised the boom, and swung the boom counter-clockwise in the direction of the second-floor window.

As he raised the knuckle of the boom to a height of about 28 feet (ground to top of knuckle), it struck the 7,200-volt power line, paralyzing his arm. Fortunately, most of the current traveled from the boom to the ground.

The two other employees heard a loud "bang," looked out the window, and saw the victim leaning backwards in the operator's seat, apparently unconscious.

They ran down to the truck, shut off the engine, and climbed up to the operator's seat. He wasn't breathing. But as they sat him upright he started breathing again, though he was still unconscious.

A few minutes later, a fire truck, an ambulance, and a Portland General Electric crew arrived on site. The PGE crew cleared the downed power line and made it safe for the responders to treat the victim.

A Life Flight helicopter took the victim to Oregon Health and Science University, where he was treated and released three days later.



Overhead power line - limited access.



The residence and the power line.



Posted on the truck's front bumper.



# News Briefs



# Lake Oswego students win safety video contest

Four Lake Oswego High School students took home first-place honors and \$500 for their public service announcement promoting young worker safety and health. Piers Dennis, Derek Sturman, Owen Madin, and Devin White created the 45-second video titled "**Texting and Driving**." Thanks to special effects, the PSA depicts a realistic accident that occurs when a pizza delivery driver is texting with friends. Lake Oswego High School also won a matching amount of prize money.



**First place winner Piers Dennis** (middle) with Chuck Easterly of SAIF Corp. and Dede Montgomery of CROET.



Video contest finalists from across Oregon came to the screening at Northern Lights Theatre in Salem.

Save a friend. Work safe.

PUBLIC SERVICE ANNOUNCEMENT

**video contest**The other winners are as follows:

Second place (\$400):

Drew Corrigan, Sam Calarco

Sisters High School, Sisters

"Save a Friend. Work Safe."

Third place (\$300):

Zack Farrell, Zach Colton

Summit High School, Bend

"Death Drive"

The creators of the top videos were presented their awards during a special screening at the Northern Lights Theatre in Salem in April. The contest was designed to increase awareness about safety for young people, with the theme of "Save a Friend. Work Safe."

The videos were judged on creativity, production value, youth appeal, and the overall safety and health message. All of the winning videos are available for viewing at www.youtube.com/user/ OregonSafetyHealth.



Oregon OSHA Administrator Michael Wood (left) signs the alliance renewal with OHBA President Jim Chapman.

## Oregon OSHA renews alliance with Oregon Home Builders Association

Oregon OSHA renewed an alliance with the Oregon Home Builders Association (OHBA) last month. The partnership will increase outreach efforts to employers and employees in the construction industry to help reduce accidents and fatalities.

"It is with great pride our two organizations work together to reach the next level of injury prevention on the job site," said OHBA President Jim Chapman. "This agreement makes that goal possible and we are committed to the challenge. We continue to have great success in reducing injuries and deaths on our job sites thanks to this cooperative program."

The two-year alliance will focus on safety and health in the workplace through various programs. Oregon OSHA will partner with the association to develop materials for workshops, conferences, and other safety programs. In addition, the OHBA will help promote Oregon OSHA's services to its membership, including the confidential consultation program, Safety and Health Achievement Recognition Program (SHARP), and language training for workers with limited English skills.

"Workers in construction are faced with hazards on every job that could cut a life short," said Oregon OSHA Administrator Michael Wood. "The renewal of this alliance will keep construction safety in the spotlight, leading to more awareness and, ultimately, fewer serious injuries and deaths."

# Employers encouraged to focus on distracted driving

Most people know that it's dangerous to text and drive, but there's another fact that most probably don't know: each year, vehicle crashes are the leading cause of worker fatalities. Because millions of workers' jobs require them to spend part or all of their work day driving — visiting clients and customers, making site visits,



or delivering goods and services — the departments of Labor and Transportation and other safety agencies and organizations have joined forces in a campaign to stop distracted driving and save lives.

Oregon OSHA, along with federal OSHA, is asking employers to do their part by declaring their vehicles "text-free zones" and reinforcing that declaration with worker education and policies that explicitly ban texting while driving. Oregon OSHA is also hoping employers will revise any practice and procedure, written or unwritten, that either condones or requires drivers to text behind the wheel as a necessary part of doing their jobs.

Young workers are especially vulnerable to the hazard of texting while driving. Not only is texting their preferred method of communication, they are also – as new workers – less likely to know their safety rights and more hesitant to assert them.

The Oregon House passed a bill that would remove the exemption that allows people to use a cell phone while driving if they are doing their job. House Bill 3186, which is now in the Senate, would require everyone but law enforcement, emergency crews, and agricultural workers, to use hands-free devices while talking on a phone and driving.



# Workers Memorial Day ceremony held in Salem



Michael Wood

With a stormy backdrop, fallen Oregon workers were remembered at the annual Workers Memorial Day ceremony on April 28, in Salem. Oregon Treasurer Ted Wheeler and Secretary of State Kate Brown read the names of 34 workers and soldiers who died on the job in 2010.

Oregon OSHA Administrator Michael Wood also provided remarks at the event and encouraged the crowd to look to the future, despite the record low number of fatalities in 2010.

"Remember, we are not done. We can do better," he said. "I'd like to be able to cancel this ceremony but it won't happen next year. We already had deaths on the job this year."

Cheryl Rouse, the safety committee chair for the Machinists Local 1005 at Daimler Trucks in Portland, spoke of the safety lessons they have learned at the plant. She encouraged workers to stay focused on accident prevention.

Wood closed his speech with a strong sentiment for all workers.

"As we mourn those we have lost, we must again commit ourselves to fight like hell for the living," he said. "That's the job we have. That's the challenge that faces us."



Acting DCBS Director Scott L. Harra (left) and Workers' Compensation Division Administrator John Shilts (center) take pause during the ceremony to remember workers who died on the job.



Bagpipes and drums were provided by the Oregon State Defense Force Pipe Band.

# Companies across Oregon participate in annual Safety Break festivities

More than 50 companies across Oregon held trainings, award programs, and other special events to promote workplace safety and health during Safety Break for Oregon on Wednesday, May 11.

Danville Services of Portland, a company that runs employment and residential services for people with disabilities, held a safety open house with a



Duane Grange (left) from the SHARP Alliance presents the pizza gift card to a Comcast employee.

open house with a superhero theme. Staff members created posters that will rotate every three months to



Danville Services of Portland

remind workers about safety issues throughout the year.

"We never participated in this before and it was a great learning opportunity to review safety topics," said Tina Hernandez, Danville's safety committee chair. "There was a lot of creativity and group participation."

Danville Services of Portland, Comcast in Beaverton, and Oregon Parks and Recreation in Salem each earned \$100 pizza luncheons for signing up online to take part in the event. The Oregon SHARP Alliance sponsored the contest.



R&H Construction was one of 55 companies that signed up online to participate in this year's Safety Break.

#### Congratulations to the following new SHARP companies:



- Portland General Electric Port Westward Generating Plant, Clatskanie
- Shutter Creek Correctional Facility, North Bend
- Old Dominion Collision Repair, Eugene and Springfield
- Boise Cascade LLC White City Veneer, White City

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## **VPPPA Conference held in** the City of Roses

Participants from across the region attended the 17th annual Region X Voluntary Protection Programs Participants



Dan Clark delivered the keynote address: *Forgotten Fundamentals* — *The Answers Are in the Box.* 

Association (VPPPA) Conference in Portland

last month. Keynote speaker Dan Clark, who has spoken to more than 3.5 million people at more than 4,000 events, shared safety ideas around the theme of "Forgotten Fundamentals – The Answers are in the Box." Clark encouraged participants to focus on finding motivation within themselves – not from their employer.

REGIONX

2011

coming up

ROSES

The event also featured sessions on VPP fundamentals, leadership, performance, and employee involvement. The VPPPA is a leader in safety, health, and environmental excellence through the cooperative efforts of labor, management, and government.



Oregon OSHA conference coordinator Sharell Lien.



Oregon OSHA Industrial Hygienist Jeff Jackson speaks at a conference workshop.



VPP participants include employers who have designed and implemented outstanding health and safety programs.



Vendors had an opportunity to discuss safety products with participants during the conference.





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acclaimed speaker Gordon Graham

September 21 & 22, 2011 **CENTRAL OREGON** OCCUPATIONAL Y & HEAL CONFERENCE

Eagle Crest Resort • Redmond, Oregon

This conference is a joint effort of the Central Oregon Safety & Health Association (COSHA) and Oregon OSHA.

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RESOURCE

# **Ask Technical**

Can I use a cut-off saw to do "side grinding" on ductile iron?

The answer could be "yes" or "no," depending on the type of blade you're using in your cut-off saw. Some saw blade manufacturers make one-piece, solid-steel core

blades that are designed to take the force of side grinding. A regular welded-segment blade is not designed to take the force of side grinding, so it may break.

If the blade you're using doesn't have a solid-steel core, use a grinder with the correct grinding wheel to bevel the pipe and follow the requirements in ANSI B7.1-2000, Safety Requirements for the Use, Care, and Protection of Abrasive Wheels.

Most cut-off saw manufacturers prohibit the use of circular saw blades, carbide-tipped blades, rescue blades, woodcutting blades, or toothed blades of any type with their saws. Such blades can cause severe personal injury from blade contact, thrown objects, and reactive forces, including kickback. Cut-off saw manufacturers also advise users to ensure that the blade selected for the task is compatible with the speed of the saw; some cut-off saws have a maximum spindle speed greater than 5,000 revolutions per minute.



Cut-off Saw (Source: STIHL - Working Safely with Cut-off Macines)

# Going the distance

## Meet a leading Oregon health and safety professional

#### What is your background and safety philosophy?

I have been in long-term care administration since 1997, and prior to that, I worked for a small manufacturing company. My years prior to long-term care, which involved assisting the manufacturing company into OSHA compliance, were a big eye-opener to workplace safety, OSHA's functions, and safety committee responsibilities. My years in long-term care have consistently taught me that there is absolutely no substitute for having the proper tools and equipment on hand to enable the workforce to meet safety expectations and training. You can enforce ad nauseam but if the training and tools/ equipment aren't there, you'll just keep on enforcing and either watch your accident rates climb or drive employee reporting into obscurity.

Continued on page 22



# Company: Dallas Retirement Village

Health and safety manager: Cory Oace, nursing home administrator

Workforce: 260

**Common Hazards:** Strains, materials handling in environmental and dining services

**Going the Distance,** Continued from page 21

# What are some of the unique safety and health challenges you have tackled?

Like many professions, margins in long-term care are very tight. We often have to be exceedingly resourceful and creative. I honestly think one of the biggest challenges has been to acknowledge and accept that the traditional solutions are inadequate and that proper body mechanics alone cannot protect the safety and health of our most vulnerable employees, nor provide for the best in safety practices for the sake of our residents.

Receiving a "Facility of Choice" grant (which helps health care facilities implement safe resident handling programs) and incorporating extensive mechanical resident handling equipment opened the door to additional challenges that, though not unique, are critical to ongoing success. These include proper training/ education and compliance enforcement with policies and procedures that go along with the equipment. These are basic



Oace displays the mechanical resident handling equipment suspended from ceiling tracks at the Dallas Retirement Village.



tenants of any organizational program, but until Safe Patient/Resident Handling (SPH/SRH) is fully implemented culturally, the program lives and dies by virtue of the quality and quantity of training and ongoing support. Prior to implementing our safe resident handling program, someone could have said, "You'll need to train extensively and set aside resources for ongoing training and monitoring" to which I'd have responded, "Yeah, yeah, I know." But if one is truly serious about changing the way people are assisted in this setting, they need to be prepared that an uncommon degree of training and monitoring is key. At the end of the day, it is possible and it is worth it.







Eric Nauta and Jackie Rokes use handling equipment to lift a patient out of bed before lunchtime.

#### Your safety committee won an award at the 2011 Oregon GOSH Conference. Can you share some of the creative things they do to keep employees engaged?

The No. 1 driver here was humor. Look inside your organization and ask: What naturally occurring drive exists in your group? What ideas are already there that may be somewhat outside convention? What would happen if you supported and infused that naturally occurring drive? I'm not suggesting rules or prudence be breached, but we have a manager, Kim Glover, who is very successful at lifting others up inside and outside her department with humor. She wanted to do some funny "home" movies to drive home safety. I had, for years, watched her brand of humor act as a catalyst for positive change in her department, so I told her to go for it.



Jackie Rokes and Cory Oace show how a lifting apparatus works.

The results were hilarious, and thus were born a whole series of these purposely low-quality movie shorts, typically demonstrating what not to do. We had fun making them and staff members had fun watching them. (See the video at this link: Battle Hymn of the Injured 2010)

In my opinion, it shifted the view of what the safety committee does. The committee started to grow, and those activities, in conjunction with the "Facility of Choice" grant, raised up our safety culture. The important point here is that there wasn't anything of particular notoriety that we initiated. Kim had an idea and I said, "Why not?"

#### Has the tight economy had any impact on how you are able to approach health and safety?

You bet, and it has only enhanced the importance of our safety culture. We need to keep our great employees healthy and working efficiently and that means working safely, which also keeps our loss control expenses low.



Kim Glover (second from right) worked with safety committee up and, when possible, get out of the way. members to create fun movies to educate workers about safety. What is the organizational need? Is there an

#### What advice do you have for other safety and health managers hoping to make a difference?

It goes back to looking inside your organization at the unique talents or passions that are there and then supporting them. In my example above, Kim Glover stepped forward, but I believe part of being a leader is knowing the people you serve and their gifts and motivators. Also important is knowing the needs of the organization. Then, in a productive way, match those two up and, when possible, get out of the way. What is the organizational need? Is there an employee who feels led to serve in a certain

way? Could that meet that organizational need? I believe that, within reason, taking a risk is often worth it. A failure will teach what will work by virtue of demonstrating what does not, so what is there to lose by giving something a try? At worst, you will know better what to try next, and at best, you'll be steps ahead in meeting the organizational need.