

Workers' Comp & Safety News



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Prevention

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Dealing with an Aging Workforce

The Bureau of Labor Statistics predicts that workers age 55 and older will make up 20 percent of the workforce by 2020, up from 13 percent in 2000. As your workforce ages, what special safety concerns can you expect?

Studies indicate that although aging workers overall experience fewer injuries, possibly due to their greater experience and caution, an injury requires longer recovery with more serious consequences.

Workers in physically demanding jobs may face an increased potential for injury, along with those in more sedentary positions that require periodic lifting or other physical exertion.

What type of physical changes should we expect in aging workers? We reach physical maturity at about age 25; most people begin noticing



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This Just In

Public shaming comes to injury management? OSHA will soon begin posting injury and illness information for public viewing on its website, applying principals of behavioral economics to injury management. Currently, little or no information about worker injuries and illnesses at individual employers is made public or available to OSHA.

OSHA issued a final rule in May that will require certain high-hazard employers to send OSHA their injury and illness data. The rule affects only employers subject to OSHA's record-keeping rules and only to data they already collect.

"Since high injury rates are a sign of poor management, no employer wants to be seen publicly as operating a dangerous workplace," said Assistant Secretary of Labor for Occupational Safety and Health Dr. David

continued on next page

signs of aging at around 40, although some changes can occur earlier. Managers should be aware of some of the common changes aging brings and possible responses.

If you suspect an aging-related limitation might be affecting a worker's job performance, do not ask the employee questions on personal health issues — that information might be protected under discrimination and privacy laws. However,

you can find ways to solve age-related limitations through the use of ergonomics, tool and equipment selection, task assignments and shift schedules. Your workers' compensation carrier or an occupational safety professional can help you identify potential problems and their solutions.

Taking care of your older workers will reduce the potential for injury and help you retain these valuable and skilled workers ■

Michaels. "Our new reporting requirements will 'nudge' employers to prevent worker injuries."

To ensure that the injury data on OSHA logs are accurate and complete, the final rule also promotes an employee's right to report injuries and illnesses without fear of retaliation, and clarifies that an employer must have a reasonable procedure for reporting work-related injuries that does not discourage employees from reporting.

The new rule goes into effect on August 10, 2016. For more information, please contact us.

Physical changes	Response
Loss of strength. Most people lose 15-20% of their strength between the ages of 20-60.	Most jobs seldom require the use of all a person's strength; however, an older worker might be working closer to capacity than a younger one. Monitor all workers in physical jobs for fatigue and repetitive strain injuries.
Smaller range of motion; loss of flexibility	This can cause difficulties in reaching or bending, which could lead to sprains/strains in certain situations. Encourage workers in physical jobs to stretch before and after their shifts.
Less regulation of posture and balance	Falls and other accidents due to loss of balance occur more frequently as we age. Avoid creating the need to work on slippery or uneven surfaces. Physically active individuals are less likely to lose their balance than sedentary ones.
Increased sleep problems	Older workers take longer to recuperate after night shifts or extended workdays; avoid overscheduling and monitor all shift and night workers for fatigue.
Reduced vision	Good lighting improves safety for workers of all ages, but is particularly important for older workers. Your older workers might need larger screens and/or prescription glasses to reduce eyestrain.
Hearing loss	Hearing loss usually occurs in the higher frequencies (higher pitched sounds) first. In a noisy environment, all workers benefit from hearing protection.
Reduced blood flow and tactile response to heat and cold.	Some older workers may have less tolerance for extremes of heat and cold; others might not be as able to notice the physical strains of excessively hot or cold environments. Any worker exposed to excessive heat or cold should be required to take frequent breaks.
Reduced nervous system response	Slower reaction time means older workers are less able to prevent themselves from falls, drops and other accidents. Healthy, physically active individuals are less likely to suffer noticeable loss in reaction time.
Slower mental processing of information; reduced ability to "multitask."	Mental aging varies greatly by individual; verbal skills usually increase with age. And life experience makes older workers valuable team players. However, it can take some older workers longer to learn new information or skills. When training, relate new information or procedures to information or situations they already know. If an older worker is having problems staying focused, reduce extraneous stimuli and distractions.

Heads Up: Even “Minor” Head Injuries Can Be Serious

The class action lawsuit brought by retired players of the National Football League against the league has raised awareness of concussions and the seriousness of repeated brain injuries.

The retired NFL players group has settled with the NFL for concussions they received during their playing years. The class action group accuses the NFL of “being aware of the evidence and the risks associated with repetitive traumatic brain injuries but failing to warn and protect the players against the long-term risks, and ignoring and concealing this information from the players.” The settlement, which is not yet final, includes medical assessment and monetary and education benefits.

Although concussions occur more frequently in professional athletes, other workers in construction trades, such as painters, carpenters and skilled laborers face increased concussion risks. Head injuries can occur anywhere, though, whether it’s at a warehouse, in a car or in an office.

Head injury victims might show no external signs of injury. Symptoms or effects can be vague or easily missed. But evidence is building that even “minor” head injuries are more serious than we might have thought. Repeated injuries can have a cumulative effect, creating serious and permanent neurological problems. And people who have had one concussion are more likely to have another.

So what makes a head injury a concussion? A concussion is a type of traumatic brain injury—or TBI—caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move rapidly back and forth. This sudden movement can cause the brain to bounce around or twist in the skull, stretching and damaging the brain cells and creating chemical changes in the brain. (Source: *Centers for Disease Control, “What Is a Concussion?”* www.cdc.gov)



Recognizing and Treating Concussion

The CDC lists the following as dangerous signs and symptoms of a concussion:

- ✱ One pupil larger than the other.
- ✱ Drowsiness or inability to wake up.
- ✱ A headache that gets worse and does not go away.
- ✱ Slurred speech, weakness, numbness, or decreased coordination.
- ✱ Repeated vomiting or nausea, convulsions or seizures (shaking or twitching).
- ✱ Unusual behavior, increased confusion, restlessness, or agitation.

- ✱ Loss of consciousness (passed out/knocked out). Even a brief loss of consciousness should be taken seriously.

Any worker exhibiting any of these symptoms needs to be taken to the emergency room immediately, or call an ambulance. In a serious concussion, the brain becomes bruised and bleeding may occur. If bleeding leaks into the skull, pressure builds up. This medical emergency requires immediate treatment to avoid permanent brain damage.

What about less-serious head injuries? The only treatment for mild concussion or traumatic brain injury is rest, so any worker who's had a head injury should be removed from the worksite immediately. How much time they need off should depend on the situation. We recommend requiring all workers who have had a head injury to be evaluated by a physician before they return to work. And since even experienced medical professionals can find it challenging to evaluate and manage mild brain injuries, we recommend encouraging (or requiring, where you can) injured workers to see an occupational health specialist.

Occupational medicine specialists will likely have more experience in treating this type of injury. They also understand the importance of managing an injury for return-to-work and the need to balance the employer's desire for early return with the employee's need to recuperate.

After a concussion, the victim has a higher risk of suffering another concussion if another head injury occurs. Proper management of concussions and other brain injuries can prevent permanent effects, which can lead to long-term disability claims. A specialist has tools to evaluate the extent of injury and to prevent malingering, including medical and neuropsychological evaluations.

Proper handling of a head injury victim can prevent an injury from becoming a long-term claim. For information on setting up procedures for handling head injury and other claims, please contact us. We can also evaluate your worksite for possible injury risk exposures to minimize the risk of injuries occurring in the first place. ■

Workers' Compensation and OSHA: What's the Connection?

Although OSHA and workers' compensation both relate to worker safety, they play different roles. Read on for more information.

Sometimes employers confuse workers' compensation requirements with Occupational Safety and Health Administration (OSHA) standards. Some of the confusion relates to what is recordable on the OSHA 300 log (first aid, reportable, lost-time) with what falls under workers' compensation, such as restricted duty, lost-time, and the ever-important written return-to-work policy.

Though it is true that OSHA safety standards and the legislative statutes governing workers' compensation differ, employers must understand both sets of requirements to optimize their experience ratings without compromising their employees' safety or health.

As an example, an employee slips and falls down a couple of stairs at work and injures an ankle. The employee promptly reports the injury and a supervisor takes him to the local urgent care facility. The ankle is x-rayed, the employee is drug-tested according to your post-injury substance abuse policy, and the employee is released with instructions to alternate ice and heat and return to work on his next scheduled shift.

Is this recordable under OSHA? Is it compensable under workers' compensation?

As another example, let's say that night the same employee experiences discomfort and can't sleep well, so decides he will stay home from work the next day to give his ankle more rest.

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He calls his supervisor prior to the start of his shift and says he will not be in because his ankle still hurts.

Is this now a lost-time injury to log under OSHA? Is the employee's day off from work compensable under workers' compensation statutes?

In the first example, the injury is a "first aid" under OSHA because the employee was provided diagnostics (x-rays) with no prescription medication and no reference to restricted or modified duty. Workers' compensation would cover the cost for the hospital visit and x-rays, provided the injury resulted from the employee performing assigned tasks at work.

In the second example, the injury is not a lost-time injury because the employee chose to stay home without a physician's direction. The injury wasn't severe enough to require missing work and the physician did not issue an order for the employee to stay at home. Therefore, workers' compensation would not pay for time away from work. The missed time is no different than had the employee called in sick or to take time off for any other personal reason.

These examples illustrate the differences in how injuries may be reported and why they may or may not be compensable, even though they occurred at work. Still, there is a connection, a "partnership," between OSHA and workers' compensation that directly affects you as an employer. OSHA encourages employers to have written safety

programs with employee participation. Your workers' comp insurance carrier may discount your premiums if you have such a program.

Employers must actively reduce exposures to hazards to comply with the General Duty Clause. The OSH Act allows employees who believe an immediate hazard or a violation of a safety or health standard exists the ability to request an inspection. This helps ensure employee participation and reduces hazard exposures in the workplace.

OSHA expects employers to train employees to respond to an emergency that may occur at work. Such preparation reduces the poten-

tial of employee injury during an emergency and lowers the employer's costs in both medical and business recovery expenses.

Another connection between OSHA and workers' compensation is that insurance carriers review your OSHA citations and 300 Log when it is time to renew coverage.



The General Duty Clause of the federal Occupational Safety and Health Act of 1970 requires each employer to 1) "...furnish to each of his employees employment and a place of employment which are free from recognized hazards that are causing or are likely to cause death or serious physical harm to his employees;" and 2) "...comply with occupational safety and health standards promulgated under this Act."

The Act created OSHA, a federal agency, although states have their own safety and health agencies as well. OSHA (and state OSH agencies) have the authority to promulgate regulations governing worker safety and to fine employers that do not meet these standards. State safety and health laws can be stricter than federal OSH standards,

but not more lenient.

Workers' compensation systems, on the other hand, are governed by state law. Every state except Texas requires employers to provide workers' compensation to their employees, with some exceptions for smaller employers, family farms and the like.

Workers' compensation pays for first aid and medical treatment of workers injured at work, and partially replaces wages lost due to work-related injuries or illnesses. State law governs what benefits the employer (or its insurer) must provide, on a "no-fault" basis. Having a no-fault system where benefits are mandated by law eliminates much of the litigation that would otherwise result when an employee is injured at work. ■

An increase in injuries, either reported to the carrier or OSHA recordables, will raise your premiums. An increase in OSHA citations (whether from random inspection or a complaint investigation) will raise your premiums. Showing both OSHA and your insurance carrier that you are proactive in identifying and removing hazards and properly training employees to recognize and correct hazards

will generally result in lower premiums and a more pleasant visit when an OSHA inspector shows up at your door.

Taking a proactive position with OSHA reduces your employees' exposure to hazards. It can also reduce your likelihood of an OSHA complaint and directly save you in injury costs and reporting. Don't underestimate the OSHA/workers' comp connection! ■

Reducing Workers' Comp Severity

A good workers' compensation and safety program focuses on prevention. Claims will occur, though. When they do, you can take steps to control their severity.

Medical Costs

Good communication is key to controlling medical costs.

- * Make sure managers know that prompt reporting of all injuries and accidents is mandatory. Research consistently shows that delayed reporting increases medical costs.
- * Have a plan for regular communications with the injured worker and your insurance company. Make sure your employee is getting the appropriate care.
- * When you talk to your injured employee, make sure you convey your concern for her health. Make her feel like a valued member of the team so she wants to get back to work, rather than malingering.

Early Return to Work

Getting employees back to work reduces indemnity payments and can also have a positive impact on the employee's overall recovery by improving her morale and self-worth. It also improves the morale of co-workers. Return-to-work programs need structure, including:

- * Job descriptions and analyses.
- * Return-to-work agreements that state the responsibilities of the employer and the injured worker.
- * Light duty assignments – tasks that are modifications of the usual job.
- * Work schedules – full time or part time.

If you would like more information on how to control post-injury costs, give us a call. ■

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