

PESH Federal Fiscal Year 2013 SOAR

In FFY 2013 PESH logged 30 reports regarding fatalities and/or catastrophes. One of the reports did not meet the definition of a catastrophe and the other was related to the death of a Police Officer who was injured in 2011. Of the remaining 28 reports, there were a total of 26 public employee fatalities, 13 of which were determined to be unrelated to work. Of the remaining 15 reports there were five (5) catastrophes. Two (2) reports involved both fatalities (three (3) deaths) and hospitalizations of two (2) or more (five (5) were hospitalized). The remaining three (3) catastrophes resulted in seven (7) employees being hospitalized.

PESH conducted 1900 inspections in FFY 2013, 1398 were safety and 502 were health. PESH met their goal set for the year. There were 4189 Notices of Violations issued in FFY 2013. There were 177,305 employees covered by the inspections performed in FFY 2013.

PESH investigated 372 complaints in FFY 2013.

PESH performed 297 consultations in FFY 2013. In addition to consultation visits, PESH staff conducted 229 outreach visits.

PESH investigated 22 allegations of discrimination by employers in FFY 2013.

In FFY 2013 there were three (3) contested cases, two (2) of which were closed. In addition there were 21 older Industrial Board of Appeal cases settled or brought to resolution.

Progress toward Strategic Plan Goals

Strategic Goal 1

The overall goal was to continue developing and implementing strategies to improve workplace safety and health for all public employees, with special focus on those in the select strategic plan industries. The Strategic Plan Performance Goals for FFY2013 were:

- Decrease the Injury and Illness Rate by 1% in NAICS 922120 (Police Protection, County Government).
- Decrease Injury and Illness Rate by 1% in NAICS 922160 (Fire Service).
- Decrease the DART Rate by 1% in the following sectors:
 - NAICS 623110 (Nursing Care Facilities)
 - NAICS 623210 (Residential Facilities operated by NYS Office for People with Developmental Disabilities (OPWDD))
 - NAICS 623220 (Residential Psychiatric Centers Operated by the NYS Office of Mental Health (OMH))

**County Level Police Protection (NAICS) 922120
FFY 2013**

Strategic Goal: Improve workplace safety and health for all public employees.

Performance Goal #1: Reduce Injury and Illness Rate by 1% in NAICS 922120.

Baseline: 2010

Activity Measures:

Partnerships – This was the second year for this committee. Partnership building with the NYS Sheriff’s Association, various county level sheriff’s departments and related associations was and continues to be a primary focus for this committee.

Injury Data Collection and Analysis – The Log of Work Related Injuries and Illnesses (SH900) and the Summary of Work Related Injuries and Illnesses (SH900.1) have been collected for each county Sheriff’s Department (excluding road patrol units). Data has been assessed and outreach is being developed based on these trends.

Outreach– There was a total of 10 Outreach and/or Technical Assistance Visits in FFY 2013 based on IMIS data.

Consultations – There were 0 consultation visits in FFY 2013.

Inspections – There were 69 inspections conducted in FFY 2013 resulting in 88 S/W/R and/or FTA violations issued.

Primary Outcome Measures:

The primary goal of this committee was to reduce the Injury Rate by 1%. The baseline year is CY 2010. The SH900.1 was used to calculate the rates and was provided directly by the counties.

Police Service Injury and DART Rates

Year	2010 (Baseline)	2011	2012	
Total Recordable Incident Rate*	16	17	16.3	1.9% Increase
DART Rate*	9.4	9.7	9.7	3.2% Increase

* Based on SH900.1’s collected by the committee.

County Level Police Protection FFY 2013 Activities

Introduction:

This was the second year for the Police Protection Strategic Plan committee. As with the first year, much of the committee’s efforts were focused on obtaining SH 900 and SH 900.1 data from the various county level police departments and identifying contacts within these agencies. All Logs and Summary reports have been collected for 2010 - 2012. The committee is in the process of reviewing the data for trends. This information, coupled with existing research, literature and hazard recognition will be used to develop strategies to help reduce injuries in this sector going forward.

Partnership Activity:

The committee members continued to develop partnerships with the county level police departments by assigning counties to the committee participants based on the geographic region of their district office. Improvements have been seen in their interactions with their police protection employer contacts. In FFY2013 committee participants were able to obtain the 2012 injury and illness data more quickly and with fewer issues than the previous year. They also made significant inroads with New York Police Department (NYPD), the largest participant in this sector, as well as with the NYS Division of Criminal Justice Services (NYSDCJS). These two (2) relationships have the potential for great impact and access due to the sheer number of employees at NYPD, and the ability to disseminate valuable information through the extensive contact network established by NYSDCJS. It is worth noting that these relationships were developed and enhanced with face to face meetings. Many of the committee participants have reported dramatic improvements in the relationships with their police sector contacts following these in-person meetings. While the value person-to-person interaction is in general beneficial, it seems especially important with the police protection sector and opening ongoing dialogue regarding safety and health issues.

Injury Data Collection & Analysis:

SH 900's and SH 900.1's have been collected and injury and DART rates have been calculated. Information from the SH900's is being evaluated to identify preventable injuries. Injury control strategies are being developed based on this evaluation.

Police Service Injury and DART Rates

Year	2010 (Baseline)	2011	2012	% Change from Baseline
Total Recordable Incident Rate*	16	17	16.3	1.9% Increase
DART Rate*	9.4	9.7	9.7	3.2% Increase

* Based on SH900.1's collected by the committee.

Outreach:

Outreach activity is measured in two (2) ways. OSHA Performance Measures provide a count of distinct Outreach and Technical Assistance Activities where PESH keeps a count of all interventions conducted by staff even though they may not be coded specifically as Outreach and Technical Assistance Activities in IMIS. According to both OSHA and PESH there were 10 Outreach and Technical Assistance visits in this NAICS during FFY2013.

Of particular note is the impact the PESH TASER Dart Advisory, created by the Police Protection committee, had on law enforcement training in New York. This advisory was initiated when a participant on this committee encountered a bloodborne pathogen issue, related to TASER Darts, while conducting an inspection at a police department. The committee participant researched this hazard and found that limited to no information had been developed on TASER Darts and the bloodborne pathogen hazards. The committee participant developed the TASER Dart Hazard Advisory based on the information he found during his research. This information and the advisory were presented to the NYS Criminal Justice Services, Office of Public Safety who are responsible for the administration of both mandated police and peace officer certified training programs. This office is also responsible for initiatives to enhance the productivity and professionalism of public and private law enforcement and public safety personnel in New York. Additionally, the Office of Public Safety is responsible for the approval

and certification of police training courses and security guard instructors and schools. The Office of Public Safety met with a committee participant resulting in a commitment from NYSDCJS to update their training curriculum to include guidance on conducted energy device probe safety. The Office of Public Safety also offered to send out a separate bloodborne pathogen hazard bulletin to everyone on their contact list, which includes management and training personnel in virtually every law enforcement agency in the state.

During this Federal Fiscal Year, the committee updated the resource CD they developed for this sector. The resource CD was included in the letter sent to each county police department requesting their Work-Related Injury and Illness data. The CD provided education, information and resources addressing a wide variety of safety and health topics that would be applicable to the police protection sector.

Inspections and Consultations:

There was an 11% increase in the number of inspections for this sector during this fiscal year compared to the baseline year. There were no consultations requested/conducted. As partnerships continue to be built, it is expected that consultation requests will increase.

Training:

Although no formal training was done with police protection departments in this sector, PESH staff provided information regarding the bloodborne pathogen exposure risk of manual TASER Dart removal.

Future Activities Planned:

In FFY 2014 this committee intends to continue their campaign of increasing personal contacts with more challenging employer situations and improving upon their progress made thus far with this sector. Their plan will also include development of additional informational and educational materials for distribution through NYSDCJS, continued production and updating of the Law Enforcement Resource CD, and increasing consultation activity, specifically program and training assistance. Our intent is to put all the information from the Law Enforcement Resource CD on the internet so that is readily accessible and provided in a more “searchable” format. This will also help PESH to update the individual items without sending out new CDs when new information becomes available. The committee participants anticipate spending more time with sector employers to improve their safety and health programs, and less time dealing with recordkeeping issues.

This committee plans to develop and disseminate a SWAT/SERT team occupational safety & health advisory bulletin. A second activity is to work on providing consultation visits with the New York State Office of Parks and Recreation and Historic Preservation Park Police to conduct Range Safety Officer sampling for lead and noise exposure at the annual training held at their police academy in the spring of 2014.

**Fire Service - NAICS 922160
FFY 2013**

Strategic Goal: Improve workplace safety and health for all public employees.

Performance Goal # 2: Decrease the Injury and Illness Rate by 1.0%/ year. Improve accuracy of Injury and Illness data.

Baseline Year: 2008

Activity Measures:

Partnerships – This committee continued building partnerships with Fireman’s Association of the State Of New York (FASNY), New York State Association of Fire Chiefs (NYS AFC) and county fire coordinators

Outreach– There were 13 Outreach/Intervention and 35 Technical Assistance visits conducted in FFY 2013.

Consultations – There were 28 consultations conducted in FFY 2013.

Inspections – There were 144 inspections conducted in FFY 2013, 19 of which were programmed inspections.

Primary Outcome Measures:

Fire Service Injury and DART Rates

Year	2008 Baseline	2009	2010	2011	2012	% Change from Baseline
Injury Rate*	53.1	44.4	34.3	29.9	21.8	58.9 % Decrease
DART Rate*	51.1	41.9	20.9	28.7	20.0	60.9% Decrease

* Based on BLS Data

Fire Service FFY 2013 Activities

Introduction:

After not being part of the PESH Strategic Plan for a year, this committee reconvened in FFY 2011. The committee worked on data collection and staff training regarding injury and illness trends in the fire service sector as well as hazard identification during inspections. Several committee participants were involved and continue to be involved in the implementation of Code Rule 800.7, Emergency Escape and Self Rescue Ropes and System Components for Firefighters, a New York State specific regulation.

Partnership Activity

This committee continues to work with FASNY, NYSAFC and County Fire Coordinators as it relates to PESH activities. Members developed the Ropes Rule training video with assistance from New York State Office of Fire Prevention and Control (OFPC). Members network with county level emergency manager through Local Emergency Planning Committee (LEPC) meetings.

Outreach and Interventions:

Following the passage of Code Rule 800.7, considerable outreach and technical assistance was provided in an effort to facilitate compliance. This group developed a training video on the Code

Rule and the proper use of escape and self-rescue ropes. This Code Rule is now being reassessed for alternative methods of self-rescue from heights in addition to emergency escape ropes, and therefore outreach has been postponed until alternative methods for engineering and personal protective equipment as a means for hazard reduction or elimination have been resolved.

PESH conducted 48 Outreach and Technical Assistance visits during FFY 2013 in this sector.

This committee continued to review and revise of Fire Service Resource CD.

Consultations:

PESH conducted 28 consultations in FFY 2013. This is a 22% increase from the baseline year which was in 2008.

Inspections:

Inspections in Fire Service (144) have increased 55 % from the baseline year of 2008.

Training Seminars:

There were no training seminars given in FFY2013.

Future Activities Planned:

This committee members plan to perform outreach to the fire service community on the reduction of emergency vehicle accidents, and the most frequently cited violations for this sector. The committee will conduct meetings with NYS OFPC on issues relating to fire department injury and illness issues.

**NAICS 623110 (Residential Nursing Care Facilities), NAICS 623210 (OPWDD), NAICS
623220 (OMH)
FFY 2013**

Strategic Goal: Improve workplace safety and health for all public employees.

Performance Goal 3: Reduce the DART rate by 1.0% in NAICS 623110, 623210, 623220.

Baseline Year: 2008

Activity Measures:

Partnerships –This committee continued building partnerships with organized labor (PEF, CSEA), advocacy groups (NYS Zero Lift Task Force, NYCOSH, WNYCOSH) and private healthcare facilities that employ leaders in Safe Patient Handling (SPH) (Staten Island University Hospital, and Kaleida Health). New partnerships are also being built with various healthcare facilities that are at varying stages of developing Safe Patient Handling programs.

Injury Data Collection and Analysis - The Log of Work Related Injuries and Illnesses (SH900), and the Summary of Work Related Injuries and Illnesses (SH-900.1) were used for nursing home data. The Annual Report of NYS Government Employees' Workers' Compensation Claims were used for Office for People with Development Disabilities (OPWDD) and Office of Mental Health (OMH) injury data. OSHA IMIS Performance Indicators were used for inspection, consultation and outreach data and the PESH Intervention database was also used for outreach data.

Outreach – There were three (3) outreach and four (4) technical assistance activities conducted in Nursing and Personal Care Facilities in FFY 2013. There were eight (8) technical assistance activities conducted in OMH.

Consultations – There was one (1) consultation visit conducted in Nursing and Personal Care Facilities and eight (8) in OPWDD. Consultations were not conducted in NAICS 623220 (OMH).

Inspections – There were 13 inspections conducted in Nursing and Personal Care Facilities, 18 in OPWDD and 18 in OMH.

Training Seminars – The Strategic Plan Committee co-sponsored one Safe Patient Handling Conference on April 24-25, 2013 and a Safe Patient Handling Train-the-Trainer course which overlapped the conference. They were held in Albany and over 150 people participated. Several committee members attended SPH training developed by a Susan Harwood grant and presented by WNYCOSH and Kaleida Health.

Primary Outcome Measures

Residential Nursing Care Facilities (Calendar Year)*

Measure	2008	2009	2010	2011	2012	% Change from Baseline
TRC	10.7	10.8	10.5	10.6	10.5	1.9 % Decrease
DART	9.0	9.0	9.2	8.1	8.1	10 % Decrease
Lost Time Case Rate	8.7	8.5	8.9	7.8	7.9	9.2% Decrease

* This data changes annually because many NYS public nursing homes are closing or privatizing, therefore they are removed from the entire database altering the baseline and subsequent years.

TRC- Total recordable Case Rate = # recordable cases X 200,000/Total work hours

DART Rate = # Incidents resulting in days away, restricted or transfer duty x 200,000/Total work hours

Lost Time Care Rate - # cases resulting in days away x 200,000/ Total work hours

Data taken from SH900.1's received by PESH

Residential Mental Health and Residential Intellectual and Developmental Disability

(State Fiscal Year)*

NAICS	Measure	State Fiscal Year 2008-2009	State Fiscal Year 2009-2010	State Fiscal Year 2010-2011	State Fiscal Year 2011-2012	% Change from Baseline
Residential Mental Health (623220)	Incident Rate %**	16.8	17.1	17.0	16.3	4.5 % Decrease
	Lost Time Case Rate % ***	25.1	26.8	27.1	27.4	9.2% Increase
Residential Intellectual and Developmental Disability (623210)	Incident Rate %**	15.7	16.9	17.2	18.4	17.2% Increase
	Lost Time Case Rate % ***	33.4	35.9	35.4	36.5	9.3% Increase

* Data based on NYS Annual Worker Compensation Report

** Incident Rate = # Incidents x 100/# FTE's (Full Time Equivalents)

*** Lost Time Case Rate % = # lost time incidents /# of incidents)

Healthcare FFY 2013 Activities

Introduction:

The Healthcare Strategic Plan committee expanded its focus during this 5-year phase from only focusing on nursing homes to including residential mental health facilities (NYS Office of Mental Health (OMH)) and residential intellectual and developmental disability facilities (NYS Office for People with Developmental Disabilities (OPWDD)). The goal is to reduce the Lost Work Day rate by 1% per year or 5% over the 5 years of this phase.

Partnership Activity:

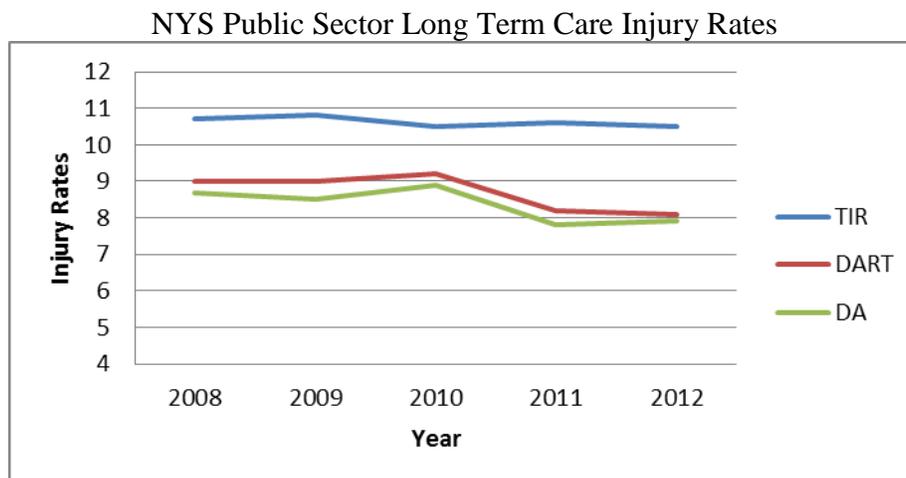
Partnerships with nursing homes, acute care facilities and several organizations affiliated with healthcare were continued. Committee participants and Kaleida Health collaboratively developed a Safe Patient Handling video, focusing on the tools which are typically available in a Safe Patient Handling environment. This video was filmed at High Pointe Nursing Care Facility, Kaleida's newest nursing home, which is equipped with ceiling lifts throughout the facility.

This committee has also reached out to OPWDD and OMH facilities in an effort to work together toward the goal of injury reduction. After initially focusing on recordkeeping, the focus now is on site assessments.

The committee participants continue to work with the NYS Zero Lift Task Force and WNYCOSH in promoting Safe Patient Handling and planning another Safe Patient Handling Conference based on feedback from the conference held in 2013.

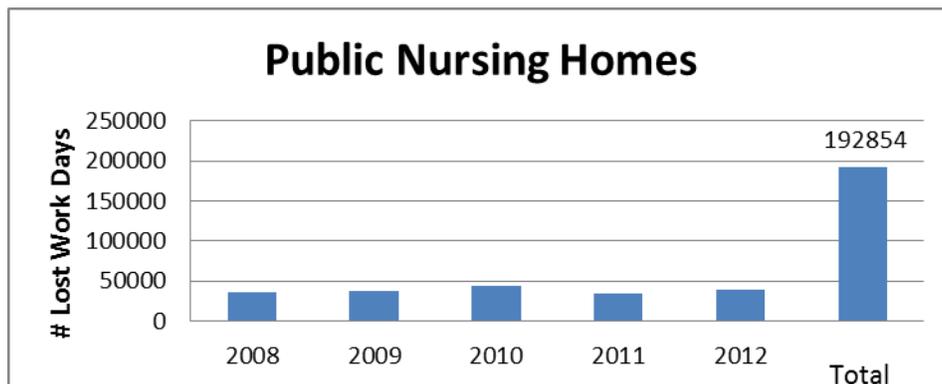
Injury Data Collection & Analysis:

Nursing Homes- Comparing data from one year to the next has been challenging in the nursing home sector due to the closure or privatization of many public nursing homes throughout this phase. To allow for comparison, data for a home that closed or was privatized was deleted from the entire database. For this reason, the baseline and subsequent year's rates may change from year to year. Based on 2013 data, the overall injury rate from 2008 compared to 2013 decreased 1.9%. The DART rate for the same period decreased 10% and the Days Away rate decreased by 9.2%.



TIR- Total Recordable Injury and Illness Rate
DART – Days Away, Restricted or Transfer Rate
DA – Days Away Rate

Although we have seen an overall decrease compared to 2008, these rates equate to many lost work days.



From 2008-2013, there was a total of 192,854 lost work days which resulted in cost to the facility of more than \$18,500,000, using the conservative wage of \$12.00 per hour. This figure is for wages only, and does not take into account the cost of benefits or other direct and indirect costs. The majority of these injuries were due to resident handling which agrees with the national data regarding CNA's and the incidence of musculoskeletal disorders. As acknowledged by Kaleida Health and the NYS Veterans' Home at Batavia, most of these injuries are preventable. This committee's participants plan to continue their work in promoting Safe Patient Handling programs in healthcare facilities.

The committee participants found that much of the injury data provided by OMH and OPWDD was not detailed enough to identify injury trends. To address this issue recordkeeping sessions were held throughout New York. Data is improving. It is particularly difficult to compare injury data year to year for OPWDD facilities because many of the districts are closing their institutions and providing care at small community based Individual Residential Alternatives (IRAs). Western New York alone has more than 150 community based IRA's and no longer has a main residential campus. This trend is continuing across the state. Because of the difficulty in using the SH900 and SH900.1 data, the Annual Report of NYS Government Employees Workers' Compensation Claims was used instead. This report is based on New York State Fiscal Year which is from April 1st to March 31st. OMH and OPWDD do not routinely offer restricted duty or job transfer therefore the Days Away Rate provided in the Workers' Compensation Report was used. Because of the differences in these data, OMH and OPWDD numbers cannot be blended with Nursing Home data to get an overall figure to compare to the baseline.

OMH - OMH is closing facilities and merging others. It is believed this is resulting in a much higher acuity level in the remaining facilities. The majority of the injuries in OMH are due to workplace violence involving patients toward staff. PESH has a Workplace Violence Prevention regulation which was fully implemented in August 2009. Among other things, this regulation requires employers to prepare a policy statement and written workplace violence prevention program. It also requires employers to conduct risk assessments and implement control measures. Workplace Violence incident forms must be completed and evaluated at least annually. Data from SFY 2010/2011 which was the first full year of implementation shows that the Incident rate dropped 4.1%, the Lost Time rate decreased 2.2% and the number of Lost Work Days decreased 8.9%.

Office of Mental Health

NAICS	Measure	State Fiscal Year 2010-2011	State Fiscal Year 2011-2012	% Change from Baseline
Residential Mental Health (623220)	Incident Rate %**	17.0	16.3	4.1% Decrease
	Lost Time Rate	4.6	4.5	2.2% Decrease
	# Lost Work Days****	47,986	43,705	8.9% Decrease

The plan for FFY year 2014 is to choose several OMH facilities based on injury rates and conduct on-site visits.

OPWDD - Injuries in OPWDD are a mix of workplace violence, resident handling, slip trips and falls and other causes of injuries. Identifying injuries trends in these facilities is challenging. OPWDD facilities are nearly all small community homes. Collecting hundreds of SH900's and analyzing the data has been very difficult. Identifying prevention strategies has been equally challenging since many of the injuries are related to the specific home. OPWDD has been active in implementing Resident Handling Programs and a number of homes have lifting and repositioning equipment. Staff from OPWDD facilities have regularly attended the Safe Patient Handling Conferences. Members of this committee have inspected IRA's across the state ensuring that they have Workplace Violence Prevention Plans. IRA's are provided information regarding the prevention of slips, trips and falls. It is anticipated that all of these efforts will result in an improvement in their injury and illness rates in the future.

Outreach:

The committee participants provided training and assistance on recordkeeping, injury data analysis, Right to Know Law, hearing conservation and workplace violence in nursing homes and OMH facilities.

Consultations and Inspections:

Based on IMIS data there were 49 inspections and nine (9) consultation visits conducted in these three (3) NAICS during FFY 2013. During the past year the committee conducted three (3) nursing home National Emphasis Program (NEP) inspections which resulted on one Hazard Alert Letter and a number of serious and other-than-serious violations being issued. They also followed-up on violations issued as a result of the NEP inspections conducted in the previous year in which two (2) General Duty violations were issued for lack of an effective injury prevention program geared toward musculoskeletal injuries related to resident handling tasks. Also during this year a follow-up inspection was conducted for a comprehensive safety and health complaint inspection conducted at an OMH facility. In FFY 2013 there was more than a 500% increase in the number of Serious, Willful and Repeat violations issued in the nursing home sector (four (4) in FFY 2008, 25 in FFY 2013). There was more than a 180% increase in the number of violations issued in OMH facilities (eight (8) in 2008, 23 in 2013).

Training:

A two-day Safe Patient Handling conference was held April 25-26, 2012 as well as a three-day Train the Trainer course from April 24-26th. As in the past, the sessions include hands-on-demonstrations of state of the art equipment used to minimize or eliminate manual handling. As with other conferences, sponsored by this committee, sessions were held on developing a SPH program, maintaining the program and ensuring its success, training and competency of staff, labor/management successes and cost benefit discussions. Approximately 150 people including vendors and speakers were in attendance at the conference.

Future Activities Planned:

This committee's participants plan to continue to be involved with the NYS Zero Lift Task Force and will continue to play a role in future conferences. The committee participants will also put final touches on the Safe Patient Handling resource guide.

Much work remains to be done with reducing worker injuries due to patient handling and repositioning in long term care, as well as, reducing the number of lost work days and the lost work day rate due to injuries related to workplace violence and slips, trips and falls in OMH facilities. This will be a major focus for this group.

This committee will continue to focus on recordkeeping issues in these facilities. An increase in an on-site presence in all three (3) sectors is a major goal of PESH's committees.