

Risk Reporter

for Senior Living Communities

Summer
2010

Vol. 11
issue 2

A quarterly publication by Church Mutual Insurance Company



Back injuries cripple production, budgets

Back injuries continue to plague health care workers. According to the National Institute for Occupational Safety and Health (NIOSH), the direct and indirect costs associated with back pain in the health care environment add up to a whopping \$20 billion annually. It's certainly not for lack of information—there are myriad resources for preventing and treating back injuries. So why do they continue?

Here are a few critical insights on causes and some tips on how you can minimize their impact at your facility.

Why back injuries are a continuing problem

Resident weight gain

Americans are heavy and getting heavier. According to the National Center for Health Statistics, more than 34 percent of Americans are defined as obese (Body Mass Index of 30 or more), and 32.7 percent are overweight (BMI of 25-29.9). These extra pounds can make it increasingly challenging to care for residents safely.

Employee health issues

Working in the health care environment doesn't necessarily translate to better individual health.

"If a care provider is overweight, doesn't exercise or smokes, this will impede his or her ability to effectively deliver care and could increase the likelihood of injury," said John Childs, associate professor and director of research at the doctoral program in physical therapy at U.S. Army-Baylor University.

Problems associated with lifting people

There's no way around it—lifting a human body is an inherently risky task. It's typically not possible to apply the lifting recommendations suggested for static objects, you're often working in a limited space and there's little agreement on what proper body mechanics should be when it comes to lifting a person instead of an object.

In fact, although NIOSH has created a lifting equation for static objects (see sidebar), it specifically states that the equation should not be used for lifting people and that patient-handling tasks should be limited to 35 lbs. or less.

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(back strain)

Job stress

Employee stress often manifests itself in a surprising way—back pain.

“Studies have shown that if you are in a job with high demands (physical or cognitive) and also feel that you have little control over the job that you’ve got a recipe for high injury rates,” said Tom Waters, Ph.D., CPE, chief at NIOSH’s Division of Applied Research and Technology in Cincinnati, Ohio. “If you’re lifting in a stressful work environment, there’s evidence to show that you’re recruiting muscles you don’t need—and fighting against the muscles used to do the lift.”

High levels of medical intervention

“There’s a tendency to medically manage back injuries with x-rays, pain medications and the like,” Childs said. “Often this approach creates more problems than solutions. Plus people start to define themselves by their injury, and there’s a vicious cycle of avoiding tasks, which can eventually lead to a situation where a person is no longer able to perform their job.”

As the continuing rates of back injuries prove, it isn’t always easy to avoid back problems in the first place. Here are strategies that can help.

Pinpoint where and how injuries occur

Back injuries can happen anywhere, and lifting isn’t the only reason. “Prolonged sitting and standing are also causes,” Childs said. “Anytime you’re in a static position for long periods of time, you’re more likely to have problems.”

Track and trend where and how injuries happen at your facility, share this information with staff and put processes and procedures in place to limit injuries. “Put a zero tolerance policy into place for known causes of injury,” Childs recommended.

Educate employees on proper body mechanics

Offer back classes to help instill healthy habits. On-staff physical therapists are an excellent resource or bring in local experts to train your employees. Provide training to staff at all levels and update it regularly.

Give employees permission to do their job right

Create an environment where employees feel they can take the time to do a job safely and well. Encourage them to ask for help and to avoid performing tasks when they’re tired if that could compromise resident safety or their own.

“There’s been a trend toward 12-hour shifts, and that is flat-out exhausting,” Childs said. “Look at your data and see if you’re having more problems with these longer shifts.”

Try to lower job stress. For instance, don’t require mandatory overtime if possible—it’s been linked to back pain, while voluntary overtime has not.

Determine if lifts are appropriate

(Note: Not all senior living facilities can legally use lifts. The devices are regulated by the state in which you operate and your license level.)

“The typical AL resident requires help with 1.6 activities of daily living versus the nursing home average of six,” said Dave Kylo, executive director of the National Center for Assisted Living. “Plus only 19 percent of the population requires help with transfers, and these could be something as simple as needing a hand under the arm when rising.”

Site limitations and resident needs also can limit the effectiveness of lifts. “Many mechanical lifts are designed to operate with a hospital bed—not a regular bed,” Kylo said. “If you have people with cognitive limitations who don’t understand what the lift is, it could be very challenging to use one with them. As always, you need to balance employee and resident safety while honoring resident preferences and rights.”

If your state allows lifts, make sure they’re installed correctly and that staff is thoroughly trained on their proper use.

Return to work

Understand employees’ pain beliefs

In some cases what seems to be a fairly minor back injury can morph into a full-blown problem. This can happen because healing from a back injury isn’t just about the physical injury, it’s also about psychological and social factors.

When it comes to dealing with pain, people fall into two categories: those who confront pain and those who avoid it. Those who fall into the avoidance category—and also believe that returning to the work environment will increase their pain—are more likely to end up on long-term disability. And although 95 percent of workers with back pain return to work within a year, those who don’t account for roughly 65 percent of the total disability costs for all workers.

The Fear Avoidance Beliefs Questionnaire (FABQ) is a tool that can help pinpoint employee views—in fact, studies have shown that the FABQ score is the strongest predictor of whether an employee will have a successful return to work.

“In most cases if you promote a healthy, positive belief that all will be well, there’s a greater chance it will be,” Childs said. “But knowing someone’s FABQ score can show you who might need additional help to be successful.”

Provide on-site training and assistance

“Treat your employees like they’re ‘industrial athletes’ and provide the resources they need to avoid and treat an injury,” Childs said. “Create an environment of respect and trust, where employees feel valued. It will go a long way toward a faster and better recovery.”

- For more information** on back injury prevention, see: <http://www.bnl.gov/esh/shsd/PDF/Safepercent20Liftingpercent20andpercent20Carryingpercent20Techniques.pdf>
 American Nurses Association Handle With Care: <http://www.nursingworld.org/MainMenuCategories/OccupationalandEnvironmental/occupationalhealth/handlewithcare.aspx>
 For more information about FABQ and how to score it, go to: <https://www.cebp.nl/media/m121.pdf>
 For more information on safe lifting go to: www.churchmutual.com, “Safety Resources,” “Workplace Safety”



Managing Your Risks

Emergency Preparedness

As thunderstorms and other severe weather roll across the country throughout the summer and the hurricane season is knocking at the door, now is a good time to review or create, if necessary, your disaster preparedness plan.

Your plan needs to address the specific details of your operation as well as the threats based on your geographic location. Your plan for an emergency with short notice, such as a tornado, will be quite different from an emergency with advance notice, such as a hurricane.

The two main categories of a plan consist of shelter in place and evacuation. Which plan you will follow depends on the nature, scope and severity of the emergency and whether you can meet your residents' needs at your facility.

To follow a shelter-in-place plan, the emergency or threat must be temporary, and your facility must have the necessary backup systems to provide care for your residents. You need a supply of water and nonperishable food, a cell phone and a generator to provide power for essential appliances, such as refrigerators for medication storage and freezers in your kitchen, as well as other vital equipment.

Consider the amount of time you can shelter in place without power when stocking your supplies. What do you need for 1 to 12 hours, 24 hours and more. Contact your local emergency disaster planning agency or the fire department for additional guidelines.

Evacuating requires an entirely different plan. The first issue is transportation. Create a plan to address moving your residents, including vehicles and destination. If your facility doesn't have vehicles, you can contract with a transportation company or bus company.

Involve your entire staff when creating a plan, as they're likely to have ideas that will work well.

Once you have your plan, review it with your staff and practice. Make sure that all employees know exactly what their roles are during an emergency and ask for feedback after a drill.

For more information, go to www.churchmutual.com, click on "Safety Resources," then "Emergency Preparedness."

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Risk Control Manager

Seasonal Spotlight

Pinpoint, address causes of resident injuries

Resident injuries are an ongoing issue at senior living communities. This category represents 65 percent of all liability claims filed by customers of Church Mutual. With more residents aging in place, it's critical to take every practical step to address and avoid resident injuries. Here are some things that can help.

Hire the right employees—and keep them

"Employee stability and longevity are two of the most critical factors in creating a safe environment," said Jim McGovern, senior risk control representative with Church Mutual. "It takes years to develop and train an excellent staff. You need to hire the right people in the first place and then give them reasons to stay with your facility."

Form safety committees

To help ensure buy-in and a thorough understanding of your facility's safety challenges, include a member from each department on the committee and also include a resident representative. "Residents can offer a unique perspective on your facility's challenges and involving them helps communicate the expectation that they play a role in their own safety," McGovern said.

Schedule regular facility inspections. "Conduct department and cross-department checks," McGovern said. "A fresh set of eyes can be invaluable."

Track and trend all incidents

Critical elements to include in your incident report: who was involved in the incident; where it took place; elements of the immediate environment (lighting, trip hazards, floor plan); time of day and day of the week (this could point to understaffing issues); and resident information (vitals at the time of incident, any injuries caused by it, medications they were on, general health, last time they ate or drank anything).

"You must include near misses," McGovern said. "These are situations where you avoided an injury simply because you were lucky—and next time, you might not be."

Take a close look at both incident frequency and severity. A high level in either category means it's imperative to take a closer look. And share the results with staff.

In most facilities, falls top the incident list, and wet floors are a common cause. Minimize spill-related falls by instructing employees to deal with spills immediately. "Employees should clean the spill themselves—not just call maintenance," McGovern recommended.

Spills aren't the only cause of falls. One Church Mutual facility suffered a fatality because an outdoor ramp lacked a railing; at another, a resident was severely injured trying to get out of the facility van.

Invest in ongoing training

Use your monthly in-services to cover topics that are areas of concern for your facility. "A physical therapist can demonstrate proper lifting and transfers; a pharmacist can help with medication management," McGovern said.

Q | A

A Perspective

In 2002, Owen Gahagan Jr., owner and CEO of Rockhill Manor in Kansas City, Mo., was battling turnover rates of more than 200 percent. He had tried pay raises and better benefit packages, but the numbers didn't budge. Luckily for Gahagan, a management group he belonged to scheduled a presentation on the Predictive Index (PI) assessment tool. Put into commercial use in the 1950s, PI is an employee survey designed by psychologists that measures an individual's tendencies in six key personality trait areas. The assessment is value-neutral: there are no "right" or "wrong" answers. Instead, a respondent's answers show how he or she would respond to actual environmental stimuli and help managers find better fits between employees and positions. Gahagan calls himself a complete convert to the system, and his facility now boasts a turnover rate of roughly 20 percent.



Risk Reporter: What's the core thought behind PI?

Owen Gahagan: The whole goal of PI is to find what an individual is wired to do well and to match them to a job where those skills are needed. You might be able to handle a wide variety of jobs, but PI will help to pinpoint the ones you'll actually be happy at.

Risk Reporter: How are you currently using PI at your facility?

Owen Gahagan: We use it with our new hires—it's part of our application and hiring process—and each member of our existing staff has also taken the survey. Understanding the personalities and strengths of the people already on our team makes it a lot easier to manage them effectively and helps us retain people who are a good fit for our organization. We've found PI to be uncannily accurate.

Risk Reporter: Walk me through the process of using PI.

Owen Gahagan: There's a three-day training session to understand how to interpret the data that you get from the survey. The survey itself is very straightforward, and it's always the same: the first section asks you to describe how you feel others see you, working from a set list of adjectives, and the second part asks you to describe how you really are. This information is used to create patterns, and those patterns help link you to different types of positions. When we have a position to fill, we have a team of three or four people with a good understanding of the job sit down together and discuss the qualities needed to do this job successfully. We use this information to create a personality pattern for the position, and this gives us something to match an applicant's patterns against.

Risk Reporter: What was the reaction when you used PI with your employees?

Owen Gahagan: There was a little bit of nervousness, which was completely understandable. Until you've taken the survey and seen how it works and how accurate the results are, I can understand that it might feel intimidating. No one wants to find out their current job might not be the best fit for them, but maybe that creates an opportunity to find something that's better for you—and explains why you've always struggled with something or done well in certain situations.

Risk Reporter: Do people try to "cheat" the survey?

Owen Gahagan: If you think about what PI is doing, it really doesn't make sense. Attempting to second-guess the process doesn't benefit you. We're trying to find out what motivates you and what will make you happy to come to work and feel successful in your job. There's no value in trying to get hired into a position that will make you miserable.

Risk Reporter: What does it cost to use PI?

Owen Gahagan: The initial cost is fairly high. In our case, it was \$2,000 for each person who went through training, and based on our employee numbers (the facility has a staff of 70), we have a \$5,000 annual fee. That fee gives us access to ongoing training, all of our provider's online tools and customized help from a consultant. If you're running a small facility, those numbers might seem prohibitive, but when I compare this to all the money we spent on turnover, it's well worth it.