

# ILCA "HELP"

HAZARD EVALUATION LOSS PREVENTION BULLETIN OF THE  
INSURANCE LOSS CONTROL ASSOCIATION

Summer 2001

## BACK TO BASICS PRESIDENT'S MESSAGE

The 2001 Conference Planning Committee has listened to your feedback. With your input we are beginning this year's ILCA Conference, *Back to Basics*.

Most of you expressed the desire to have materials presented to you in a way that you can use it in the field as a practical tool, rather than a theoretical approach to the subject. We also agree. Although we have been getting excellent speakers in the past, some have gotten carried away with their presentations and not really giving the message the way we need it. Something we can take back with us and use every day, that is what we need and that is what this year's conference is all about.

When you check out the enclosed conference outline, keep in mind that we cannot satisfy everyone, however, we are trying our best and we appreciate your comments. We have chosen Indianapolis for several reasons: reasonably priced hotel rooms, GREAT food and low cost airfares.

As Past President Ron Frawley stated last year in his President's message, "still the best bang for the buck around". I can't agree more, every year I have attended an ILCA Conference — have come away with something that was useful to me as a Manager as well as a Loss Control Representative.

So why not join us in Indy — it's *Back to Basics*.

Tom Perry  
Insurance Services Office

## 2002 CONFERENCE PLANNING

Seems a little strange to be asking for your input for the year 2002, months before we have our 2001 ILCA Conference, but the Officers must decide on the location of the 2002 conference at the next meeting.

Traditionally we have moved the conference around the Eastern and Midwestern States. Depending upon where we have it — also depends on how many attend. It has been suggested that we look into having the Conference at a neutral site, such as Orlando or Las Vegas due to cheap airfare and even cheaper accommodations.

So we need your thoughts? Please send your thoughts by e-mail or snail mail to me. [Tperry@iso.com](mailto:Tperry@iso.com) or Tom Perry, 14 Plower Road, Pelham, NH 03076.

1. Keep it moving around the country?
2. Try a neutral site?
3. Other suggestions?

## OSHA ANNOUNCES GUIDELINES TO ASSIST INSPECTORS

OSHA has announced guidelines to assist inspectors in enforcing powered industrial truck operator training requirements. You can expect compliance officers to:

- Inquire about your method of training and evaluating operator performance.
- Ensure that all training is conducted by a person who has the knowledge, training and experience to train operators and evaluate their competence.
- Determine if you've trained employees in the applicable topics listed in 1910.178(I)(3).
- Determine if your operators have received training in the operating instructions, warnings, or precautions listed in the operator's manual for the types of vehicle that they use.
- Enforce the use of seat belts where applicable under the general duty clause of the OSH Act in accordance with the October 9, 1996 Seat Belt Enforcement Memorandum. (OSHA's enforcement policy on the use of seat belts on powered industrial trucks is that employers are obligated to require operators of powered industrial trucks that are equipped with operator restraint devices, including seat belts, to use the devices.)
- When possible, observe powered industrial truck operations to determine if trucks are being operated safely, and conduct employer/employee interviews to verify training program implementation.
- Determine whether the employer has certified that all required training and evaluations have been conducted. The requirement for certification and the reasons for the requirement will be explained to the employer and the action noted in the case file. The employer will also be informed of possible penalties for subsequent violations.

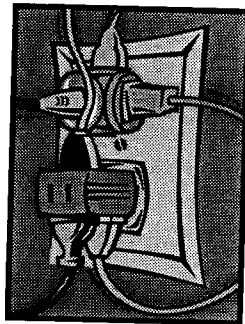
Source: *ISHN February 2001*

[www.insurancelosscontrol.org](http://www.insurancelosscontrol.org)

Lead support for ILCA provided by NAMIC, 3601 Vincennes Road, P. O. Box 68700,  
Indianapolis, Indiana 46268-0700, (317) 875-5250

## ELECTRICAL SAFETY ISSUES

The U.S. Consumer Product Safety Commission (CPSC) and the National Electrical Safety Foundation (NESF) have urged consumers to look for and correct electrical safety hazards in their homes and workplaces. Each year, electrical-related incidents result in more than 41,000 residential fires, claim about 370 lives and cause over 1,400 injuries. These incidents also cause more than \$680 million in property damage annually. "Many of these electrical-related incidents are preventable," said CPSC Chairman Ann Brown. "The simple act of removing electrical cords from under rugs could help prevent many house fires. If every household installed ground fault circuit interrupters (GFCIs), deaths from electrocution in and around the home could be reduced by one-half. I urge consumers to look around their homes and correct electrical hazards." Consumers can help protect themselves from electrical accidents by taking a few minutes to check their homes and workplaces for unsafe conditions.



- Make sure cords are in good condition. A frayed or cracked cord could cause a shock or fire. Replace old and damaged extension cords with new ones having the certification label of an independent testing laboratory on the cord.
- Check to see that extension cords are not overloaded, as indicated by the ratings labeled on the cord and the appliance. Over-loaded extension cords can cause fires. Change the cord to a higher rated one or unplug some appliances, and remember that extension cords should only be used on

a temporary basis and are not intended as permanent household wiring.

- To reduce the risks of electric shock, make sure that GFCI protection is provided for outlets at kitchen counters, in bathrooms, and at outdoor receptacles. Test GFCIs monthly to make sure they are working properly.
- Check the wattage of all bulbs in light fixtures and lamps to make sure they are the correct wattage. Replace bulbs that have a higher wattage than recommended to prevent overheating that could lead to a fire.
- Check to see that fuses are the correct size for the circuit. Replacing a correct size fuse with a larger size fuse can present a serious fire hazard.
- If an appliance repeatedly blows a fuse, trips a circuit breaker, or has given you a shock, unplug it and have it repaired or replaced.
- Check to see if outlets and switches are unusually warm or hot to the touch. If so, an unsafe wiring condition could exist. Do not use the outlet or switch and have a qualified electrician check the wiring as soon as possible.

The National Electrical Safety Foundation has additional information available on their Web site at [www.nesf.org](http://www.nesf.org). The Web site also has a "Special GFCI Safety Demonstration" that walks you through testing procedures for Ground fault circuit interrupters (GFCI's).

*This article was reprinted with permission from the North Aurora, Illinois OSHA Office's General Industry Newsletter. More information on electrical safety may be obtained at [www.osha.gov](http://www.osha.gov).*

## CPSC ANNOUNCES NEW STANDARD FOR "BREAK-AWAY" POWER CORDS ON ELECTRIC DEEP FRYERS

The U.S. Consumer Product Safety Commission (CPSC) worked with Underwriters Laboratories (UL) to develop a new safety standard that calls for "break-away" power cords for electric deep fryers. This new power cord will break away if a child pulls on it, preventing the deep fryer from tipping over and spilling scalding hot cooking oil on the child. The new requirements also apply to electric fondues and electric multi-purpose pots that use cooking oil.

Since 1980, CPSC has reports of seven deaths and 64 serious burn injuries to children under 10 with deep fryers. These deaths and injuries resulted from young children pulling on the power cord, tipping over the deep fryer and its hot contents.

The new "break-away" power cord is held to the deep fryer by a magnet. It operates safely and effectively when it is placed on a counter near an electrical outlet. However, if someone pulls on the cord, it will quickly and smoothly break away from the deep fryer, preventing tipover. This will help prevent the terrible scald burns.

"This is the kind of creative product safety innovation we like to see," said CPSC Chairman Ann Brown. "Industry developed this new break-away cord to help reduce the risk of burns, especially to children."

CPSC urges people to look for new deep fryer appliances that have the break-away power cord, which should show up in stores within the next several months.

For additional information, contact Ken Giles of the CPSC at (301) 504-0580, ext. 1184.

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# 2001 ILCA CONFERENCE FOR INSURANCE PROFESSIONALS

October 15-17, 2001

Holiday Inn Select  
Indianapolis, Indiana

## *Back to Basics*

### Agenda

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#### Sunday, October 14, 2001

Day Trip      **Tour of the Indianapolis Motor  
Speedway**

5:00 p.m.-  
7:00 p.m.      **Board Meeting**

7:30 p.m.-  
10:00 p.m.      **Colts Football in the sports bar**

#### Monday, October 15, 2001

8:00 a.m.      **Registration and Breakfast**

8:30 a.m.      **Welcome and Opening Remarks**

8:45 a.m.      **Motivational Speaker**  
*Derek Daly*  
*Derek Daly Academy*  
*Indianapolis, Ind.*

9:45 a.m.      **Industry Keynote Speaker**  
*Larry Forrester*  
*NAMIC*  
*Indianapolis, Ind.*

10:15 a.m.      **Break**

10:30 a.m.      **Electric Inspection**  
*Gary Downey*  
*Grinnell Mutual Reinsurance Company*

12:00 p.m.      **Lunch**

#### Concurrent Sessions

1:00 p.m.      **Contractors**  
*Greg Kraemer*  
*Insurance Loss Control Consultants*

**Restaurants**  
*Ron Frawley*  
*Harford Mutual Insurance Company*

**Multi-family Occupancy**  
*Peter Scriver*

3:00 p.m.      **Repeat Concurrent Sessions**

5:00 p.m.-  
6:00 p.m.      **Reception**

#### Tuesday, October 16, 2001

8:00 a.m.      **Breakfast**

8:30 a.m.      **ISO Construction Classification**  
*Richard Harris*

10:00 a.m.      **Break**

10:15 a.m.      **Life Safety Code Basics**  
*Randy Miller*  
*CNA Insurance*

11:15 a.m.      **Annual Business Meeting**  
*Tom Perry and Officers*

12:00 p.m.      **Lunch**

1:00 p.m.      **Scaffolding**  
*Jeff Bayer*

2:30 p.m.      **Automatic Sprinkler Inspection**  
*Richard Harris*

#### Wednesday, October 17, 2001

8:00 a.m.      **Breakfast**

8:30 a.m.      **Heating**  
*To Be Announced*

10:00 a.m.      **Break**

10:30 a.m.      **Alarms**  
*Randy Miller*  
*CNA Insurance*

11:30 a.m.      **Closing Remarks**

11:45 p.m.      **Adjourn**

4:00 p.m.      **CFPS Exam**

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# REGISTER NOW FOR THE 2001 ILCA CONFERENCE FOR INSURANCE PROFESSIONALS

October 15-17, 2001  
Holiday Inn Select  
Indianapolis, Ind.

## ILCA Annual Conference Registration Fees and Hotel Information

**Program Costs:** To qualify for the early discount rate, registration for the 2001 ILCA Conference must be received by NAMIC by **Friday, August 31, 2001.**

ILCA Member		Nonmember
\$199	Before August 31	\$219
\$219	Before September 20	\$239
\$239	After September 20	\$259

\*Groups of **5 or more** who register by **September 20, 2001**, will receive a discount rate of \$199 each for members and \$219 for nonmembers.

**Hotel Reservations:** Please make your overnight arrangements directly with the Holiday Inn Select by calling (317) 872-9790. Arrangements have been made for rooms at a group rate. Please mention that you are attending the Insurance Loss Control Association Annual Conference to receive a discount rate of \$104. Rates are \$129 to \$139 after the hotel cut-off date of **September 20, 2001**. The Holiday Inn Select is located at 3850 Depauw Boulevard, Indianapolis, IN 46268.

**Please register the following:**

			Check box if ILCA member
1.	_____	_____	<input type="checkbox"/>
	Name	Title	
	_____	_____	
	Company Name	Address	
	_____	_____	
	Phone	E-mail Address	
2.	_____	_____	<input type="checkbox"/>
	Name	Title	
	_____	_____	
	Company Name	Address	
	_____	_____	
	Phone	E-mail Address	

**Mail To:** P.O. Box 68700, Indianapolis, IN 46268. Enclose check payable to NAMIC. Fee includes all seminar materials, three continental breakfasts, two lunches, and a reception. Nonmember fees include ILCA membership for one year.

### Tour

*Sunday, October 15*

- Yes, I want to attend the tour of the Indianapolis Motor Speedway.

### Workshop

*Monday, October 16 (Please check two concurrent sessions that you would like to attend.)*

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> 1 Contractors<br><i>Greg Kraemer, Insurance Loss Control Consultants</i> | <input type="checkbox"/> 1:00-2:30 p.m. | <input type="checkbox"/> 3:00-4:30 p.m. |
| <input type="checkbox"/> 2 Restaurants<br><i>Ron Frawley, Harford Mutual Insurance Company</i>    | <input type="checkbox"/> 1:00-2:30 p.m. | <input type="checkbox"/> 3:00-4:30 p.m. |
| <input type="checkbox"/> 3 Multi-family Occupancy<br><i>Peter Scriver</i>                         | <input type="checkbox"/> 1:00-2:30 p.m. | <input type="checkbox"/> 3:00-4:30 p.m. |

*Wednesday, October 18*

- I will take the CFPS Exam.                       I will not be taking the CFPS Exam.

## FALL PROTECTION FOR MOBILE SCAFFOLDS

Subpart L of the 1926 OSHA Construction standards addresses scaffolding requirements. A mobile scaffold, as defined in the standard, means: "a powered or unpowered, portable, caster or wheel-mounted supported scaffold. "1926.451(g)(1) states, in part: "Each employee on a scaffold more than 10 feet above a lower level shall be protected from falling to that lower level." Therefore, all employees working on a mobile scaffold more than 10 feet above the lower level must be provided with fall protection., which can either be personal fall arrest systems or guardrail systems. You should also review 1926.452(w) — which contains requirements specific to mobile scaffolds. Some of the main points to consider for safety:

- Scaffolds shall be braced by cross, horizontal, or diagonal braces, or combination thereof ... all brace connections shall be secured
- Scaffolds shall be plumb, level and squared
- Scaffold casters and wheels shall be locked with positive wheel and/or wheel and swivel locks, or equivalent means
- Scaffolds shall be stabilized to prevent tipping during movement
- Employees shall not be allowed to ride on scaffolds unless safety precautions specified in the standard are met; i.e. the height to base width ratio of the scaffold during movement is 2:1 or less.

*This article was reprinted with permission from the North Aurora, Ill. OSHA Office's Spring Construction Newsletter. More information on Scaffolds may be obtained in Subpart L of the 1926 Construction Standards at [www.osha.gov](http://www.osha.gov). continued on next page*

## FREQUENTLY ASKED QUESTIONS ABOUT NEEDLESTICK SAFETY

### 1. What is the Needlestick Safety and Prevention Act?

The Needlestick Safety and Prevention Act (the Act) (Pub. L. 106-430) was signed into law on November 6, 2000. Because occupational exposure to bloodborne pathogens from accidental sharps injuries in healthcare and other occupational settings continues to be a serious problem, Congress felt that a modification to OSHA's Bloodborne Pathogens Standard was appropriate (29 CFR 1910.1030) to set forth in greater detail (and make more specific) OSHA's requirement for employers to identify, evaluate, and implement safer medical devices. The Act also mandated additional requirements for maintaining a sharps injury log and for the involvement of non-managerial healthcare workers in evaluating and choosing devices.

### 2. How does the "Needlestick Act" apply to OSHA's Bloodborne Pathogens Standard?

The Act directed OSHA to revise its Bloodborne Pathogens Standard (29 CFR 1910.1030). OSHA published the revised standard in the Federal Register on January 18, 2001; it took effect on April 18, 2001. The agency implemented a 90-day outreach and education effort for both OSHA staff and the regulated public before beginning enforcement of the new requirements. Accordingly, OSHA will not enforce the new provisions of the standard (requiring employers to maintain a sharps injury log and to involve non-managerial employees in selecting safer needle devices) until July 17, 2001. (The requirement to implement the use of engineering controls, which includes safer medical devices, has been in effect since 1992).

### 3. How does the revision affect states that operate their own federally-approved occupational safety and health programs?

States and territories that operate their own OSHA-approved state programs must adopt the revisions to the bloodborne pathogens standard, or adopt a more stringent amendment to their existing standard, by Oct. 18, 2001. (NOTE: The original adoption date for state plan states was July 18, 2001 (or six months from the date the standard was published in the Federal Register). However, an additional three months was added which coincides with the Federal 90-day education campaign).

### 4. Does the standard apply to public sector (State and local government) employees?

Federal OSHA standards do not apply to public sector employees, but the 24 states and two territories that operate OSHA-approved state plans are required to enforce an "at least as effective" standard in the public sector.

### 5. Does the "Needlestick Act" apply to me?

OSHA's Bloodborne Pathogens Standard, including its 2001 revisions, applies to all employers who have employees with reasonably anticipated occupational exposure to blood or other potentially infectious materials (OPIM). These employers must implement the applicable requirements set forth in the standard. Some of the new and clarified provisions in the standard apply only to healthcare activities, but some of the provisions, particularly the requirements to update the Exposure Control Plan and to keep a sharps injury log, will apply to non-healthcare as well as healthcare activities.

### 6. By what date do we have to implement safer medical devices?

The requirement to implement safer medical devices is not new.

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*Needlestick Safety continued from previous page.*

However, the revised standard further clarifies what is meant by "engineering controls" in the original 1991 Bloodborne Pathogens standard by adding language to the definition section of the standard that reflects the development and availability of new safer medical devices over the last decade. The 1991 standard states, "engineering and work practice controls shall be used to eliminate or minimize employee exposure." The revision defines Engineering Controls as "controls (e.g., sharps disposal containers, self-sheathing needles, safer medical devices, such as sharps with engineered sharps injury protections and needleless systems) that isolate or remove the bloodborne pathogens hazard from the workplace." Consequently, you should already have safer devices in place. If you have not already evaluated and implemented appropriate and available engineering controls, you must do so now. Also, employees with occupational exposure to blood and OPIM must be trained regarding the proper use of all engineering and work practice controls.

**7. What if I've never had an employee experience a needlestick, do I still need to use safer devices?**

Yes. OSHA standards are intended to be implemented as a means to prevent occupational injuries and illnesses. In order to most effectively avoid percutaneous injuries from contaminated sharps, employees must use engineering controls, including safer medical devices.

**8. How many non-managerial employees do I need to include in the process of choosing safer medical devices?**

Small medical offices may want to seek input from all employees when making their decisions. Larger facilities are not required to request input from all exposed employees;

however, the employees selected should represent the range of exposure situations encountered in the workplace (e.g., pediatrics, emergency department, etc.). The solicitation of employees who have been involved in the input and evaluation process must be documented in the Exposure Control Plan.

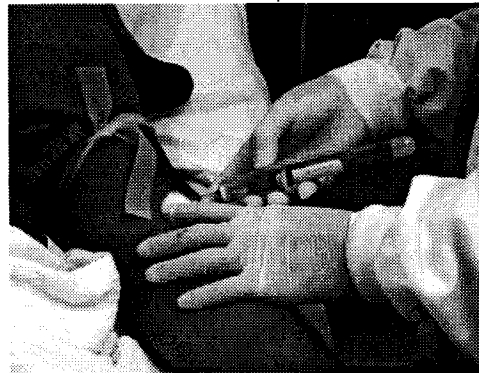
**9. Does OSHA have a list of available safer medical devices?**

No. OSHA does not approve or endorse any product. It is your responsibility as an employer to determine which engineering controls are appropriate for specific hazards, based on what is appropriate to the specific medical procedures being conducted, what is feasible, and what is commercially available.

**10. What if a safer option is not available for the medical device that I use?**

A key element in choosing a safer medical device, other than its appropriateness to the procedure and effectiveness, is its availability on the market. If there is no safer option for a particular medical device used where there is exposure to blood or OPIM, you are not required to use something other than the device that is normally used. During your annual review of devices, you must inquire about new or prospective safer options and document this fact in your written Exposure Control Plan. With increasing medical technology, more devices are becoming available for different procedures. If no engineering control is available, work practice controls shall be used and, if occupational exposure still remains, personal protective equipment must also be used.

**11. What if the safer device that I choose is on back order?**



Safety equipment must be available at all times. If for some reason an engineering control is not available (due to supply shortages, back orders, shipping delays, etc.), this must be documented in your Exposure Control Plan. You would then be responsible to implement the chosen control(s) as soon as it becomes available and adjust your exposure control plan to illustrate such. In the meantime, work practice controls must be used and, if occupational exposure still remains, personal protective equipment must also be used.

**12. Do I have to keep a sharps injury log? Does it have to be confidential?**

If, as an employer, you are required to maintain a log of occupational injuries and illnesses under 29 CFR 1904, you must also establish and maintain a sharps injury log for recording percutaneous injuries from

contaminated sharps. The Sharps Log must contain, at a minimum, information about the injury, the type and brand of device involved in the injury (if known), the department or work area where the exposure occurred, and an explanation of how the incident occurred. The log must be recorded and maintained in such a manner so as to protect the confidentiality of the injured employee (e.g., removal of personal identifiers).

**13. Does the revised Bloodborne Pathogens Standard apply to medical or dental offices that have fewer than 10 employees?**

OSHA's Bloodborne Pathogens Standard applies to all employers with employees who have occupational exposure to blood or other potentially infectious materials

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*Needlestick Safety continued from previous page.*

(OPIM), regardless of how many workers are employed. However, workplaces with 10 or fewer employees are exempt from OSHA recordkeeping requirements and are also exempt from recording and maintaining a Sharps Injury Log. (See 29 CFR 1904 for applicability of recordkeeping requirements). All other applicable provisions of the Bloodborne Pathogens Standard still apply.

**14. What new information do I need to include in my written Exposure Control Plan? How often to I need to update it?**

In addition to what is already required by the 1991 standard, the revised standard requires the documentation of (1) annual consideration and implementation of appropriate engineering controls, and (2) solicitation of non-managerial healthcare workers in evaluating and choosing devices. The plan must be reviewed and updated at least annually.

**15. Where can I get information about what is expected of me?**

There are several resources available for employers and employees with regard to occupational exposures to blood and OPIM. First, of course, is the OSHA Bloodborne Pathogens Standard (29 CFR 1910.1030). Also available are CPL 2-2.44D (November 1999), Enforcement Procedures for the Occupational Exposure to Bloodborne Pathogens, and many other related documents. You may access this information, as well as information from OSHA's Consultation and State Plan State Offices, via OSHA's Web site at [www.osha.gov](http://www.osha.gov) or by phone at (800) 321-OSHA. The National Institute for Occupational Safety and Health (NIOSH) and the Centers for Disease Control and Prevention (CDC) also have several documents related to the prevention of occupational exposure to blood and OPIM.

## OSHA RULE ON RECORD KEEPING FOR WORKPLACE INJURIES TO GO INTO EFFECT AS SCHEDULED

Secretary of Labor Elaine L. Chao announced today that an Occupational Safety and Health Administration (OSHA) rule on recordkeeping would largely go into effect as scheduled on January 1, 2002.

"This rule is a big step forward in making workplaces safer for employees, which is our goal," Chao said. "It is written in plain language and simplifies the employer's decision-making process."

The final recordkeeping rule is the culmination of an effort that began in the 1980s to improve how the government tracks occupational injuries and illnesses. The rule increases employee involvement, creates simpler forms and gives employers more flexibility to use computers to meet OSHA regulatory requirements.

The Department will seek comment on two proposed modifications to the rule's recordkeeping requirements. First, the Department will propose that the criteria for recording work-related hearing loss not be implemented for one year pending further investigation into the level of hearing loss that should

be recorded as a "significant" health condition. The Department had received comments pointing out that the medical community and State worker compensation systems do not support the current rule's hearing loss standard.

Second, the Department will propose to delay for one year the recordkeeping rule's definition of "musculoskeletal disorder" (MSD) and the requirement that employers check the MSD column on the OSHA Log. The Department has announced its intention to develop a comprehensive plan to address ergonomic hazards and has scheduled a series on ergonomics. The issues to be decided as a result of these forums include the appropriate definitions of the terms "ergonomic injury" and MSD.

Chao said, "Until a definition is agreed upon, the data collected will not help us target the injuries that need to be eliminated."

**Editor's Note:** Information on OSHA's proposal to delay the effective date regarding hearing loss and MSD issues will be published in the July 3, 2001 Federal Register.

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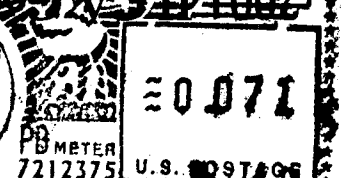
# 2001 ILCA Conference Registration Information Enclosed.

**LCA Conference for  
Insurance Professionals**

**Back to Basics**

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