

Healthcare Safety





APPLICATION AREAS

- ▶ Evaluate Workers' Compensation, Safety and Loss Control Programs
- ▶ Departmental Risk Assessments & Hazard Identification
- ▶ Workstation Ergonomic Evaluations
- ▶ Facility Safety Audits & Inspections
- ▶ Written Recommendation/Suggestion Reports to Management
- ▶ Safety Training



PROGRAM EXAMPLES

- ▶ Manager and Supervisor Safety Training
- ▶ Custom Workers' Compensation "Claims Analysis Reports" with Summaries & Trends
- ▶ "Employee Incident Review Board" & "Injury Prevention Subcommittees"
- ▶ Safety and Sub-Committee Evaluations
- ▶ New Employee Safety Orientation & Safety Training Evaluations
- ▶ OSHA/ Cal-OSHA Compliance Assistance





EMPLOYEE TRAINING

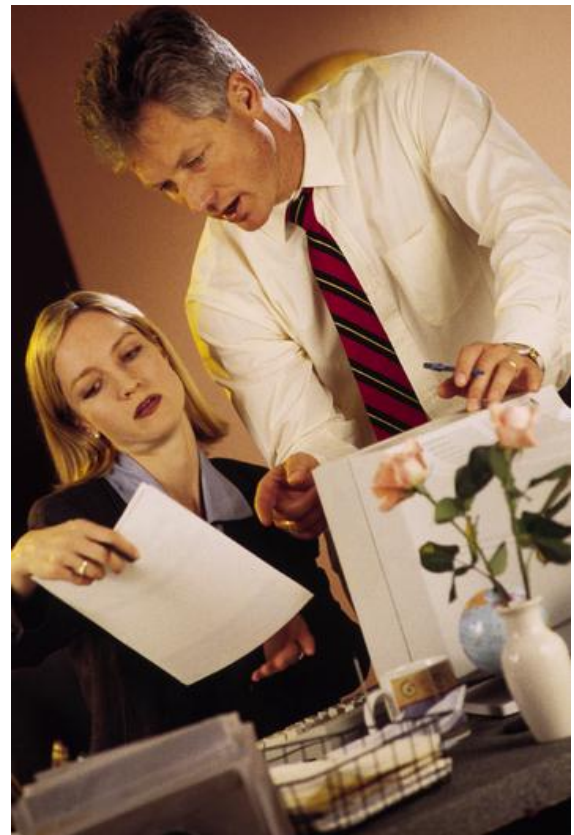
- ▶ Ergonomics
- ▶ Back Safety
- ▶ Accident Prevention
- ▶ Workers' Compensation
- ▶ Lock Out / Tag Out
- ▶ Hazard Communication
- ▶ Blood Borne Pathogens
- ▶ Kitchen Safety
- ▶ Confined Space Entry
- ▶ Noise/Hearing Protection
- ▶ PPE (*Personal Protective Equipment*)





MANAGEMENT TRAINING

- ▶ IIPP (*Injury & Illness Prevention Program*)
- ▶ Supervisor Safety Responsibilities
- ▶ Accident Investigation
- ▶ Workers' Compensation
- ▶ "Return to Work" Programs
- ▶ Conducting Safety Inspections





Workers' Compensation Claims Analysis Report

SAMPLE

Sample Medical Center
1st Quarter 2002

Report Period: 1/1/02 - 3/31/02

Policy Period: 1/1/02 - 12/31/02

To: Human Resources
Risk Manager
Safety Officer
Employee Health



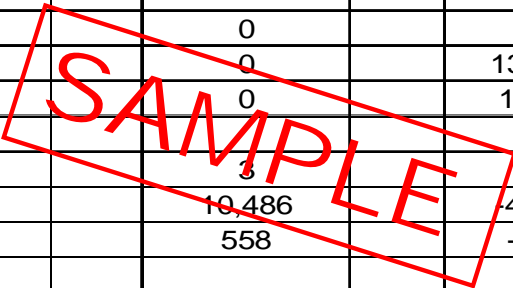
TRISTAR
RISK MANAGEMENT

*Analysis Prepared by
TRISTAR Loss Control Manager*



Claims Analysis Reports

Sample Medical Center					
1st Quarter Claim Analysis Report					
1/1 - 3/31					
	2002		2001	Variance	%
# New Claims	18		36	-18	-50%
\$Incurred	87,157		91,940	-4,783	-5%
\$Paid	4,047		10,422	-6,375	-61%
#Indemnity claims	4		8	-4	-50%
#Medical Only Claims	14		28	-14	-50%
#Lost time claims	3		7	-4	-57%
#Back claims	4		8	-4	-50%
\$Incurred	24,996		42,732	-17,736	-42%
\$Paid	4,012		1,196	2,816	235%
#Arm claims	1		0	1	100%
\$Incurred	13,486		0	13,486	100%
\$Paid	1,050		0	1,050	100%
#Wrist claims	3		3	0	0%
\$Incurred	6,200		10,486	-4,286	-41%
\$Paid	0		558	-558	-100%
# Finger claims	3		4	1	-25%
\$Incurred	3,600		10,986	-7,386	-70%
\$Paid	0		886	-886	100%
#Strain/sprains	6		10	-4	-40%
\$Incurred	38,614		58,718	-20,104	-34%
\$Paid	2,246		5,988	-3,742	-62%
# Contusions	2		3	-1	-33%
\$Incurred	165		4,900	-4,735	34%
\$Paid	0		165	-165	-100%
#Repetitive Motion	0		4	-4	-100%
\$Incurred	0		5,000	-5,000	-100%
\$Paid	0		0	0	0%
#Lifting	2		5	-3	-67%
\$Incurred	17,890		54,819	-36,929	-67%
\$Paid	2,246		3,170	-924	-29%
#Slips/Falls	0		6	-6	-100%
\$Incurred	0		26,068	-26,068	-100%
\$Paid	0		3,010	-3,010	-100%
Comments: The decrease in claims frequency and severity was due in part to increased safety awareness, and patient transferring training in nursing units last quarter. Several departments experienced fewer injuries, despite higher patient census in the quarter.					



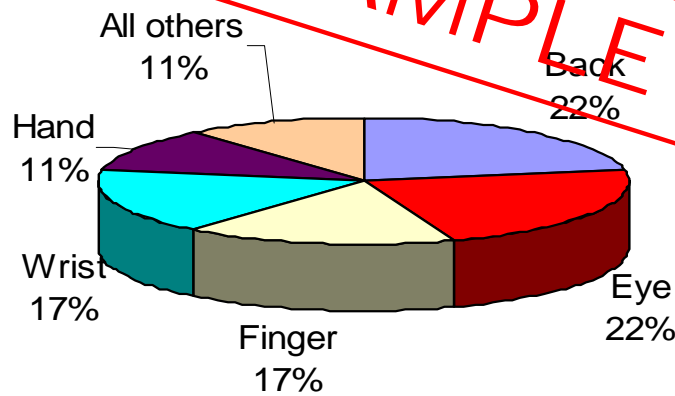


Claims Analysis Reports

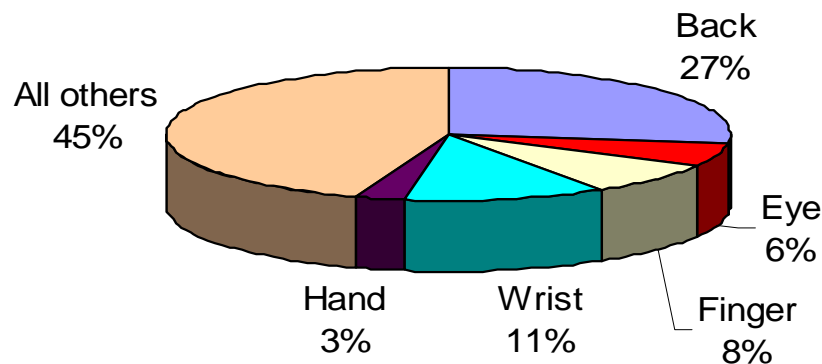
Sample Memorial Hospital 1st Quarter Workers' Comp. Part of Body 1/1/02- 3/31/02

	#New Claims	%	\$Incurred	%	\$Paid	%
Back	4	22%	24,996	27%	4,012	38%
Eye	4	22%	5,083	6%	175	2%
Finger	3	17%	7,583	8%	1,199	12%
Wrist	3	17%	10,486	11%	558	5%
Hand	2	11%	2,555	3%	0	0%
All others	2	11%	41,237	45%	4,478	43%

Part of Body- #New Claims



Part of Body- \$Incurred Costs





Safety Survey Reports



TRISTAR
RISK MANAGEMENT

*Sample Loss Control Report
To Management*

To: Michelle Smith
Community Hospital
100 E. Webb St.
Anytown, CA 90020

By: Loss Control Manager
TRISTAR Culver City
Visit Date: 1/26/00

SAMPLE

Location Surveyed: Community Hospital building, Anytown California

Persons Contacted:

Michelle Smith (Human Resources Director), Jim Chalk (Engineering Director and Safety Officer), supervisors, managers, and various employees from departments surveyed.

Objectives:

The purpose of this visit was to complete a safety profile for assessment of workers compensation, loss control, safety programs, and related activities. Recommendations and suggestions will be provided to help **establish** or **enhance** current activities, with an emphasis on **decreasing** workers compensation claims frequency and severity.

Operations Surveyed:

A brief walkthrough of the hospital was conducted with the assistance of Jim Chalk. This included the medical surgical nursing units, ICU, maternity, lab, pharmacy, radiology, medical records, environmental services, and food service departments. In addition, we briefly reviewed the employee lounge, purchasing, central supply, maintenance, and patient equipment storage areas.

Equipment observed during the walkthrough was noted to be in good condition overall with no visibly damaged, broken, or hazardous parts exposed. No frayed, or cut electrical cords or missing ground pins on powered equipment such as floor scrubbers and vacuum cleaners were noted. All electrically powered equipment is regularly inspected and tagged by engineering or biomedical equipment technicians. A preventive maintenance program is in place as well as a computerized work order system to track repair orders initiated by departments.

Employees observed during the survey were noted to be working in a safe manner, with no unsafe acts or safety infractions noted. Employees were seen wearing appropriate personal protective equipment such as masks, gloves, gowns, and goggles where required. All employees receive a safety orientation prior to starting their first day on the job, in addition to annual safety refresher training as required by the JCAHO. They also receive department specific safety orientations to make them aware of the specific job hazards they will be exposed to in their work areas, as well as the procedures, policies, protective equipment and other engineering controls available to control these hazards. Safety performance is part of their annual performance evaluation to help improve accountability for safe working habits.

