

## PARTNERS has a new look!

A Note from  
the Editor:

I am exceptionally pleased to announce that **PARTNERS** has a new electronic format and will be published six rather than four times a year.



Now in its 15th year of publication, **PARTNERS** will continue to feature articles and news briefs on legal and regulatory issues, workplace health and safety management strategies, model provider-employer partnerships and other topics of interest to employers and their medical provider partners.

As always, I appreciate your interest and look forward to hearing from you.

Sincerely,  
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## It Pays to Keep Older Workers

By Karen O'Hara

Let's face it. As we age, we aren't as spry as we used to be. But that doesn't mean we can't be productive at work.

Because of the natural aging process, older workers are more likely than younger workers to develop chronic conditions such as diabetes, arthritis and hypertension. Older workers may experience decreased stamina and strength, as well as deteriorating eyesight and/or hearing.

However, in exchange for these prospective limitations, studies show that companies gain considerable benefits from the knowledge and expertise of older workers. In a recent AARP survey of 1,055 executives, 79 percent of respondents agreed their business is likely to suffer financially as baby-boomers reach retirement age, and 74 percent said it is getting harder to find and retain qualified employees. While early retirement as a cost-containment measure may be losing some of its appeal, only 16 percent of respondents said they have adopted formal policies to encourage the retention of valued older workers.

### Healthy Behavior

As the population ages, so must employers' attitudes toward prevention and wellness in the workplace, regardless of the average age in a given workforce, experts say.

One solution for employers is to partner with occupational health professionals who are familiar with prevention and health intervention tools such as physical screening exams, functional capacity assessments and health risk surveys. Armed with information about health risks among workers, companies and their provider partners can develop corresponding health and safety interventions, disease management programs and work modifications designed to safely and legally address performance limitations, absence and disability.

Dennis Downing, president of Future Industrial Technologies, Inc., which provides workplace safety and ergonomic training programs to employers, suggests that the optimal solution is to give older employees "the means to stay healthy so they can remain contributors to the organization versus being seen as a liability." For example, he said education on body mechanics, correct positioning and stretching exercises can help older workers avoid work-related injuries.

"Body mechanics, posture, etc. cannot be forced behaviors," he said. "Employees must come to the realization that discomfort and pain is

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## Diabetics' Co-Pay Waived

University of Michigan (U-M) employees and dependents with diabetes are eligible for free medications under a pilot program called *MHealthy: Focus on Diabetes*. The program is believed to be the first in the nation specifically designed to evaluate the impact of a targeted co-pay reduction for preventive medications. The co-pay is waived for certain drugs that control blood sugar, lower blood pressure, cut the risk of heart and kidney problems, and ease depression. Co-pays for other drugs in the same classes are reduced by 50 percent or 25 percent. Over the next two years, U-M will evaluate how well the program is doing by comparing pilot program results to results from a group of non-U-M employees with diabetes who will receive educational materials but no co-pay reduction.



## Back Support for Drivers

Lumbar support for the lower back is a routine recommendation for relieving back pain while driving. However, Dennis Zacharkow, P.T., maintains that the solution to drivers' back pain is to properly stabilize the pelvis and rib cage while leaving the lower back unsupported. He has developed a concept called sacral-lower thoracic support: One support is positioned just below the lower back against the sacrum to stabilize the pelvis and a second support is positioned just be-

low the shoulder blades against the lower part of the thoracic spine. Lower thoracic support is the key to relieving upper back and neck pain and reducing downward pressure on the lower back, he said. He has applied the concept to the design of a multi-adjustable dual back support cushion sold as YogaBack.™

## Cancer Screening Advised

Colorectal cancer is the second leading cause of cancer-related death in the United States, but the majority of people at risk are not being screened. The U.S. Preventive Services Task Force recommends initial screening for men and women over 50. The estimated cost-effectiveness of offering patients a choice of screening options exceeds \$12,000 per year of life gained, and studies indicate 18,800 deaths could be prevented annually.

# Resource Directory

**Fatigue in the U.S. Workforce: Prevalence and Implications for Lost Productive Work Time;** study finds that nearly 40 percent of U.S. workers experience fatigue, a problem that carries billions of dollars in costs from lost productivity; Judith A. Ricci, ScD, MS, et al; *Journal of Occupational and Environmental Medicine*, Vol. 49, Issue 1, January 2007.

**Get Informed. Get Diagnosed. Get Help;** U.S. Centers for Disease Control and Prevention national public education and awareness campaign on chronic fatigue syndrome; [www.cdc.gov/cfs](http://www.cdc.gov/cfs).

**Suggested Areas for Oversight for the 110th Congress;** according to the Government Accountability Office, regulations and activities designed to provide protections for workers may need to be revised to reflect dramatic changes in the demographics of the national workforce and changes in the nature of work itself; [www.gao.gov/cgi-bin](http://www.gao.gov/cgi-bin).

**WISER** (Wireless Information System for Emergency Responders); updated system for first responders in hazardous material incidents; <http://wiser.nlm.nih.gov>.

**Older Workers:** Continued from Page 1 not just the result of aging," Downing said. "It is the result of lack of education of what causes our bodies to accumulate physical stress in our neck, shoulders, backs and wrists, and how to prevent and alleviate any retained physical stress."

According to the U.S. Administration on Aging, it has been conclusively proven that with appropriate training and support, we can be active participants in our own health maintenance.

## Resources

AARP: [www.aarp.org](http://www.aarp.org)

Administration on Aging: [www.aoa.gov](http://www.aoa.gov)

Future Industrial Technologies: [www.backsafe.com](http://www.backsafe.com)

# PARTNERS

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# Safety Management Systems Support Consistency, Compliance

By **Todd A. Brehe**

Many companies recognize comprehensive workplace safety management as a logical and effective way to protect their employees, comply with regulations and cut costs.

A key component in safety management is a software system that can be used to record, manage and analyze safety-related data. With an effective system, the safety team can see exactly where accidents and unsafe situations are occurring and take steps to minimize them.

A safety system should standardize a company's safety operations and encourage accountability throughout the safety investigation process. In addition, it should seamlessly handle compliance requirements and be versatile enough to adapt as rules change.

There are numerous systems and approaches safety professionals use to manage their day-to-day activities, including the use of paper forms, Microsoft Excel spreadsheets and single-purpose software applications. These approaches are adequate – though limited – if the number of safety issues that arise is relatively low. However, when there is a higher volume of incidents and interaction among multiple people and departments is necessary, a more sophisticated approach is recommended.

A safety management system brings consistency to operations, and when processes can be easily replicated, they can be methodically improved.

## Benefits of Comprehensive Application

A truly comprehensive software product should offer a variety of occupational health, safety and environmental capabilities in a single system. Data from one area (e.g. employee health/medical) should flow seamlessly to other areas (e.g. safety, case management, etc.) to reduce redundant data entry and improve data integrity. It should support geographically dispersed operations, yet be centrally managed.

To encourage staff accountability, many systems offer configurable e-mail notification capabilities in which there is a clear sequence of events. For example, when

### A Note About OHSAS 18001

OHSAS 18001, the Occupational Health & Safety Assessment Series, is similar in nature to ISO9001 and ISO14001 management systems standards. The series is applicable to any organization that wishes to establish a system to minimize exposure risks. Visit [www.ohsas-18001-occupational-health-and-safety.com](http://www.ohsas-18001-occupational-health-and-safety.com).

## Software Enables Safety Activities

Optimally, a safety management software system is capable of supporting the following activities:

1. Standardize safety management practices.
2. Automate the safety investigation and compliance reporting process.
3. Encourage accountability.
4. Enhance communication and sharing of *appropriate* data among supervisors, managers, safety professionals, medical staff and others.
5. Collect data and conduct investigations on incidents, near-misses, unsafe actions and conditions, and causal factors that lead to workplace injuries and accidents on the job.
6. Determine recordability of workplace injuries; generate OSHA 300, 300A, and 301 Logs and track incident rates.
7. Assign and manage corrective actions.
8. Conduct job safety analyses and develop specific descriptions of job-related tasks, associated hazards and suggested controls.
9. Help place employees in jobs suitable to their work restrictions.
10. Report on key safety metrics and trends.

an employee is injured, the medical team initiates the accident investigation process by sending an e-mail notification to the employee's supervisor. The supervisor then enters relevant information into the accident investigation form and submits it to his manager for review and action.

## Conclusion

To simplify and manage an organization's safety operations, identify and eliminate dangerous situations, and make your job sites safer, it is advisable to consider the use of an integrated safety management application. A versatile system helps safety professionals perform their daily duties more efficiently and gives them the information they need to make sound decisions that ultimately improve employee health.

Todd A. Brehe is Sales Manager for OHM/Unique Software Solutions, Inc., developer of the Occupational Health Manager™ system, which is designed to help organizations track, record and analyze employee health data for the purpose of improving workplace safety. Visit [www.OHMSoftware.com](http://www.OHMSoftware.com).

## Avian Flu

The federal Occupational Safety and Health Administration (OSHA) has



updated its guidelines for the prevention of occupational exposure to avian flu viruses. The new guidelines apply to specific workers, including those who handle poultry and other animals, laboratory employees, health care personnel, food service workers and U.S. employees stationed abroad. Visit [www.osha.gov](http://www.osha.gov).

## Demolition Safety

The American National Standard Institute (ANSI) has revised its standard on Safety Requirements for Demolition for Construction and Demolition Operations (A10.6-2006). The revised standard contains minimum requirements to protect employees and the public and prevent property damage that may occur during demolition operations.

## Injury Rates Decline

The rate of workplace injuries and illnesses in private industry that required recuperation away from work declined 4 percent in 2005, according to the latest update from the Bureau of Labor Statistics. About 1.2 million injuries and illnesses requiring days away from work occurred in 2005, relatively unchanged from 2004. Median days away from work – a key measure of the severity of the injury or illness – was seven days for all cases in 2005, the same as 2004. Visit [www.bls.gov/iif/home.htm](http://www.bls.gov/iif/home.htm).

## OSHA Log Summary Posted

Employers are required by OSHA to post a summary of the to-

tal number of job-related injuries and illnesses that occurred in their workplace in 2006. The summary (OSHA form 300A) must be posted in a common area and made available to off-site employees until April 30.

## Phones, Driving Don't Mix

The National Transportation Safety Board has recommended that regulatory bodies prohibit bus drivers from using cell phones while driving, except in emergencies. The board also has advised bus driver associations to develop cell phone use policies for their members. Visit [www.nts.gov](http://www.nts.gov) (click on publications).

## SAMSHA In; NIDA Out

As a result of a major reorganization within the U.S. Department of Health and Human Services (HHS), drug testing laboratories certified under the National Laboratory Certification Program are no longer referred to as National Institute on Drug Abuse (NIDA)-certified. Instead, they are now referred to as Substance Abuse and Mental Health Services Administration (SAMHSA)-certified or HHS-certified laboratories. Additionally, according to SAMHSA, it is no longer appropriate to use the term NIDA-5 panel. The correct term is either the SAMHSA-5 or the HHS-5 drug test panel.

## Supervisor Defined

The National Labor Relations Board (NLRB) has clarified and expanded the definition of "supervisor" under the National Labor Relations Act. The decision is considered favorable for management in labor relations matters because it will exclude more employees from union bargaining units. The NLRB's definition has been used as the basis for

defining supervisory authority under other statutes, such as Title VII, Sarbanes-Oxley and, in California, the Fair Employment and Housing Act. (Refer to Oakwood Healthcare, Inc., 348 NLRB No. 37, Golden Crest Health Care Center, 348 NLRB No. 39, and Croft Metals Inc., 348 NLRB No. 38, September 2006.)

## Work Safety Legislation

Rep. John Conyers, D-MI, has introduced the Nurse and Patient Safety & Protection Act of 2007. The legislation would require health care facilities to use safe-lift mechanical devices, obtain input from registered nurses in implementing the standard, and track and report injuries. Another bill, by Rep. Gene Green, D-Texas, would direct the Secretary of Labor to revise record-keeping standards (29 CFR 1904) to require employers to keep a log of all recordable injuries and illnesses occurring at a particular worksite, whether the injured employees are employed, contract workers or temporary or leased employees.



## 'Wal-Mart Law' Rebuffed

An appellate court in Baltimore upheld a lower court ruling that Maryland's Fair Share Health Care law violates the Employee Retirement Income Security Act (ERISA). The law requires any employer with more than 10,000 employees in the state to spend 8 percent of its payroll on health insurance, or pay the difference into a state fund. Wal-Mart is the only employer in the state to which the law applies.