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Education and Training Hospital Staff

The following is an excerpt from the HCPro book, The Hospital Safety Professional's Handbook, Fifth Edition.

One of the most important components of an effective safety program is education and training, as the program itself is only as effective as the strength of this crucial component. It is virtually impossible to ensure that employees can work safely and comply with safety requirements in the absence of an effective safety education process.

From a common sense and regulatory compliance standpoint, employees need to receive education regarding the hazards associated with their environment and their jobs from the moment they become employees. Some of this education comes in the form of didactic presentations, while other aspects of this education require a hands-on approach to learning. Sometimes it is a combination of the two; for example, many organizations cover fire response education early on in the orientation process, but due to the amount of material to be covered in these initial sessions and the number of people in the program, some elements (e.g., actual activation of a fire extinguisher or a fire alarm pull station) may be deferred to a later date.



You will probably find that much of the hands-on activity will occur once an employee gets to orientation at the department level. The best way to ensure that employees reach an understanding of the required practices and processes is to provide hands-on educational activities in the environment in which the work will occur. Showing employees how to perform certain tasks properly in their own environment, while teaching them how to avoid injury to themselves or others, will help employees retain what they've just learned.

Ultimately, employees need to be familiar with those techniques that ensure safety as they perform their jobs.

From the demonstration of proper lifting techniques to education on how to properly use personal protective equipment, thoughtful demonstrations of safe practices are of paramount importance. Along with those safe practices, you must also ensure that employees possess an understanding of the risks involved with their job and the ways that safe practice protects them. It is also important to inform staff that sometimes these risks need to be managed proactively, as in the practice of standard (formerly universal) precautions, in which all patients are considered to be infectious until proven otherwise.

Ultimately, employees need to be familiar with those techniques that ensure safety as they perform their jobs. In addition, they need to understand how those techniques are designed to manage the associated risks.

Continued on Page 2

Safety Education

As noted previously, safety education should begin from the moment employees report for the first day of work and continue for as long as they are employed by the organization. Your educational programs should start with an overview of the entire safety program and its implementation across the organization. This overview should provide information on what the new employees need to know in order to work at the hospital and serve as an active part of the organization, including the expectations of staff in their role in the safety program. At a minimum, the employee should take from the initial session the sense of how serious their compliance with the program is viewed, both by you as the safety professional and by the hospital's administration. In addition, you should both have some sense of how to summon help if you find yourselves in an emergent situation, regardless of its nature.

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Again, due to the amount of material that must be covered during orientation, the time that you will spend with the orientees will be fairly limited and will usually allow you only enough time to provide the participants with the minimum information needed to work safely. New employees are provided with so much information at orientation, from outlining salary, benefits, and insurance to safety, infection control, immunization document requests, etc., it is difficult for staff to remember everything that is provided during the orientation process. Include written documents that the new employee can take with them once they leave orientation that will allow them to reference back to issues when the need arises. Make sure you include the basic outline of the safety program, as well as your organization's emergency codes and telephone numbers staff will need to summon assistance in an emergency. Also, it is important to explain to new employees what they can expect with their department-level orientation, as well as ways to access additional training.



Next Level of Training

By necessity, the next step of the education process must be administered in coordination with department managers and supervisors. Ideally, this critical training will occur within the first few days of employment. At a minimum, you will need the assistance of department leaders in ensuring that the orientees complete this next level of training, which consists primarily of the hands-on activities previously mentioned. The following topics should be included:

- Fire safety (e.g., egress routes, locations of fire alarm pull stations, fire extinguishers)
- Fire extinguisher use
- Review and explanation of the organization's hazard communication program
- Respirator fit-testing and training for employees with occupational exposure risks
- Workplace violence prevention

This next level of education should also include information reflective of the specific tasks employees might perform. For example, new laboratory personnel will need additional instruction regarding the safe use and handling of chemicals (including the risks inherent in their use), whereas staff in materials management and clinicians should receive instruction in the use of safe lifting techniques. There will be some groups of employees who will require education regarding special requirements of the environment in which they will be working. For example, staff working on the maternity unit or in behavioral health will require education on the special safety requirements of their unit (e.g., abduction of an infant or an eloped patient).

It is important to identify a means of tracking employee participation in the safety education process. During a

Education and Training Hospital Staff - continued

survey, Joint Commission surveyors will review personnel files to determine how staff competencies are maintained and evaluated; they will review safety competency, frequently choosing the files of staff members they encounter during patient care and other survey activities. Safety education data should be maintained in a central location in the organization in such a way that department managers can use that data in the evaluation of staff competencies. This central point is commonly human resources or through a computerized learning management system.

Repeat Training Annually

Once the initial safety education process is completed, it must be repeated on an ongoing basis, i.e., annually or on another schedule as determined by regulation or your organization, and individual participation should be clearly linked to the performance evaluation and salary increase process. The responsibility for ensuring that each employee participates in the safety education program is shared between the individual employee and his or her department manager or supervisor. Your responsibility is to ensure that the education program is readily available and that the content is reflective of current conditions and practices. This availability must include a means of reaching staff on all shifts, including weekends, and part-time/per diem employees.

There are a number of methods you can employ to reach your constituents, from sessions conducted during department meetings to safety fairs. A method that is becoming increasingly popular is the use of Web-based programs, which allow participation by employees as their schedules permit. This is sometimes viewed as the simplest training method, as it generally cuts down on the amount of time managers devote to following up on noncompliant staff. However, to be truly effective, it requires a great deal of work on the part of the safety professional in order to ensure that the content is relevant and specific to the

organization at the time the program is developed and then on an ongoing basis. Prefabricated programs are generally less than adequate without a fair amount of customization, as they tend not to take into account that everyone learns and trains differently. No matter which methods of teaching you use, remember to identify a means for timely response to staff questions regarding the educational materials.

Educating Staff

Any successful safety program depends on an effective process of employee education. The process of teaching and explaining policies and procedures to frontline workers while maintaining interest is extremely important.

As you cover the applicable materials during education sessions, it is important to point out that the organization's safety policies and procedures were not developed in a vacuum but rather were created with the goal of linking the hospital's everyday practices with the requirements of the applicable regulatory standards. The result is a process that is designed not to make everyday tasks more difficult but to ensure that those tasks are carried out in the safest and healthiest way possible.

These sessions should involve a brief discussion of the background and rationale behind the development of the materials being reviewed. Try to limit recitation of the policies and associated requirements, and focus rather on the dynamic role that the staff plays in everyday activities. Using fire safety as an example, it is important that staff members understand whether they can safely evacuate into an adjacent smoke compartment during a fire or whether evacuation of the entire building is in order. In all likelihood, you will have audiences for which each would be the correct first response; explaining why the logic for either action is appropriate helps staff understand what actions they should take and why they should take them. This understanding will assist in their decision-making process during both an emergency and during the normal workday.

Identifying the Key Element of Your Program

Some elements of your program are easy to identify because they are mandated by federal authorities, such as the Occupational Safety and Health Administration



(OSHA) or the Environmental Protection Agency (EPA). There are other safety education elements that may not be mandated by any agency but should, in all honesty, be included in your safety education program. But how can you identify these?



To a large degree, the basic components of safety education in healthcare are no different from those elements found in other industries, as many of the general risks present in healthcare (e.g., fire, chemical exposure, musculoskeletal injuries, and slips, trips, and falls) can be found in many work environments.

The dynamic changes a bit when you introduce the management of patients into the equation; the practices and techniques used to safely manage the risks associated with patients are unique to healthcare. Of course, your safety education program must reflect the specific needs of the hospital, as well as the specific risks your employees must manage. For example, if your facility has confined spaces, include this in your education program, even if it's only to identify their locations. If you have staff members who will need to enter confined spaces, the educational requirements will be significantly greater. If your facility has aboveground or underground storage tanks for fuel oil or jet fuel, you will need to provide educational programs for the employees who work with these tanks.

Then there are those programmatic elements that are virtually universal in all industries: fire safety, hazard communication, and emergency preparedness and response. There are also the other elements prevalent in healthcare: bloodborne pathogens, tuberculosis, and knowledge of regulated medical waste, to name a few. Ultimately, as you move through your risk assessment process, you will review occurrence and injury reports or the results of hazard surveillance rounds. As you conduct this review,

you'll probably notice that OSHA, EPA, and The Joint Commission educational requirements form only the basis of your program. At this point, you will begin to identify those other tasks that will require additional or focused education.

Testing the Effectiveness of Your Safety Education Program

Providing safety education is only half the job. The other half is to make sure that people understand what they have been taught and then put that into practice. But how do you measure this?

Of course, one method is to test people after the course has been completed. Safety quizzes are not uncommon, although I've found that over time, the only information you gather through this process reflects an individual's ability to recognize the correct answer when he or she sees it. Other ways of measuring success are somewhat less objective but can provide some level of efficacy. One involves a combination of two different techniques: observation of employees performing their jobs before and after they have been trained and subsequent review of occurrence reports (this will reflect the types of problems that may be found throughout the hospital). A third method is direct observation and querying of staff during safety activities, such as hazard surveillance rounds and fire drills. This type of measurement is preferred, as it most closely resembles the experiences of a regulatory survey; surveyors expect you to know what you are doing, and they want to be sure staff members are appropriately knowledgeable and skilled.

Often, follow-up investigation of an occurrence will highlight the point, or failure mode, at which the safety education process did not quite make the grade; other times, it will reveal the existence of unsafe practices on the part of an employee or group of employees. The goal of this process is not to lay blame but to ensure that the education process is appropriately devised. In most cases, your staff does not set out to act in an unsafe manner. Rather, it is more likely that their understanding of the involved risks and strategies developed to manage those risks has not been well served by the education process. ■

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Employers, in their efforts to control workers' compensation claim cost, often go to great lengths to manage their safety program, provide medical management, and analyze data. Employers also often incorporate computer programs

with the latest technology in their quest for work comp cost control. All of this is good, but employers often overlook one of the simplest ways to control claim cost – staying in touch with the injured employee.

Work Comp Communication Should Start At Date of Hire

As a part of the new hire package, every employee should be told what to do in the case of an on-the-job injury, including how to report the injury to the employer and the requirement to continue the communications after the injury. This sets the stage for on-going communication with the employee when a work comp injury occurs. Communication with the injured employee is of utmost importance from the moment the injury occurs until the last aspect of the worker's compensation claim is concluded.

When an accident happens, the first focus should be on what are the immediate medical needs of the injured employee. Communication at this point should be limited to the question of what happens if immediate medical attention is needed. If the injury is severe, the workers' compensation coordinator or the employee's supervisor should accompany the injured employee to the emergency clinic or hospital. The work comp coordinator should contact the employee immediately following the initial doctor's visit to determine the diagnosis, the prognosis, the treatment plan and what the injured employee's work restrictions are.

Employees Hire Attorneys Due To Lack of Communication

The most needless way of dramatically increasing the cost of a workers' compensation claim is to ignore an injured employee, causing the employee to hire an attorney.

There are three primary reasons injured employees hire attorneys. They are conflict, fear and greed.

- **Conflict:** The injured employee gets into a dispute with either the employer or the adjuster. Conflict normally occurs when all necessary information about the claim handling process has not been provided to the employee. By communicating frequently and completely with the employee, conflict can be avoided.
- **Fear:** The employee is concerned about his/her future employment, his/her future income, and/or his/her ability to provide for his/her family.
- **Greed:** The employee sees the accident as a way to gouge the employer or insurer for some extra money.

When employers have on-going communication with injured employees, conflict and fear are greatly reduced or eliminated.

There is not a whole lot an employer can do about an employee's level of greed, but an employer can prevent most employees from hiring an attorney by staying in touch with them. When employers have on-going communication with injured employees, conflict and fear are greatly reduced or eliminated. The immediate contact after the first doctor's visit reassures the employee that the employer is concerned about the employee's wellbeing.

Continued on page 6

It also lets the employee know that the employer is keeping the employee's job for him/her and the employer wants the employee back at work when the employee is physically able to return to work. If the injured employee is not released to return to work following the initial medical provider visit, the employer must make a point of staying in touch with the injured employee. The injured employee can be instructed to phone the work comp coordinator following each doctor's visit to advise what the doctor's treatment plan is. Also, the employee should be reminded that he/she is still required to attend all employee/staff meetings if the employee is physically capable of doing so.



Regular Contact Reassures Employee They Are Still Wanted At Work

The work restrictions provided by the doctor should be reviewed and discussed with the employee. If at all possible, a transitional duty job within the boundaries of the work restrictions should be provided to the employee. The work comp

Employers should make staying in touch with the injured employees a central tenet of their work comp cost control program.

coordinator should also be in touch with the adjuster and the medical provider to be sure the adjuster and medical provider are aware a transitional duty job is being provided to the employee. On-going communications with the injured employee should continue for as long as the employee is off work, even with severe injuries where the employee is off for an extended period of time. By continuing regular contact with the injured employee, the employee is reassured that the employer does want him/her to return to work. Staying in touch maintains the employee's morale, builds rapport with the employee, keeps the employee from hiring an attorney and lowers the overall cost of the workers' compensation claim. ■

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