

BWC Division of Safety & Hygiene
KEY SAFETY PROCESS PARAMETERS
for Group Experience Rated Employers

SECTION I – INTRODUCTION

Industry, association and BWC representatives convened in the fall of 1994 to begin discussing issues that eventually led to the formulation of specific safety program rules for group rating sponsors. The ad hoc group worked through the fall and into the spring of 1995 to develop the rules that now represent the fabric of safety and health management for group rating sponsors.

The intent was to provide guidance in contemporary safety and health management strategies to group sponsors who have been responsible for developing safety plans since the original group rating rules became effective. The result was a set of rules that hold group sponsors responsible for communicating, educating and promoting effective approaches to managing safety and health. While group sponsors are not responsible for the actual performance of their group members, they are responsible to develop and follow through with plans generated annually that include three strategies: (1) how they intend to communicate safety and health information with their group members, (2) plans to link with the BWC/Division of Safety & Hygiene and (3) approaches that help members understand how to use the nine key program parameters and processes identified in the rule to eliminate accidents in the work environment. This manual was developed to assist you, the sponsoring organization, with encouraging and communication of these key process parameters.

How To Use This Manual

As a participating group sponsor, you are responsible to *communicate several key safety process parameters* to improve the accident prevention processes and systems within your sponsoring organization, thereby resulting in lower workers' compensation costs. This manual will “walk you” through these keys and offer suggestions for developing and implementing your approaches.

Section I, *Introduction*, introduces the requirements and also discusses additional reasons for developing sound safety and health approaches to accident prevention and cost containment.

Section II, *Key Safety Process Parameters*, takes a closer look at each of the nine key process parameters discussed in the rule. Every subsection begins with a discussion of the concept of each parameter, followed by recommendations for implementing the step.

Since it is not possible to cover everything on safety and health approaches in the manual, Section III, the *Resource/Reference Section*, contains a recent article appearing in the Ohio Monitor, along with a listing of contemporary resources to assist you in understanding contemporary concepts and in generating ideas.

The last section, Section IV, a *Summary*, is to be used in creating and tracking your safety plan toward successfully managing your accident prevention systems and processes.

Investing In An Effective Safety and Health Program

Ineffective accident prevention management results in occupational injuries and illnesses, significantly decreases profitability through reduced efficiency and escalated insurance costs. It's not unusual to see a company with a poor injury and illness record paying three or even four times the insurance premium its competitors are paying, have poor quality of goods and services, and poor employee relationships.

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, these costs are often the "tip of the iceberg" of expense for the employer. The "hidden" costs of injuries and illnesses are indirect, or uninsured costs. Studies indicate that uninsured costs are from 4 to 10 times greater than the insured costs.

Examples of indirect and uninsured costs:

- ◆ administrative costs;
- ◆ failure to meet schedules;
- ◆ loss of production/service capability;
- ◆ overhead costs while work is disrupted;
- ◆ spoiled work;
- ◆ 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 and employee relations. While a company's safety and health achievements often go unnoticed, a catastrophic accident is more likely to be the subject of articles in local newspapers and conversation in the coffee shops. Employees and the community remember a major company accident long after safety and health achievements have been forgotten.

Strengthen employee relations by showing employees that you are honest and trustworthy, support employee empowerment and sincerely "care" about them. Having a strong sense that the "organization cares" helps employees to 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 the employees in terms of:

- ◆ higher morale
- ◆ lower absenteeism

- ◆ higher productivity

Controlling both insured and uninsured accident costs is best accomplished by making safety and health “core” values within the organization and by managing safety and health 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 and health are more than an investment in your employees. They also add economic value to the organization.

However, success in managing safety and health systems will not usually be measurable in the short term. Correcting unsafe conditions and complying with Occupational Safety and Health Administration regulations do not ensure success in accident prevention. Safety and health processes, procedures, and systems prevent accidents and illness. It is only when the people of the organization truly believe that it is in their best interests to perform safely that permanent performance improvements occur and safety and health become core values and part of the organizational culture.

That is accomplished using more than attitude improvement tactics, like posters and incentive programs. 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, two-way communication, positive reinforcement of safe practices and behaviors and a culture that requires the integration of safety and health 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 – KEY SAFETY PROCESS PARAMETERS

1. 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.”

CONCEPTS

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 and health 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. Employees benefit by seeing the integration of safety, health and quality.

RECOMMENDATIONS

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

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

2. **Visible, Active Senior Management Leadership**

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

CONCEPTS

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

- ◆ authorizing the necessary resources for accident prevention;
- ◆ discussing safety and health 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;
- ◆ annually assessing the success of the safety and health process by utilizing perception surveys, personal interviews and behavior sampling strategies;
- ◆ encouraging employees to take an active part in maintaining a safe workplace.

RECOMMENDATIONS

Senior management should assume a leadership role in establishing the importance of safety and health in all operations. Management can take these actions to show active leadership in your safety and health processes:

- ◆ issue a written safety policy identifying safety and health as core values to the organization and assigning roles and responsibilities;

- ◆ establish both annual and long-term safety goals;
- ◆ include safety and health as agenda items 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 and health issues with employees during periodic tours or meetings;
- ◆ participate, as a student, in employee safety training programs, such as safety management, hazard identification, etc.
- ◆ participating in meetings with accident-prevention coordinators;
- ◆ review minutes of safety team or committee meetings;
- ◆ review safety survey reports.

3. Employee Involvement and Recognition

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

CONCEPT – INVOLVEMENT

All employees need to actively participate in the safety and health management process for it to be effective. Labor/management safety and health team(s) facilitate dialogue on safety and health matters between management and employees. The safety and health involvement team effectively handles problem-solving and decision-making for safety and health issues confronting the company.

RECOMMENDATIONS – INVOLVEMENT

- ◆ safety and health involvement teams, focus groups, and safety and health committees that are truly empowered to make decisions;
- ◆ accident investigations;

- ◆ safety and health audits;
- ◆ instructing safety and health training programs;

Composition of labor/management safety and health teams should include managers and direct labor employees in roughly equal numbers. Team members participate as equals and represent all areas. Teams may be natural, associated with a single functional area, or cross-functional and represent a variety of different work areas.

Team objectives include:

- ◆ meet regularly, but not less than quarterly;
- ◆ prepare and make available records of the safety and health issues and outcomes discussed during meetings;
- ◆ use recognized problem solving techniques, like brainstorming, fault-tree analysis, cause-and-effect diagrams, decision analysis, charting, etc. to reach highly effective solutions to problems;
- ◆ review investigations of accidents and causes of incidents resulting in injury, illness, or exposure to hazardous substances and recommend specific action plans for the prevention of future incidents;
- ◆ recommend specific actions to be taken in response to employee safety and health recommendations;
- ◆ conducts surveys of the safety culture periodically (2-year intervals).

The team facilitator, a member of the team, should be responsible for scheduling the meeting, arranging for a meeting place and notifying members of the meeting. The facilitation role should rotate frequently. All team members should share responsibility for other team functions; for example, timekeeper and note taker. The minutes of the meeting should be distributed to all team members and posted on the company safety bulletin board for all employees to read.

Establishing the safety and health 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 and health 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 for it to productively fulfill its responsibilities. It will take time. Mistakes will occur, but the team will learn and improve, if given the education and opportunity.

CONCEPT – RECOGNITION

Companies use both positive and negative reinforcement to encourage their employees to perform their jobs safely. However, the tendency is to use predominately the negative approaches. This leads to fault-finding and blaming employees. The result: safety and health are perceived negatively by supervisors and employees. Develop a positive approach to managing the safety and health process by heavily involving employees and through the use of positive safe behavior reinforcement.

One type of positive behavior reinforcement is recognition of the safe behavior by the employee's supervisor. Advise supervisors to recognize and praise at least one employee each day for following prescribed safe work practices or contributing support to the accident prevention systems. This type of recognition costs nothing but is a visible reminder of the importance the supervisor places on integrating safety and health into the culture of the organization and into day-to-day operations.

RECOMMENDATIONS – RECOGNITION

Establish a program 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.

4. Communications

“A program of regular communications on safety and health issues to keep all employees informed and to solicit feedback and suggestions.”

CONCEPTS

Safety and health communication is a two-way street between the employer and the employees. Many “traditional safety programs” emphasize top-down communications and virtually overlook communications from the bottom-up. To be effective, “bottom-up” communications must be incorporated into your safety and health system.

Soliciting employee input on safety and health matters will do more than simply help your company comply with the requirement. The December 1989 issue of the *Training and Development Journal* cites a Kansas study which asks employees to rank, by importance, the 10 attributes of a good workplace. The employees rated “the feeling that they are in one 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 feel more “in on things.” This results in higher morale and a more productive work force.

Experienced safety and health professional will tell you that some of the best accident prevention ideas come from discussions with employees. Safety and health professionals realize that employees are close to the problems of the work place and, therefore, are extremely valuable in helping to solve problems and generate solutions.

RECOMMENDATIONS

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

- ◆ quarterly written or verbal feedback (or both) 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, newsletters, bulletin boards, staff and general meetings;
- ◆ feedback, which includes the organization’s overall safety and health performance;

Communication with the employees should be easily understood. If you have languages other than English spoken in your facilities, you need to ensure that all safety and health communications are provided to employees in the language they understand. In addition, some employees may not read and require verbal communication.

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

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

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

- ◆ **Discussion method** – involves the supervisor or foreman sitting down with each employee on a regular basis to discuss safety and health 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 method** – involves an “open door” policy when it comes to employee safety and health concerns. Inform employees that the accident prevention coordinator, or a supervisor is available to confidentially discuss their safety and health questions, problems, and suggestions.
- ◆ **Suggestions** – involves establishing a well managed safety and health suggestion program. Install a safety suggestion box in the work area. Instruct employees to place their written comments and suggestions in this box. Some companies provide a form for employees to use when submitting their suggestions. Employees should not be required to sign their name to their suggestions.
- ◆ **Safety meetings** – provides an opportunity for supervisors and employees to discuss safety and health issues. Schedule regular meetings between the supervisors and their employees. Supervisors can meet with their employees individually or in small groups.
- ◆ **Written communications** – it is important to confirm in writing key information. Information can be of three types: motivational, developmental or informational.
- ◆ **In-house company newsletter** – many companies have an in-house company newsletter where the accident prevention information is provided on a regular basis.
- ◆ **Safety and health booklets**- give to employees at work or mail to their homes.
- ◆ **Accident 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.
- ◆ **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 on machinery, entrances to work areas, and in high hazard areas.

5. Orientation and Training

“Orientation and training of all employees.”

CONCEPTS

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

The goal of any safety and health training program is not just to impart knowledge, but to establish or change behaviors. Through safety and health training, you provide employees with information and understanding about hazards, procedures, processes, decisions and expected behaviors.

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

RECOMMENDATIONS

Orientation and training should 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

General safety and health training should include:

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

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

- ◆ ergonomic risk factors, including 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

Training should be provided in the following instances:

- ◆ **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. This provides all current employees the opportunity to start with a “clean slate.”

- ◆ **New employees** – new employees are vulnerable to mistakes. Bureau of Labor Statistics (BLS) studies have found 48 percent of all injured workers have 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 provide them 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 job 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 and health training because they are only temporarily filling in for the regular employee. This is not an acceptable 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. This training does not always have to be formal. It may simply be an informal “toolbox” safety meeting held on the workplace floor. It is important that employee safety and health training be responsive to changes in their work environment.
- ◆ **Identifying a newly reported hazard** - provide safety and health training whenever a new or previously unrecognized hazard is identified. When new hazards are identified, employees who may be exposed to the hazard should be instructed in the nature of the hazard and how to protect themselves. Also encourage employees to report potential hazards immediately.

- ◆ **Leadership** – it is important to build all leadership competency levels in safety and health. The knowledge of leadership in effective safety process management (ESPM) helps drive accident prevention success resulting in higher profitability levels. In this regard, improving communications, team building, interpersonal and problem-solving skills within leadership elevates 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.

6. Written and Communicated Safe Work Practices

“Publish safe work practices so that employee have a clear understanding of how to safely accomplish their job requirements.”

CONCEPTS

Safe work practices are essential for any organization because they prescribe the accepted behavior and practices that are expected of all employees. Job-specific safe work practices apply to operations and tasks that involve recognized hazards and risks associated with those specific tasks. A safety and health involvement team might develop an employee safety and health 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 the employees for their assistance in composing a “safe work practices handbook”. The handbook might also include the company's safety policy, or a statement on safety and health as viewed by the top official of the organization.

RECOMMENDATIONS

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 should 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. Maintain this signed document in the employee's personnel file.

Examples of general safe work practice knowledge expected of most employees include:

- ◆ good housekeeping;
- ◆ personal protective equipment;

- ◆ first aid procedures;
- ◆ ergonomic principles;
- ◆ respiratory protection;
- ◆ lockout/tagout procedures;
- ◆ confined space entry;
- ◆ hazard communications;
- ◆ bloodborne pathogens, if applicable

Job-specific safe work practices should be posted or made readily available in the work area.

Each department's management should review the safe work practices with employees on a recurring basis, at least annually.

7. Safety and Health Program Coordination

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

CONCEPTS

Whoever is identified as 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 and health systems and processes. The accident prevention coordinator acts as the internal consultant helping the organization make important safety and health-related decisions. The accident prevention coordinator must sincerely care about employee well-being, and must have a high degree of credibility with employees.

In smaller companies, the accident prevention coordinator is usually the owner or chief executive office (CEO). Geographically dispersed companies often name the branch or plant manager as the accident prevention coordinator.

Medium-sized employers usually designate a staff manager as their accident prevention coordinator. Effective accident prevention coordinators can be human resources 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 which make up the safety and health system will be carried out by line managers and

supervisors. The accident prevention coordinator provides advice and support to line managers, supervisors and employees regarding safety and health management responsibilities. Specific functions performed by an accident prevention coordinator may vary from company to company.

RECOMMENDATIONS

Designate an individual as the accident prevention coordinator, and give this person the responsibility and authority over the organization's safety and health efforts.

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 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 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. The Division of Safety & Hygiene's Training Center provides numerous seminars to employer representatives at no additional cost. For information, please call 1-800-533-7723.

8. Medical Treatment and Return-to-Work Practices

“Early return-to-work strategies to help injured or ill workers return to work”

CONCEPTS

Quality medical care provided in a timely manner helps employees who are involved in an accident or illnesses, and promotes cost containment for those occupational injuries and illnesses. Establishing effective working relationships with medical providers is crucial for overall successes.

Steps such as these 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 providers about the nature of your business, its risks and your control strategies;

build strong working relationships with the medical providers, so each party understands roles, responsibilities, and expectations.

Another cost containment strategy, modified-duty process, 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 workers' recovery process;
- ◆ minimize disability and insurance costs;
- ◆ promote employee security.

RECOMMENDATIONS

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.

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

- ◆ procedures for obtaining medical treatment;
- ◆ immediate reporting of injuries and illnesses to a supervisor;
- ◆ timely reporting of workers' compensation claims;
- ◆ regularly scheduled supervisory communication with off-work employees while 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.

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 return as quickly as possible:

- ◆ define the employee's normal job requirements and compare 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 BWC, any third party administrator, the in-house claims administrator, injured 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.

9. Recordkeeping and Data Analysis

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

CONCEPTS

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 is the goal of this section.

Statistics, or results-oriented measures, should be collected and used to target opportunities for preventive action and process improvement. The analysis does not need to be detailed, but should contain information showing current injury and illness experience compared to preceding periods and also how performance compares to similar businesses. Results-oriented data, frequency rates, severity rates, costs of compensation, etc. relate trends and show the results of past effort. These numbers don't tell how or by what means the results were achieved.

Performance-oriented information enables improvements to be made in the systems and processes that drive great performance and allow good results-oriented measures to be achieved. For that reason, it is important to assess the processes by which results are obtained.

Techniques for exploring the processes that drive great 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 communications and/or training processes.

An effective way to use performance-related safety and health data is to track and post successful performance information everyone in the company to see. Charts are most effective for this purpose.

RECOMMENDATIONS

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.

Examples of recordkeeping and charting opportunities tracked by time frame, e.g., 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 and health discussions conducted;
- ◆ number of dangerous operations completed successfully, e.g., lockout/tagout operations, confined space entries, etc.
- ◆ number of safety and health 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 will vary greatly depending on the nature of the business.

Over time, a database is built that shows changes in critical behaviors. By comparing month-to-month data and year-to-year trends, a picture of actual performance can be created. Critical problem areas become noticeable. From this information, needs can be identified with a high-degree of confidence and improvements developed to improve the safety and health systems and processes of the organization.

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

SECTION III – RESOURCE/REFERENCE

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