

Upcoming Events!

- Water/Wastewater Worker Safety Seminar for Yavapai County— Cottonwood Sept 17
- Regional Safety Summit PHOENIX October 23-24 Maricopa Co Sheriff Training Center
- Auto Shop Safety Yuma Main Public Library November 14

ADOSH Advocate



Phoenix Safety Summit: Don't Miss It!

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October brings cooler weather and the ADOSH/MCSO Phoenix Safety Summit. We are excited to bring you a program filled with excellent speakers and relevant, timely topics. We are also including an OSHA 10-hour Construction Course and a OSHA 10-hour General Industry Course. Both 10 hour courses have a maximum class size of 40 students, so we have limited the enrollment to 3 students per company to allow more small businesses to send their employees.

Meeting at the MCSO Training Center has a quite a few unexpected benefits. Let's just say you want to be at the Summit by 8:00 am on Wednesday, October 23rd. You will be treated to a MCSO Color Guard Presentation! Following a few opening remarks, you will have the pleasure of hearing from Mark Norton, of Norton Safety Services who will address "Are Subcultures Destroying Your Safety Culture?" This presentation was a favorite at our Tucson Summit. Following Mark Norton will be Chief Deputy Jerry Sheridan who will introduce the topic of "Situational Awareness for Workplace Violence Assessment" and then turn the time over to America's Toughest Sheriff, Joe Arpaio. There will be a meet and greet with Sheriff Joe during the lunch hour.

Speaking of lunch, we are trying something new. We will have Ralph's Mobile Catering Trucks on site so you can purchase lunch right there. If you bring your lunch, there will be plenty of picnic tables available for you.

After lunch there will be three breakout sessions, with 4 choices each hour. We will be repeating our popular Accident Investigation Class with ADOSH Consultant Paul Meier. We are adding a few new classes including ADOSH's

own Bill Cooper who will conduct two sessions on "Cranes In Construction" including an emphasis on "Rigging Requirements."

ADOSH Consultation Supervisor Babak Emami will conduct classes regarding "OSHA Consultation Services" and "Effective Safety Committees."

Martin Fekete, DHSc, CSP, SPHR will offer an update on "BBP/OPIM/Flu/CREs and other Scary Biohazards;" Followed by ADOSH Industrial Hygienist Steve Weberman who will address "HazCom 2012 and Globally Harmonized System (GHS)" to ensure that you are on target to meet the training deadline of December 1, 2013.

Throw into this mix some of the best vendors and supporters of Safety in Arizona and you have an idea of what you will experience on just THE FIRST DAY!!!

On Thursday October 24th, you will want to be there by 8:00 am again so that you don't miss the Early Bird Vendor Drawing. You must be present to win! Our vendors are bringing some great items for drawings and will be conducting those drawings throughout the Summit. You can drop off your ticket at each vendor table and be eligible for that vendor's drawing.

Following the Early Bird Drawing we will hear from two Keynote Doctors. Richard Riedy, MD, FACP, FCCP is an expert in Industrial Sleep Solutions and sleep deprivation, who will address us on "Solutions for a Sleepy Workforce: Killer Fatigue's Affects on Business and Safety." Following Dr. Riedy we will be taught, entertained and mesmerized

by Dr. Michael Schaefer, an Orthopedic Chiropractor who has developed new lifting techniques. PowerLift and other musculoskeletal safeguards will help us with sprains, strains and those numerous claims!

And that's just the beginning of the second day! Four Breakout Sessions will be offered with a total of twelve choices for you, including a three hour Confined Spaces Class with Mark Delima of American Rescue Services and Doug Bays from Lee Bays Sales who will give valuable pointers in atmospheric monitoring and equipment use.

ADOSH's Paul Meier will offer a "Warehouse Safety" Class and ADOSH IH Steve Weberman will unlock the requirements of the "Hearing Conservation Standard."

"Slip, Trip and Fall Solutions" - Experts will show you the latest in fall protection innovations, including non-slip floor surfaces, PFAS equipment, anchorages, rope access and confined spaces retrieval systems. This will be a great time to bring your hard questions about Fall Protection to be answered by vendors with solutions!

Assistant Director Jessie Atencio will discuss the requirements of "Emergency Action Plans for both General Industry and Construction." Later in the day he will tell you "How to Prepare for an OSHA Inspection."

ADOSH Director Bill Warren will present a class regarding "Heavy Equipment Safety," followed by an "NFPA 70E Safety Update" by Angie Westerfield of Corbin's Electric. Ms. Westerfield will also be instructing one of the 10 Hour classes. (Continued on page 7)

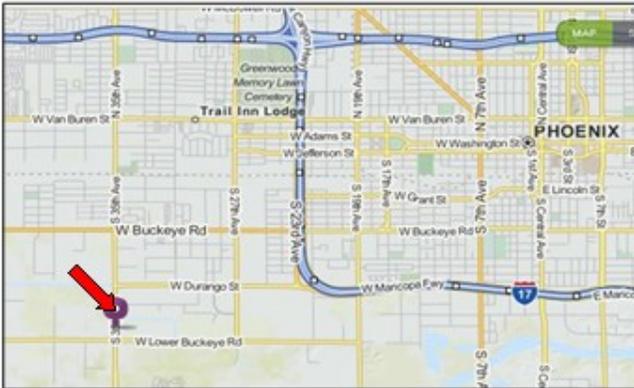


# ADOSH Phoenix Safety Summit

## October 23-24, 2013 8:00 am - 4:00 pm



The Arizona Division of Occupational Safety and Health is pleased to partner with the Maricopa County Sheriff's Office for this free and exciting event!



The Summit will be held at the Maricopa County Sheriff's Training Center  
 2627 S. 35th Avenue, (Lower Buckeye and 35th Ave.) Phoenix, Arizona  
 Call ADOSH at 602-542-1769 or visit <http://www.ica.state.az.us/> for more information on enrollment

**October 23rd Two Keynote Speakers!**



**Are "Sub-Cultures" Destroying Your Safety Culture?**  
 8:30 am—10:00am  
 Presented by:  
**Mark D. Norton, MAOM, RSP**  
 Norton Safety Services



**Situational Awareness For Workplace Violence Assessment**  
 10:30am - 12:00pm  
 Presented by  
**"America's Toughest Sheriff"**  
**Maricopa County Sheriff**  
**Joe Arpaio**

With an introduction from Chief Deputy "Jerry" Sheridan



**October 24th Two Keynote Doctors!**



**Richard M. Riedy MD, FACP, FCCP**  
 8:30 am - 10:00 am  
**Solutions for a Sleepy Workforce: How Killer Fatigue Effects Business and Safety**

The Chief Medical Officer for Industry Sleep Solutions, LLC will address the biology of sleep, causes of fatigue, and how sleepy workers affect bottom lines; offering state-of-the-art solutions.



**Dr. Michael Schaefer, Chiropractic Orthopedist**  
 10:30 am - 11:45 am  
**PowerLift® Training – A Practical Guide to Reducing Manual Material Handling Injuries.**

An expert on body mechanics and musculoskeletal injuries, Dr. Schaefer has developed effective ergonomic and manual material-handling techniques for workers across America, Europe and Asia. His hands-on session is fun and informative; focused on preventing sprains/strains/claims.

- 20+ Classes you may also be interested in:**
- |                                       |                               |                                  |
|---------------------------------------|-------------------------------|----------------------------------|
| Accident Investigation                | Emergency Action Planning     | BBP/OPIM/FLU/CRES                |
| Cranes in Construction (2.5 Hours)    | Hazard Communication/GHS      | Safety Committees                |
| Warehouse Safety                      | Heavy Equipment Safety        | Hearing Conservation             |
| Creating and Selling a Safety Culture | NFPA 70E Safety Update        | First Aid / CPR in the Workplace |
| Effective Employee Training Tips      | Confined Spaces - (3.5 Hours) | Preparing for OSHA Inspections   |
|                                       | Drugs in the Workplace        | OSHA Consultation Services       |

**OSHA 10 Hour Classes in General Industry and Construction will be held. Enrollment is limited to 40 students per class. Enroll Early!**

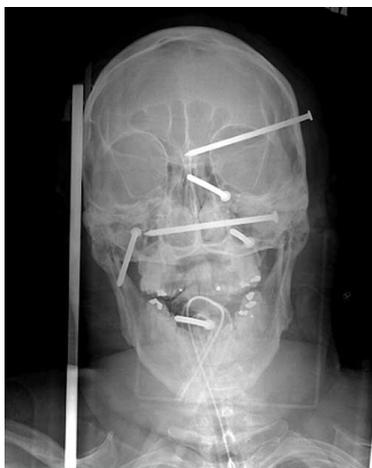
**Register NOW at [www.ezregister.com/events/1607](http://www.ezregister.com/events/1607)**



# A Thousand Words...



The three-and-a-half-inch nail entered the top of Patrick Matheson's chest traveling at 1,400 feet per second - it pierced his trachea and esophagus, then embedded in his vertebral column. Had the nail been just an inch longer, it would have pierced his spinal cord, leaving him a paraplegic, a little to the right, he would have bled to death at a construction site on Dec. 1, 2011 . (Boston Medical Center)



Isidro Mejia, 39 - April 19, 2004 Survived after multiple surgeries with few lingering effects. Surgeons removed six nails, four of which were imbedded in his skull.



Patrick Lawler, 23 showing a four-inch nail embedded into his head, taken January 2005 Lawler had a construction accident where a nail gun fired and a nail entered through his mouth. He didn't notice the nail in his mouth until he felt an extremely painful toothache accompanied by blurry vision.



## In-Box

**Question:** How does OSHA define a "Qualified Electrician" and can an employee be qualified for a specific assignment only?

**Answer:** According to OSHA Standards specifically 1910.333 A *Qualified Person* is "One who has received training in and has demonstrated skills and knowledge in the construction and operation of electric equipment and installations and the hazards involved. Whether an employee is considered to be a "qualified person" will depend upon various circumstances in the workplace. For example, it is possible and, in fact, likely for an

individual to be considered "qualified" with regard to certain equipment in the workplace, but "unqualified" as to other equipment. (See 1910.332(b)(3) for training requirements that specifically apply to qualified persons.)

An employee who is undergoing on-the-job training and who, in the course of such training, has demonstrated an ability to perform duties ( a task) safely at his or her level of training and who is **under the direct supervision of a qualified person** is considered to be a qualified person for the performance of **those** duties.

Note: Although a qualified electrician is permitted to work on "live" circuits, they may do so only when it is infeasible to lockout the circuit or the circuit must be live for diagnostic purposes.

## NIOSH Ladder Safety Phone App for Apple and Android is now available!

As part of our efforts to keep you informed of new safety and health resources, we wanted to let you know that NIOSH has issued a new free application (app) for mobile phones on extension ladder safety. The NIOSH Ladder Safety phone app has an angle of inclination indicator to help users set extension ladders at the proper angle. The app is available through the NIOSH website (<http://www.cdc.gov/niosh/topics/allis/>), the Apple App-store (<https://itunes.apple.com/WebObjects/MZStore.woa/wa/viewSoftware?id=658633912&mt=8>), and the Android Market (<https://play.google.com/store/apps/details?id=gov.cdc.niosh.dsr.lad>

Misjudging the ladder angle is an important risk factor for a fall. The app's inclination indicator allows most cell phones to provide both a visual and an audible signal when the ladder angle is correctly set. The Ladder Safety app also includes other handy information about ladder safety, such as ladder selection, inspection, accessorizing, and use.

Do you know of a good Safety App? Please share it with us and the Safety Community. Just send us an email with the app info to: [Mandeville.jenneth@dol.gov](mailto:Mandeville.jenneth@dol.gov) When we receive your tip we will review it for our next edition of the Advocate. A friend just shared one with me the other day. It is **iAuditor** which she uses for safety audits and reports. Let's see what's out there and then let's share! JM



# Hearing Protector Attenuation *by Steve Weberman,*

Your hearing protection may not be as protective as you think it is. Check this explanation to help determine if your employees are truly protected from damaging noise.

OSHA's Occupational Noise Exposure Standard 29 CFR 1910.95 has not changed since it was introduced as an OSHA Standard except for the STS addition. Employers still have to comply when at least one or more employee(s) are exposed at or above the Action Level of 85.0 decibels on the "A" weighted scale (dBA) and also when the Permissible Exposure Limit (PEL) of 90.0 dBA or greater has been exceeded for at least one employee for an 8-Hour Time Weighted Average (TWA). (This will be done on the "C" weighted scale and then converted to the "A" weighted scale).

When personal noise dosimetry shows noise levels at or above the 85.0 dBA level then the employer must comply with the following OSHA requirements:

1. A written Hearing Conservation Program
2. Baseline Employee Audiograms
3. Annual Audiograms
4. Hearing Protectors
5. Employee Training
6. Posting the OSHA Noise Standard in an area accessible to employees.

When the employer begins the selection process of purchasing and providing hearing protection, most employers do not realize that they are required to perform a calculation of the true **Noise Reduction Rating (NRR)** that will accurately reduce the employees' exposure to noise below the 85.0 dBA level.

All hearing protector manufacturers place an NRR on the package of ear muffs and ear plugs. Typically the

manufacturer's NRR is anywhere from 21 dBA to 35 dBA as far as the protection the manufacturer claims that their product will protect against. This is a true statement from the manufacturer however; the tests are conducted in a

**Did You Know?**

**Question: Do deaf people have to wear hearing protection when at or above the Action Level as well as the Permissible Exposure Limit?**

**Answer: YES, their auditory muscles, inner workings of the ear, and neuro-pathways into the brain still may receive some kind of signals and vibration. Irreversible damage can still occur in people that cannot hear regardless if they were born deaf or lost their hearing due**

laboratory setting under ideal conditions and it is assumed that the end user will wear it correctly, according to the manufacturer's recommendations, 100% of the time.

We all know that in the real world situation that hearing protection is hardly ever worn 100% of the time per the manufacturer's recommendation. In a "real" situation, employees talk and are constantly making facial movements which breaks the seal of the ear plug to the ear canal. That is why we have mandatory guidance in *Appendix B* of the Hearing Conservation Standard. What OSHA instructs in *Appendix B* is a way to determine the actual "real world" NRR by performing a simple calculation. The calculation is as follows:

$$(NRR - 7) \div 2 = \text{Real World NRR}$$

The Formula is the Manufacturers stated NRR minus 7, divided by 2.

Use the manufacturers NRR as stated on the package of the protective device you purchased. For instance, let's say

the NRR is stated as 31 dBA. Take the NRR of 31 minus 7 then divide 24 by 2

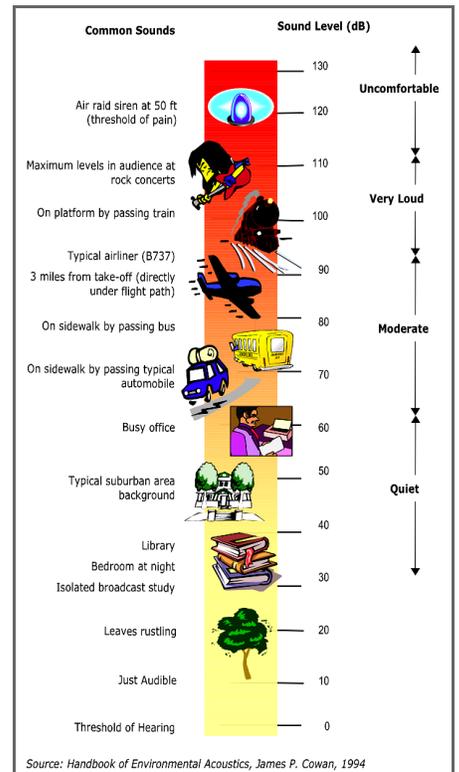
$$31 - 7 = 24 \div 2 = 12 \text{ NRR}$$

your "real world" NRR is actually 12 dBA and not 31 dBA. Quite a difference!

Application:

If an employee's 8-Hour TWA is equal to 95.0 dBA and to meet with the maximum exposure noise level down to 84.9 dBA (just below the OSHA standard actionable level), the employer will have to purchase hearing protectors with a minimum manufacturer stated NRR of 27.5 so that  $27.5 - 7 = 20.5 \div 2 = 10.25 \text{ dBA}$  ( $95.0 - 10.25 = 84.75 \text{ dBA}$ ).

Now, if all this is just too much for you, you can log on to the internet and use an app available at Noise Meters Inc. - along with additional information regarding hearing protection - [www.noisemeters.com/apps/](http://www.noisemeters.com/apps/) will calculate the actual NRR when you plug in the dBA or dBC and the protector (manufacturer) NRR.





# TRAINER'S CORNER

by Jenny Mandeville

### Still learning...

Did you ever prepare a training class and have no one show up? Well, last quarter I thought it would be great to have a class for Nursing Home Workers and I scheduled it in our auditorium here at the ICA, thinking it would be packed. When I checked the ezregister.com site two weeks before the class, I found that only one person had signed up! Later that day that one person called and cancelled!

This was very puzzling. I knew that Nursing Homes had high injury and illness rates and needed our support in training and consultation services.

Why weren't they responding? Is the invitation reaching the right people? At times like this, as trainers, we need to back off, reassess and gather more information. The delivery system

must meet the needs of the client. So... I asked myself:

- How can we effectively approach the industry?
- What do they need for management training?
- What do they need for employee training?
- How much time can a nursing home worker dedicate, and take time away from duties, for safety training?
- How can we provide the training so that it does not compromise care and interrupt services?
- What are the key training issues that need to be addressed?

After speaking with a Nursing Home Plant Ops Director, who stopped by to see about the class that I had cancelled...I learned that it would be best to provide a Train-the-Trainer class for the person wearing the safety hat.

If we provide the materials and tips on how to deliver the classes, they can adapt the training for their own staff, on their own time, and in their own setting.

Now that I have some industry input, I will try a Train-the-Trainer class for Nursing Home Safety and prepare a CD somewhat like the GHS HazCom CD we provide. (Call if you need one)

This quarter we are offering a free DVD with Respirator Training Resources for all industries. This DVD contains the OSHA Respiratory Training Videos which are much easier to use in this format. PowerPoint and PDF files are included along with sample respiratory protection written programs. The best thing about being a trainer is that you are always learning. JM

*Order your free Respiratory Protection Program and Employee Training Resources DVD compiled by ADOSH Trainers to help you deliver training to your employees this fall*



## A Word About Our Webinars... by Assistant Director Jessie Atencio

The ADOSH Consultation and Training department has been incorporating webinar classes in the past three quarterly ADOSH Advocate training calendars. With the successful completion and positive comments received from the webinar class participants, we are excited to offer more hour to two hour training classes to our established curriculum.

Our webinars are designed to provide condensed safety and health information to employers and employees who may not have time to attend our tradition-

al classes. We use the iLinc online website to generate and host our webinars. With the aid of the site, our webinars may reach over a 1,000 desktop and or mobile devices.

To participate in the webinar, we request that you register for the class no later than two days before the class. Our Administrative Assistance personnel will upload the attendees who have registered with a valid email address. It is important to note that the iLinc system will only recognize one user with one email address. In the past three webi-

nars presented, our office received multiple personnel from one company with one email address.

Upon successful registration of an email address, you or your personnel will receive an email providing you with information on the class. Please follow the directions to access the webinar and dial-in for the voice portion of the class. The only add on software needed to access the iLinc webinar is Active X. This program is only needed to run and view the presentation, but you or your employees do not have to

save the software reader permanently on your computer or mobile device.

We hope that you and/or your employees enjoy these webinar classes. Once a class is finished, an invitation for Survey Monkey will be sent in order for our department to gain insight on how the session was presented and what items we may add for further of enhancement of the class if needed. We at the ADOSH Consultation and Training Department would like to thank those that have participated in the past three webinars and those that will participate in advance.



**Join us at the Regional Safety Summit in Phoenix  
At the Maricopa County Sheriff's Training Center  
October 23-24 8:00 a.m. - 4:30 p.m.**



## ADOSH Education and Training Calendar Oct-Dec 2013

Registration for each class begins 30 days prior to the date of the class. Most classes are free of charge but are subject to change or cancellation with out notice. Some classes or seminars listed are not exclusively sponsored by ADOSH and may carry a nominal fee to cover the costs of course materials, space or equipment rental, etc. **NOTE: The phone number or web address listed for each class is the number that participants need to call for class questions and are not direct numbers to the ADOSH trainer. Please register on-line at [www.ezregister.com/promoters/1607](http://www.ezregister.com/promoters/1607) Registration Problems? Call 602-542-1769**

### October 2013 On-line Registration Required

10/2/2013	9:00 - 12:00	GHS/Hazard Communication 2012	365 16th Street	Douglas	Ornelas	520-364-7521	Sabine Ludwig
10/2/2013	9:00 - 12:00	Scaffold Safety Awareness	800 W Washington St	Phoenix	Cooper	602-542-1769	R Montanez
10/4/2013	9:00 - 11:00	VPP- Communicating Hazards (Webinar)	800 W Washington St	Phoenix	Atencio	602-542-1769	R Montanez
10/9/2013	9:00 - 12:00	Forklift Train-the-Trainer	Call for location	Sierra Vista	Ornelas	520-628-5478	ADOSH
10/10/2013	9:00 -12:00	GHS/Hazard Communication 2012	2675 E Broadway	Tucson	Ornelas	520-628-5478	ADOSH
10/17/2013	9:00 - 12:00	Machine Guarding	800 W Washington St	Phoenix	Cooper	602-542-1769	R Montanez
10/23/2013	8:00 - 4:00	Phoenix Safety Summit	2627 S 35th St.	Phoenix	ADOSH	602-542-1769	R Montanez
10/23/2013	8:00 - 4:00	OSHA 10 General Industry	2627 S 35th St.	Phoenix	ADOSH	602-542-1769	R Montanez
10/23/2013	8:00 - 4:00	OSHA 10 Construction	2627 S 35th St.	Phoenix	ADOSH	602-542-1769	R Montanez
10/24/2013	8:00 - 4:00	Phoenix Safety Summit	2627 S 35th St.	Phoenix	ADOSH	602-542-1769	R Montanez
10/29/2013	9:00 - 12:00	GHS/Hazard Communication 2012	7401 Civic Circle (PV Library)	Prescott Valley	Mandeville	928-772-8857	PV Chamber
10/30/2013	9:00 -12:00	Machine Guarding	2675 E Broadway	Tucson	Ornelas	520-628-5478	ADOSH
10/30/2013	9:00 -12:00	PPE Hazard Assessment	3030 N 3rd St (SCF Bldg)	Phoenix	Cooper	602-542-1769	R Montanez
10/30/2013	9:00 - 12:00	Accident/Incident Investigation	3330 East Elder	Flagstaff	Mandeville	602-542-1769	R Montanez
10/30/2013	1:00 - 4:00	PPE Hazard Assessment	3330 East Elder	Flagstaff	Mandeville	602-542-1769	R Montanez
10/31/2013	9:00 - 12:00	Biohazards in the Workplace	3330 East Elder	Flagstaff	Mandeville	602-542-1769	R Montanez

### November 2013 On-line Registration Required

11/1/2013	9:00 - 12:00	Ladder and Stairways Safety	Sedona City Hall Vultee Room	Sedona	Mandeville	602-542-1769	R Montanez
11/1/2013	9:00 - 10:30	Preventing Workplace Violence (Webinar)	800 W Washington St.	Phoenix	Atencio	602-542-1769	R Montanez
11/6/2013	9:00 - 12:00	Accident / Incident Investigation	1971 Jagerson Ave	Kingman ***	Mandeville	928-757-0894	Lisa Card
11/6/2013	1:30 - 3:30	PPE Hazard Assessment	1971 Jagerson Ave	Kingman ***	Mandeville	928-757-0894	Lisa Card
11/6/2013	9:00 -12:00	GHS/Hazard Communication 2012	2675 E Broadway	Tucson	Ornelas	520-628-5478	ADOSH
11/7/2013	9:00-11:30	Biohazards in the Workplace	1971 Jagerson Ave	Kingman ***	Mandeville	928-757-0894	Lisa Card
11/7/2013	9:00 -12:00	Hand and Power Tool Safety Awareness	2675 E Broadway	Tucson	Ornelas	520-628-5478	ADOSH
11/7/2013	9:00 - 12:00	Accident/Incident Investigation	800 W Washington St.	Phoenix	Cooper	602-542-1769	R Montanez
11/8/2013	1:00 -4:00	Safety for Home Care Workers	800 W Washington St.	Phoenix	Mandeville	602-542-1769	R Montanez
11/13/2013	9:00 -12:00	General Industry Hazard Recognition	2675 E Broadway	Tucson	Ornelas	520-628-5478	ADOSH
11/13/2013	9:00 - 12:00	OSHA 300 Recordkeeping	2951 S 21st Dr (Main Library)	Yuma	Mandeville	928-373-1138	D Robinson
11/13/2013	2:00 - 4:00	Recordkeeping Wrkshp - Calculating Rates	2951 S 21st Dr (Main Library)	Yuma	Mandeville	928-373-1138	D Robinson
11/14/2013	8:00 - 12:00	Auto Shop Safety	2951 S 21st Dr (Main Library)	Yuma	Mandeville	928-373-1138	D Robinson
11/14/2013	9:00 - 10:30	VPP Elements - Safety Committees	800 W Washington St	Phoenix	Emami	602-542-1769	R Montanez
11/15/2013	9:00 - 12:00	Accident/Incident Investigation	2675 E Broadway	Tucson	Cooper	520-628-5478	ADOSH
11/15/2013	9:00 - 10:30	Common Health Care Hazards (Webinar)	800 W Washington St.	Phoenix	Atencio	602-542-1769	R Montanez
11/20/2013	9:00 - 12:00	Excavation Safety Awareness	800 W Washington St.	Phoenix	Cooper	602-542-1769	R Montanez



## November 2013 (continued) On-line Registration Required

11/21/2013	9:00 - 11:00	VPP- Communicating Hazards (Webinar)	800 W Washington St	Phoenix	Atencio	602-542-1769	R Montanez
11/22/2013	9:00 - 10:30	GHS/Hazard Communication 2012 (Webinar)	2675 E Broadway	Tucson	Atencio	520-628-5478	ADOSH

## December 2013 On-line Registration Required

12/3/2013	9:00 - 12:00	GHS/Hazard Communication 2012	500 S Central, Bldg D	Florence	Ornelas	520-866-7920	Ana Escovel
12/4/2013	9:00 -12:00	Office Safety	2675 E Broadway	Tucson	Ornelas	520-628-5478	ADOSH
12/4/2013	8:00 - 12:00	Forklift Train-the-Trainer	3030 N 3rd St (SCF Bldg)	Phoenix	Mandeville	602-542-1769	R. Montanez
12/6/2013	9:00 -12:00	Accident/Incident Investigation	800 W Washington St	Phoenix	Cooper	602-542-1769	R Monanez
12/10/2013	9:00 -10:30	Globally Harmonized System (Webinar)	800 W Washington St	Phoenix	Atencio	602-542-1769	R Monanez
12/11/2013	9:00 -12:00	Workplace Violence Prevention	2675 E Broadway	Tucson	Ornelas	520-628-5478	ADOSH
12/11/2013	9:00 -12:00	Workplace Violence Prevention	800 W Washington St.	Phoenix	Mandeville	602-542-1769	R Montanez
12/13/2013	9:00 - 12:00	OSHA 300 Recordkeeping	800 W Washington St.	Phoenix	Mandeville	602-542-1769	R Montanez
12/13/2013	1:00 - 4:00	Recordkeeping Workshop -Calculating Rates	800 W Washington St.	Phoenix	Mandeville	602-542-1769	R Montanez
12/18/2013	9:00 - 12:00	OSHA 300 Recordkeeping	2675 E Broadway	Tucson	Ornelas	520-628-5478	ADOSH
12/18/2013	9:00 - 12:00	Hand and Power Tool Safety	800 W Washington St	Phoenix	Cooper	602-542-1769	R Montanez
12/20/2013	9:00 - 10:30	Common Health Care Hazards (Webinar)	800 W Washington St.	Phoenix	Atencio	602-542-1769	R Montanez

# Register online at [www.ezregister.com/promoters/1607](http://www.ezregister.com/promoters/1607)

**NOTES: EZRegister Instructions:** Just type in [www.ezregister.com/promoters/1607](http://www.ezregister.com/promoters/1607) in your URL address bar and enter. All of ADOSH's classes will be listed and you can click on the class you want to attend. Fill in the form and save it to your calendar! Simple and time-saving. If there are any changes we will let you know. Webinars are scheduled and when you sign up for the class, a return email will include materials for the class and log-on information. Please register early for training classes and leave contact information. Some classrooms may be limited in size and will require us to limit enrollment. If there are not enough enrolled for the class (10 or more) or if there is an unexpected emergency or illness, the class may be cancelled. While ADOSH tries to contact each student in the event of a cancellation, we encourage you to call the day before the class to confirm that the class will still be held as scheduled. **Call the number listed on the roster.**

Finally, please be courteous during any cold and flu seasons and do not attend the class if you are suffering symptoms of illness. Viruses are highly contagious and we want to keep all students and instructors healthy during all times of the year. *See you in class!*

( Safety Summit - Continued from Page 1)

A and D Experts will offer a class on **Workplace Drug Testing and Medical Marijuana**. You might be surprised about the prevalence of drugs use while working and the impact on business. Learn the signs and symptoms of an employee with a drug or alcohol problem and make better decisions about the work readiness of each employee.

Jenny Mandeville, ADOSH Trainer will offer two Safety Management classes: **Creating and Selling a Safety Culture**,

addressing the need for safety officers to also become salespeople to sell the safety plans for the company, and **Effective Training for Multigenerational Workforces** in which she introduces the three generations of workers and their work ethic differences; and common values that can form a culture.

Cintas will present the use of **AED and CPR in the Workplace** class, with state of the art equipment that has the power to save lives.

One of our goals for this Summit is plan for the 10 hour students to attend the Keynote addresses as

part of their curriculum. **A note about the 10 Hour classes:** There is a fee of \$5.00 cash that is due the first day of the class. This fee is assessed to the instructor as a card fee by the OSHA Training Institute. We require the student to pay this fee. The 10-hour classes can cost as much as \$125.00 depending on each instructor's charge, so the savings is substantial. We expect these classes to fill immediately upon opening registration. If you were not able to register, you may call Rosemary at 602-542-1769 and be placed on a waiting list for cancellations. There are some openings that occur on the day of

the event so be there early on the first morning. We will announce any openings and the first-come/first-served names on the waiting list.

Last, but not least, ADOSH wishes to thank Maricopa County Sheriff's Office **Lt. Donna Hudson and Sgt. Colleen Walters** who have put endless hours toward the success of the Summit, and boundless energy to make it the best Summit we have ever held. We have enjoyed working with this dynamic duo!

Come network with other safety professionals and bring your best ideas to share!



## Violence - An Occupational Hazard in Home Healthcare - NIOSH

An aging population and rising hospital costs have created new and increasing demand for innovative healthcare delivery systems in the United States.

Home healthcare provides vital medical assistance to ill, elderly, convalescent, or disabled persons who live in their own homes instead of a healthcare facility, and is one of the most rapidly expanding industries in this country.

The Bureau of Labor Statistics projects that home healthcare employment will grow 55% between 2006–2016, making it the fastest growing occupation of the next decade.

Home healthcare workers facilitate the rapid and smooth transition of patients from a hospital to a home setting. They offer patients the unique opportunity to receive quality medical care in the comfort of their own homes rather than in a healthcare or nursing facility.

Home healthcare workers, while contributing greatly to the well-being of others, face unique risks on the job to their own personal safety and health.

During 2007 alone, 27,400 recorded injuries occurred among more than 896,800 home healthcare workers.

Home healthcare workers are frequently exposed to a variety of potentially serious or even life-threatening hazards. These dangers include overexertion; stress; guns and other weapons; illegal drugs; verbal abuse and other forms of violence in the home or community; bloodborne pathogens; needlesticks; latex sensitivity; temperature extremes; unhygienic conditions, including lack of water, unclean or hostile animals, and animal waste. Long commutes

from worksite to worksite also expose the home healthcare worker to transportation-related risks.

### A Focus on Violence

Serving patients in the community is the essence of home healthcare. Yet, the community setting makes home healthcare providers more vulnerable to violent assaults. Home healthcare workers face an unprotected and unpredictable environment each time they enter the patient's community and home. According to estimates of the Survey of Occupational Injuries and Illnesses (SOII) [BLS 2007a], 330 nonfatal assaults on home healthcare workers occurred in 2006—a rate of 5.5 per 10,000 full-time workers, more than twice the rate for all U.S. workers. An effective violence protection program requires the following:

- The patient and family should provide a safe environment in the home.
- The worker should be able to assess risks in the environment.
- The employer should provide information about the responsibility of the patients family.
- The employer should train the staff to assess risks and implement acceptable interventions.

[Sylvester and Reisener 2002].

**What are some factors that increase the risk of violence to home healthcare workers?** The patient's home may be in a high-risk area for violence; there may be drug traffic or high-crime areas nearby. A patient's history of mental illness, alcoholism, drug abuse, or violence may also increase the risk. More time spent in the patient's home may result in a higher risk of violence [Kendra et al. 1996]. The employer may underestimate the risks to the workers and overestimate

the support they receive [Kendra 1996; NIOSH 1999].

### What does workplace violence

**include?** The spectrum of workplace violence ranges from verbal abuse and threats of assault (by human or animal) to homicide. Examples of violence include the following:

- Threats: expressions of intent to cause harm (verbal, body language, written)
- Physical assaults: attacks including slapping, beating, rape, homicide, and the use of weapons such as firearms, bombs, knives
- Mugging: an aggressive assault, usually by surprise and with intent to rob

Home healthcare workers may need to resolve violence issues without immediate help from their employers or coworkers. The patients may have complex physical, psychological, psychiatric, and social needs. The potential for alcohol and drug abuse and the presence of firearms in patient homes further endangers the worker [Fazzone 2000; McPhaul 2004; NIOSH 1996].

Family issues are more likely to increase in intensity and become out of control in the home than in the hospital setting. Chaotic family relationships, poor resources or lack thereof, poor hygiene, and presence of animals all may increase risk of violence directed at or in the vicinity of the home healthcare worker.

Verbal abuse is a form of workplace violence and is a source of workplace stress. Verbal abuse may come from the patient, family members, or people in the community. Verbal abuse may be as subtle as constantly requesting that the home healthcare worker perform duties out of the scope of her or his job (such as cleaning) or complaining about their job

performance or appearance.

Home healthcare workers don't always report to their employer when they meet with violence while at work. Therefore, the true extent of violence in the home healthcare industry is unknown [Lanza and Campbell 1991].

The following are reasons why violence is often not reported:

- There is no consistent definition of violence or standardized reporting procedures.
- Workers fear accusations of incompetence, or they think their employer might assume that they were the cause of the violence.
- Workers may believe that dealing with violent behavior is part of the job.
- Workers may be embarrassed and hesitant to report violent behavior.

The effects of violence can range from minor to serious physical injuries to temporary or permanent physical disability to psychological trauma. Violence can even lead to death: five home healthcare workers lost their lives in 2006 because of assaults and violent acts [BLS 2007b].

Violence may also have undesirable organizational outcomes:

- Low worker morale
- Increased job stress
- Increased worker turnover
- Reduced trust of employer and coworkers

Violence or safety concerns may adversely affect the quality of patient care. If home healthcare workers do not feel safe and limit the length of time of the visits or reduce the frequency of visits, patient assessment and education will decrease. Staff may be fearful and refuse to provide services in high crime areas. All these factors may affect patient outcomes. [Kendra et al. 1996; Brillhart et al. 2004]. (Continued on page



**4 Elements of a Powerful Safety Program** **Powerful Hazard Prevention and Control** *Power vs. Force*



There are job tasks that are inherently hazardous and employees may not be able to eliminate the task or an employee's exposure to the hazard. OSHA follows what is known as the "Hierarchy of Controls"

Once a hazard is identified the employer is required to provide a measure of protection, for employees, from that hazard. To help employers choose the most effective protective measure, OSHA follows the Hierarchy of Controls which is identified by NIOSH as:

- Elimination
- Substitution

- Engineering controls
- Administrative controls
- Personal protective equipment

The idea behind this hierarchy is that the control methods at the top of the list are potentially more effective and protective than those at the bottom. Following the hierarchy normally leads to the implementation of inherently safer systems, ones where the risk of illness or injury has been substantially reduced.

There is an abundance of information on the Hierarchy of Controls on the internet, so I won't cover that here. What I want to address is how to make assigning control measures a *powerful* rather than *forceful* endeavor.

I conducted a consultation survey at a factory where employees had sustained 3 injuries per year for 3 years while working with a machine that was not adequately guarded. When I asked why there was no

guard installed to prevent contact with the danger zone, the Manager said, "We can't install a guard and still make the product." I asked him who had assessed the issue and he defensively admitted that he had tried to figure it out himself. Many of the ingenious machines had been invented and built by the company itself. I asked to speak to the Engineer and the Maintenance Supervisor to see what their thoughts were.

The maintenance supervisor was the first to arrive and I pointed out the problem and he immediately started brainstorming. By the time the engineer got there the Maintenance Supervisor had formulated an idea. Within minutes, the Engineer and the Maintenance Supervisor had cursory plans drawn up for an effective guard. They showed the guard idea to the machine operator who made some suggestions and a control for that hazard was well on its way to being realized.

The manager was amazed. He had spent quite a bit of energy on the guarding problem and couldn't discover an answer. Not to diminish the Manager's efforts, he had tried to implement some work practice controls that were not as effective as engineering controls because the administrative controls depend upon the human decision element to be executed correctly.

In this instance there were more than four people working on the problem, and invested in the solution. Employees take pride in successful contributions, and while I was not present to see the long term outcome, I could see the excitement in the Engineer and Maintenance Supervisor when asked to solve the guarding issue, and the operator when his opinion was sought out for further input.

Sometimes, when we are faced with a problem, we forget to consult our most valuable asset: our employees. Empower them to solve problems that seem to have no answer. You just might be surprised.  
Jenny Mandeville

**Workplace Fatalities Investigated by ADOSH April - June 2013**

- 04/01/13 – A 51-year-old male was electrocuted while repairing a 110-volt light fixture in the attic of a business in Mesa.
- 04/12/13 – A 30-year-old temporary worker was missing for a day before he was discovered in a large sand hopper where he was apparently crushed and asphyxiated.
- 04/20/13 – A 56-year-old city employee drowned when he fell into Tempe Town Lake while operating a boat.
- 04/25/13 – A 55-year-old machinist, working from the roof of a machine shop to replace a metal water pipe for an evaporative cooler, was electrocuted when he contacted a 12,000-volt energized power line.
- 04/25/13 – A 33-year-old male employee died from crushing head injuries sustained while attempting to repair a dairy milking carousel.
- 05/16/13 – A truck operator was struck and killed during the removal of a large palm tree as part of a property demolition project in Scottsdale.
- 05/18/13 – A 23-year-old Phoenix Fire Fighter was fatally crushed between two emergency vehicles while responding to a brush fire.
- 05/21/13 – A 24-year-old male employee fell from a 12 foot ladder while performing residential painting work and suffered a fatal head injury.
- 06/04/13 – A 56-year-old studio lighting operator fell 7 feet from a ladder while attempting to make a lighting adjustment and suffered a fatal head injury.
- 6/19/13 -- During removal of the shoring system under a bridge, the suspension system collapsed and partially fell to the ground below, crushing a 43-year-old carpenter who was working underneath. (Another worker also sustained serious injuries from this same incident)
- 6/30/13 – Nineteen members of a "Hot Shot" Firefighting crew lost their lives while fighting a wild land fire in Yarnell, AZ.



### VPP and SHARP News Prudential Overall Supply, Maricopa Integrated Health System



Prudential Overall Supply recently celebrated their VPP STAR certification in July. ADOSH Consultation department was proud to add them to the 35 strong VPP existing sites. Prudential is based in southern California, although the first STAR site was in the state of Arizona. Prudential Overall Supply senior management was on site as well as the ADOSH VPP Team members.

**Photo 1:** Counterclockwise from left: ADOSH Director Bill Warren, Assistant Director Jessie Atencio, Safety and Health Manager Hector Durand and CET Supervisor Babak Emami. **Photo 2:** Plant Manager Mark Rassmussen presents awards to Robi Garibay and Jason Bogart **Photo 3:** Members of Prudential Leadership Team and ADOSH VPP Team pose for the camera. Congratulations Prudential



Maricopa Integrated Health System celebrated their initial VPP STAR celebration in July. The Hospital is the first recognized in the ADOSH VPP Program and included in the 35 VPP existing STAR sites. The company had excellent management and employee involvement with communication at the heart of what they did in regards to safety and health measures.



**Above left:** MIHS Staff wait patiently for the flag to be presented. **Lower left:** ADOSH Director Bill Warren presents the VPP plaque to CEO Betsey Bayless. **Above:** ADOSH Assistant Director Jessie Atencio stands with MIHS' Safety Rep and Senior Leadership as the VPP flag is displayed before the flag pole raising.



## VPP and SHARP News Printpack, Alliance Beverage, Hill Brothers, Verco Decking

During this last quarter, ADOSH Consultation Department visited one site for a recertification evaluation. Printpack Inc., Prescott Valley, AZ: 1<sup>st</sup> successful recertification



**Right:** Alliance Beverage Distribution Company (Phoenix) was awarded a SHARP Re-certification. Company officers with Babak Emami holding SHARP Certificate.  
**Below:** Verco Decking, Inc. (Phoenix) crew poses below for their SHARP Recertification group photo.



Below: Hill Brothers Chemical Company (Phoenix) Crew poses with ADOSH Consultation Supervisor Babak Emami after receiving their SHARP Recertification Certificate. We Congratulate all of our SHARP Recertification Companies and thank you for your dedication to Safety!



# ADOSH Training: Respirator Fit Test Certification Training with 3M Company



On July 25th ADOSH hosted a Respirator Fit Test Training with 3M Company. Attendees were treated to surprise when Market Development Manager Lynn Fisher (above in red shirt) and Jerry Warren, Owner of Warren Sales, LLC arrived with Fit Test Kits for each company to take home with them. The two instructors also brought a variety of respirators for students to try out and fit test each other. Each student will receive a certification from 3M, a Field Guide and other goodies that were sent out with the certification card. We look forward to another training with 3M in the future and hope you'll be able to attend. Thanks Lynn and Jerry, it was terrific!



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**We're on the WEB!**  
<http://www.ica.state.az.us>

**ADOSH ADVOCATE**

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*Violence -An Occupational Hazard for Home Healthcare Workers (Continued)*

**How can I prevent and control violence in a patient's home?**

In its document *Guidelines for Preventing Workplace Violence for Healthcare and Social Service Workers*, OSHA [2004] encourages employers to establish violence prevention programs and to track their progress in reducing work-related assaults. At a minimum, a violence prevention program should create a clear policy of zero tolerance for workplace violence, verbal and nonverbal threats and related actions.

**Recommendations for Employer**

- Develop a standard definition of workplace violence. Create a zero tolerance policy for workplace violence.
- Ask employees to report each incident, even if they think it won't happen again or it might not be serious.
- Develop a written plan for ensuring personal safety, reporting violence, and calling the police.
- Conduct training on the workplace violence plan when the employee is hired and annually thereafter.
- Let workers know about the risks of their assignments and how to assess the safety of their work environment and its surroundings.
- Train employees to recognize verbal abuse.
- Train employees to identify different types of illegal drugs and drug paraphernalia.
- Train employees to recognize the signs and body language associated with violent assault and how to manage or prevent violent behavior, such as verbal de-escalation techniques, management of angry patients, recognizing and protecting themselves from gangs and gang behavior. Investigate all reports of a dangerous work environment and of violent assault.
- Analyze reports of violent assault, and use them for revising safety procedures.
  - Do not place workers in assignments that compromise safety.

Before initiating each home health service, consider the following steps:

- Check with the local police station about the safety of the location

— Obtain consultation in the case of patients with psychiatric illnesses for an assessment of the potential for violent behavior.

— Have a social worker evaluate the family and home situation.

— Provide security or police support if needed [Kendra et al. 1996; Jarrell 1997].

- Keep close track of staff members' schedules.
- In the case of an unacceptable home environment, advise the patient on working with social service agencies, the local police department, or family members and neighbors to make the home less hazardous so care can continue
- Provide cell phones to all staff on duty. Reports of surveys and focus groups indicate that home healthcare workers consider cell phones to be lifelines [NIOSH 1999].
- Consider other equipment, such as employer-supplied vehicles, emergency alarms, two-way radios, and personal bright flashlights to enhance safety [NIOSH 1999; Fazzone et al. 2000].
- Establish a no-weapons policy in patient homes.
- If such a policy is not required, request at a minimum that, before service is provided, all weapons be disabled, removed from the area where care is provided, and stored in a secure location.

**Recommendation for Workers**

- If possible, visits in high-crime areas should be scheduled during daylight hours.
- Consider working in pairs in high-crime areas.
- Always know where you are going. Have accurate directions to the house or apartment.
- Always let your employer know where you are and when to expect you to report back.
- When driving alone, have the car windows rolled up and doors locked.
- Park the car in a well-lighted area.
- Park in an area away from large trees or shrubs that a person could hide behind.
- Keep healthcare equipment, supplies, and personal belongings locked out of sight in the trunk of the vehicle.
- Before getting out of the car, check the surrounding location and activity. If you feel uneasy, do not get out of the car.

• During the visit, use basic safety precautions:

— Be alert.

— Evaluate each situation for possible violence.

— Watch for signals of impending violent assault, such as verbally expressed anger and frustration, threatening gestures, signs of drugs or alcohol abuse, or the presence of weapons.

• Maintain behavior that helps to diffuse anger:

- Present a calm, caring attitude.

- Do not match threats.

- Do not give orders.

- Acknowledge the person's feelings.

- Avoid behaviors that may be interpreted as aggressive (for example, moving rapidly or getting too close, touching unnecessarily, or speaking loudly).

- If possible, keep an open pathway for exiting.

- Trust your own judgment; avoid situations that don't feel right.

- If you cannot gain control of the situation, take these steps:

- Shorten the visit. Remove yourself from the situation.

- If you feel threatened, leave immediately.

- Use your cell phone to call your employer

- or 911 for help (depending on the severity of the situation).

- Report any incident of violence to your employer.

- Notify your employer if you observe a weapon in the patient's home.

- If you notice strong chemical odors or suspect that there's a drug lab in the area, notify the local police and your employer.

- If someone approaches you looking for ephedrine or pseudoephedrine, notify the local police and your employer.

- If someone approaches you looking for needles, notify your employer.

- If you are being verbally abused, ask the abuser to stop the conversation.

- If the abuser does not stop the conversation, leave the premises and notify your employer.

*More information regarding the occupational hazards of Home Healthcare Workers and Violence in the Workplace Prevention can be found at [www.cdc.gov](http://www.cdc.gov).*

