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Support Safety with Social Media

With recent surveys uncovering statistics such as “Internet users spent almost 25% of their time online using social media” and “U.S. workers spend about five hours a month using social media while at work,” have you considered the potential value of using social media to provide and reinforce safety training and to give employees a ready reservoir of processes, tips and techniques?

According to training experts, employees often forget what they’ve learned in training unless they use it right away on the job or have some



kind of intervention to refresh their memory. Social networking tools can help keep the information fresh in learners’ minds

(e.g., looking up information on a site, asking a question in a discussion forum, or reading additional content on a blog).

Use your company’s Facebook, Twitter and e-mail accounts to communicate solid, helpful reminders or to post new information on safety each morning. A quick note

can bring best practices right to the top of your workers’ minds and can create a culture of safety awareness.

Free Workplace Safety Ideas

While good workplace safety ideas can spring up at any time, employers seeking the latest and best practices can turn to the Internet for free help. Here are three websites that are offered by the federal government to help you make your business a safer place to work:

www.bls.gov Bureau of Labor and Statistics

This is an excellent resource for information on common types of injuries and incidents categorized by industry. Employers can compare individual loss ratios to industry standards and can research

methods of improvement.

www.dol.gov U.S. Department of Labor Research information on state labor laws, including workers compensation. Research loss prevention resources, such as drug-free workplace programs and other safety programs suggested by industry experts.

www.osha.gov Occupational Safety and Health Administration

Access various OSHA data, including standards, violations and inspections. Review key information on adhering to OSHA guidelines and minimizing risk of injury and/or penalty.

HHS Updates Carcinogen List



The U.S. Department of Health and Human Services recently released an updated list of carcinogens in the workplace.

The Department's 12th Report on Carcinogens (RoC) updates information for eight types of chemicals often found on job-sites, and OSHA has suggested that employers who make, distribute or use any chemicals on the list determine the impact, if any, on their hazard communication (HazCom) programs.

Newly added to the list of human carcinogens are formaldehyde and aristolochic acids, while six other substances are now considered highly probable to be cancer-causing: captafol, cobalt-tungsten carbide, certain inhalable glass wool fibers, o-nitrotoluene, riddelliine, and styrene.

For a copy of the complete report, go to <http://ntp.niehs.nih.gov/ntp/roc/twelfth/roc12.pdf>.

Guard the Edge

The National Institute for Occupational Safety and Health (NIOSH) has found that falls-from-elevation hazards are present at almost every jobsite and that many workers are exposed to these hazards daily.

These exposures exist in many forms and can be as seemingly innocuous as changing a light bulb from a stepladder to something as high risk as connecting bolts on steel while 200 feet in the air.

Falls are a common cause of worker injuries and compensation claims. Based on data from the NIOSH National Traumatic Occupational Fatalities (NTOF) Surveillance System, falls from

elevations were the fourth leading cause of workplace death from 1980 through 1994. The 8,102 deaths due to falls from elevations accounted for 10% of all occupational fatalities during this period and an average of 540 deaths per year.

NIOSH recommends that any side or edge that is six feet or more above a lower level should be protected by the use of a guardrail, safety net, or personal fall arrest system. Six feet is not what many employers consider "scaling the heights," yet prevention and minimizing these often-overlooked exposures can have a major impact on your workers compensation experience and costs.

Painkillers Over-Prescribed in Workers Comp

If you have an injured employee who is prescribed painkillers as part of the workers compensation treatment process, you should pay particular attention to both the claim and the worker.

Use of narcotic pain control medications has skyrocketed, and abuse of prescription drugs is at about 6% nationwide.

Between 1998 and 2008, the use of Schedule II opioids—including Oxycodone, fentanyl citrate, morphine, methadone, hydromorphone and oxymorphone—increased by 380%. In some states, clinics that specialize in prescribing these medications under workers compensation claims are common. Claims for minor

back injury and subsequent issuing of narcotic prescriptions have been on the increase.

Signs that something is amiss can include the use of multiple doctors for prescriptions, attendance problems at work after the injury has healed, and "dopey" behavior on the job. If your employee is under a return-to-work program while on such medications, you may have the makings of another injury. Involve yourself in the claim and the employee's recovery process, and make sure workers who are being prescribed narcotics are treated properly and don't pose a risk to themselves and others when they return to the jobsite.

Your insurance carrier will work with you, so go to them with any concerns you have regarding the use or suspected abuse of narcotic pain relievers in your workers comp claims.



Prevent Head Injuries

Head injuries are receiving greater attention these days, and rightly so: They can be deadly.

The majority of impact injuries do not occur because of non-routine job functions. They occur because the job or tasks are not adequately assessed for potential head hazards or because the employee is not wearing the head protection the company and the job require.

Bumps, scrapes and bruises to the head requiring stitches or staples can occur when a worker walks into a solid object. This risk can be reduced by evaluating the workplace for any low-hanging objects in your normal work or walking area. These bump hazards include pipes, steel structures, or machinery components.



Electrical conductors are a primary cause of head injuries. Employees potentially exposed to this risk include power line workers, electricians on construction sites, and

maintenance staff in general industry. Workers could suffer severe electrical shock or burns if not wearing appropriate head protection when operating around exposed electrical conductors. Make sure the proper head protection is selected for the work being done and the voltage to which workers are exposed.

Look for areas where employees are working below other employees or other work activities. A tool, part, bolt, piece of metal, or other object could fall and strike the heads of those below. Enforce head protection requirements and make hazard awareness reminders part of a daily worksite review.

Texting Thumb

Tendonitis, swelling and throbbing hands are not just symptoms of age or heavy lifting. They are conditions reported by over-users of personal digital assistants (PDAs). And such repetitive-motion injuries regularly lead to medical treatments, lost work and workers compensation claims. They can affect the hands, wrists, forearms, shoulders, upper back and neck.

Since more employers are issuing and even requiring the use of these devices, safety programs should include training about

proper handling and minimizing exposure to injury. These programs should include sensible advice, such as use of time, recognition of and response to discomfort, and safe driving habits. They might also offer advice on exercising and stretching the hands to minimize the chances of repetitive stress injuries.

It may sound somewhat like a joke that workers compensation would cover texting thumb, but when you see claims mounting, you won't be laughing. Recognize

the symptoms and alert your employees. Signs of injury include pain and numbness at the base of the thumb, tingling and numbness in the hand or joints, achy elbows, shoulder or neck pain.

Chronic misuse or over-use can result in carpal tunnel syndrome, which can require surgery; aggravate de Quervain's tenosynovitis, which is treated with medications, physical therapy and sometimes surgery; or promote debilitating arthritis, which can segue into disability claims.

**Thank you for
your referral.**

If you're pleased with us,
spread the word! We'll be
happy to give the same great
service to all of your friends
and business associates

Don't Delay Reporting

Timely reporting of workers compensation claims is a requirement in every jurisdiction. In some states, lack of a timely report can cause the employer to lose any defense against an employee-reported claim, even for questionable claims. The tardy employer may be barred from making otherwise reasonable assertions that the injury was not work-related or from contesting that the injury actually occurred.

In some cases, employers take a wait-and-see approach, thinking that time will heal the wound or that symptoms will lessen over the course of a week or so. Even if the employee is the one making such suggestions, don't be slow in reporting an incident. More serious problems that are hidden could be exacerbated by delayed treatment.

Every jurisdiction has its own "timely" requirements. Our workers compensation professionals will be glad to fill you in on the specific provisions that apply to your workplace(s).