A Note from the Editor

Welcome to the December 2016 edition of the ASSE Energy Corridor Section Newsletter and Happy Holidays! I normally don’t put any first-person writing in our newsletter, but I thought I’d pass along a few things this month.

To begin, again, Happy Holidays! I personally love this time of the year and am always happy when it comes around. If you haven’t noticed, I’ve unfortunately missed putting out the last three months’ newsletters. I’ve been handling some serious medical conditions for my now one-year old son and myself while working and still seeking to do what I can for ‘the cause’ (i.e. – seeking to benefit the overall safety culture at work and at home). I’m certainly not writing this to seek sympathy but to let you know what’s been going on.

Thankfully, my son is now home from his 350-day stay in the PICU but I’m still working through my condition and the array of medication and side effects that come with it. That said, we’re all still on the playing field and the Section is definitely up to some great things!

Starting in January 2017, we’ll begin meeting at Spring Creek Barbeque off I-10 in Katy. Before that, we’ll have our holiday social. We’ve got some great information in this newsletter. We have some great speakers lined up at our meetings. As always, of course, we appreciate you being a part of the Section and everything you do to further ‘the cause’!

As always, we appreciate and look forward to your feedback, input and engagement. If you have any suggestions or recommendations that you’d like to see in our newsletter or at our meetings, please feel free to let us know. Our aim is to ensure our Section is as value-added as possible to you. Please let us know your thoughts!

Thank you for your dedication to safety! Thanks for reading and thanks for being a part of our Section. Collectively, we’re all making each workplace and each community safer – what better legacy could we ask for?

Cory Worden, M.S., CSHM, CSP, CHSP, ARM, REM, CESCO
Programming and Newsletter Chair, ASSE Energy Corridor Section
Get Involved!

- Are you a speaker?
- Are you a writer?
- Have an idea for the Section?
- Have a topic you’d like to see Addressed?
- Have something to share?

Let us know!

Please get in touch using our contact information above to let us know your thoughts. We’d love to hear from you!

Inclement Weather

With the continuing inclement weather situation in Houston and surrounding areas, the City of Houston has developed an Emergency Information Center available online.

This online resource contains important information on storm notifications, information, news and recovery information.

The City of Houston Emergency Information Center is located here.

Coming Up!

On December 8, 2016, the ASSE Energy Corridor Section is proud to welcome Dale Goss, CSP, to our podium to discuss his real-world experiences in transforming safety cultures in hospital settings. While Dale’s experiences as a consultant were in the healthcare setting, his lessons-learned are universal and are applicable in any industry. We’re excited to bring his presentation to you on December 8!

Holiday Social!

Please remember to Register by Friday, 12/9/16 to ensure enough food is prepared

At the last meeting....

From August to November of 2016, the ASSE Energy Corridor Section has hosted four fantastic speakers! In August, Norman Ritchie of the vPSI Group kicked off the fall with a dynamic presentation on his own brand of radical risk management. Norman is a world-renowned consultant and speaker and was great to have in-house for the August meeting. Following this, September’s meeting saw Jay Dave of Nice Solutions and his enlightening presentation on his Lean Six Sigma-enabling technology. With so many tools and resources available on the market, Jay was able to give us an up-close look at his methods. In October, Steve Williams
of ADSI gave a fantastic presentation on a topic that should always be on our minds – catastrophe and fatality prevention. With such an important topic, like Doug Rush’s presentation on the LaPorte DuPont chemical exposure, this is definitely worth revisiting on our Energy Corridor website in our resources section. Finally, in November, we were proud to host Ken Daigle of the ASSE Risk Assessment Institute and his discussion of their current happenings, events and outcomes. With so many great things happening in the ASSE community throughout the Section, Chapter, Region and nationally, it was awesome to hear about it straight from Ken.

ASSE Region III Professional Development Conference

The ASSE Region III Professional Development Conference was in San Antonio, TX from August 28-31, 2016. Located at the Grand Hyatt in San Antonio, the annual PDC was full of great engagement, communication, learning opportunities and networking! Very well put together and with great facilities and presenters, the PDC was definitely another outstanding event with great takeaways. Some of our Energy Corridor Section members were presenters and, speaking of which, some were also presenters at the Safety 2016 national conference in Atlanta in June. We’re proud of all of our presenters and are excited to see their work being recognized so broadly.

Safety Perspectives

Are Climate and Culture the Same Thing?

Do You Want Culture Change, or Just a Change in Climate?

Dave Tilbury, SHEP

A lot has been said over the last decade or so about culture growth and how to create it, or change it. Safety Professionals often find themselves in the middle of the struggle trying to define it and map a plan to accomplish whatever the current thinking is on an organization’s individual culture. Unfortunately, what sometimes occurs is a mistaken focus on climate instead of culture. What’s the difference you say? Simply put, climate is tied to worker perceptions about engagement and how they “feel” about the company (many safety culture perception surveys measure climate and call it culture). Frequently, this is driven by immediate supervision’s leadership style, workload, policies and how responsive they are to employee needs and well-being. Supervision’s attitude about this tends to change – often on a dime – according to what is
either urgent or important at the moment. Culture, however, is the shared beliefs and assumptions about the company’s expectations and values. It is reflected in what workers do automatically because the prevailing expectation is accepted by the worker. If behavior inconsistent with culture occurs, it is corrected by the influence of the expectation; not the direction of supervision.

Whereas both are critically important to the end goal – positive culture improvement – if they are misaligned, climate will almost always overshadow culture and act as a barrier to reaching the goal. Culture should always drive climate because culture is enduring and transcends changes in leadership, organizational challenges and changing goals. Climate is a matter of priority.

When you look at your culture, is what you’re seeing actually climate? The answer should reveal some key points about what your organization believes and values.

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Anatomy of a Program Development: Going Full Circle with Incident Prevention
Cory Worden, M.S., CSHM, CSP, CHSP, ARM, REM, CESCO

A workplace safety program requires diligence in the full circle of hazard identification, assessment and control. With this, controlling a hazard does not simply stop with the implementation of a physical hazard control such as an engineering control or a process such as an administrative control. For example, purchasing equipment to handle patients does not actually control the hazard; it simply provides the tool to do so. In another example, developing a donning and doffing procedure for highly infectious disease exposure prevention does not control the hazard – it simply provides the process by which to do so. However, to truly control a hazard, a full program development must take place complete with hazards being identified, assessed and controlled and with leading indicators to determine participation and compliance with expectations of safe behaviors and conditions as well as comprehensive follow-up to any incidents with the investigation findings transferred back into the hazard analysis to close the gaps. Without this full-circle program, no amount of post-incident investigations or metrics analyses will yield results in incident prevention. However, with this program in place, the guess-work can be removed from incident prevention; data points can be developed that will identify where and why safe behaviors and conditions do and don’t exist. With this, continual improvement can take place and all the comprehensive benefits of a safe workplace can be realized.

A Case Study
During 2014, a 1,500-employee community hospital – Hospital X for this article’s purposes – reached a crux point at which its recordable injury rate not only exceeded all other hospitals in its health system but also surpassed the Bureau of Labor Statistics healthcare average of 6.2 recordable injuries per 100 employees. Beginning its fiscal year with a Total Case Incident Rate (TCIR) of 7.1, Hospital X’s rate quickly rose to 8.7 within a month. The hospital’s challenge was not that it had a negative safety culture but that it had no defined
processes or precedents by which to develop one. With this, Hospital X began its journey using a defined, targeted, systematic and systemic safety management process.

The Safety Committee
Without a defined team to facilitate the safety program, it won’t happen. Even with Hospital X following The Joint Commission’s Environment of Care (EOC) outline and including workplace safety in its agenda, those five minutes at the EOC Meeting only allowed for a recitation of how many injuries had occurred during the prior reporting period. No discussion was made of how the injuries occurred, what was being done to prevent them from reoccurring or, worse, what was being done in real-time to validate and enforce expectations of safe behaviors and conditions. However, by developing a specific Workplace Safety Committee, a complete forum was dedicated to facilitating the program.

Hazard Analysis
With the Workplace Safety Committee in place, the hazard analysis allowed Hospital X to determine several key points. To begin, each department and its tasks was assessed to determine what hazards (Bloodborne Pathogens, Needlesticks/Sharps Injuries, Patient Handling, Slip/Trip/Fall, Workplace Violence, Disease Exposures, Chemicals, other?) exist and which employees are at risk for these hazards. Without this hazard analysis, nothing proactive can take place; instead, teams will simply be waiting for incidents to occur before attempting to mitigate them and trying to alter their safety cultures one incident at a time.

Hazard Controls
Knowing what hazards exist in each department and who’s at risk for them, Hospital X now had the precedent to determine what hazard controls were already in place and what hazard controls were needed. This gap analysis allowed for what hazards and risks were
still unaccounted for. Should no hazard control be in place, those employees were likely untrained to work safely with the hazard and likely had no clear expectations of safe behaviors and conditions set. However, with all hazards accounted for, all hazard controls (as per the Hierarchy of Controls) in place and all employees trained and equipped to work safely, the precedent for progress can be set; in short, employees can be set up for success.

**Information Program**

With all hazard controls in place, they can be communicated on a recurring and consistent basis. With this, employees can be reminded of safety expectations via hazard controls through forums such as newsletters, emails, meetings, safety huddles, coaching sessions, town hall meetings and many more. These communications are not a hazard control, per se, but allow for consistent and recurring reminders of the hazard controls that have already been implemented.

**Leading Indicators**

In the case of Hospital X, this is where progress began to be truly made. While hazard analyses, controls and information programs provide the pretense for safety, leading indicators actually provide validation as to whether employees are truly working safer than previously. Hospital X implemented a program by which each expected hazard control was translated into observable criteria (for example, if employees are expected to utilize patient handling equipment when handling a patient, the observation criteria asks if employees used the equipment when being observed). With this, each department was given a goal of observations each month; should these observation goals be reached, this indicates that the department is participating in the program. If the department doesn’t complete their observations, there’s no precedent for safety because they’re not even looking for hazards. However, with the observations complete, they can then be analyzed for safe behaviors. If 10/10 observations show the patient handling equipment being used, it can be reasonably expected that patient handling injuries will subside. However, if 10/10 observations show no equipment being used, more injuries can be expected. This same methodology can be used with inspections, safe conditions and regulatory compliance.

**Targeted Hazard Controls**

With the information derived from leading indicators, hazard controls can be targeted for improvements. For example, if observations show Personal Protective Equipment not being used, inquiries can be made as to why not. Was the PPE not available? Was it not accessible? Was it not conveniently placed? These questions must be answered to improve hazard control usages; without this information, not only will unsafe behaviors continue but employees will continue to believe leadership is not interested in bettering the situation, a dangerous cultural scenario.

**Lagging Indicators and Investigations**

At this point, Hospital X’s metrics (Key Performance Indicators) were no longer a guessing game to them or a mystery. While, in the past, the hospital wondered how and why its injury rate was so high, it could now definitively see through participation rates and safety
observations/inspections how and why injuries and exposures were occurring. Furthermore, in analyzing their lagging indicators, they could now see what injuries and exposures had fallen between the proverbial cracks and were able to further target hazard controls based on incident investigation findings. To this point, incident investigations now became Hospital X’s hybrid leading and lagging indicator. While investigations are, by nature, a lagging indicator pertaining to injuries or exposures that have already occurred, they also provide a clear leading indicator as to the diligence being paid to safety and incident prevention. For example, if 10 incidents occurred during the previous month but only 5 of them were investigated, this provides not only a clear indication that safety is not a value but it also means that the valuable information to be gained from these investigations is not known. If not known, nobody can use the information to prevent future incidents. Ultimately, every incident requires an investigation; with these investigations pertaining to incidents having already occurred, this is the least anyone can do.

**Full Circle**

With hazards known and hazard controls in place, communicated and with safe behaviors and conditions validated through leading indicators, Hospital X was able to get a fix on how and why its incident rate had gotten so high. Furthermore, by making sense of its lagging indicators and targeting them through investigations, the hospital was not only able to begin working towards safe behaviors and conditions but to also affect culture change through expectations of robust participation from each department in its safety processes. If each department is not expected to know its hazards, ensure hazard controls are in place, validate safe behaviors and conditions and investigate incidents, no ownership will take place. However, by extending ownership into empowerment through increased communication and engagement, safety can become exponential. Hospital X, while still working towards continual improvement, was able to begin this journey with sustainable results from 2014 to 2015; from this point, Hospital X continues its journey towards world-class safety, a journey without end.

**REMINDER – WE’RE MOVING IN 2017!**

Please join us for our 1<sup>st</sup> meeting at our new location:

**Spring Creek BBQ**
(2100 Katy Fwy; Katy, TX  77449)

January 12<sup>th</sup>, 2017

Stephen Gray, ASSE Region III VP, will be coming to give us an ASSE update!