PRESIDENT’S MESSAGE

Pretty soon the tulips and daffodils will be pushing up through the soil and the trees in full bloom — of course if you live down South, this has already happened. Almost sounds like I am writing for a garden club, but for us New Englanders and for most of our ILCA membership — Spring is a time to reflect on what happened last year and what our plans are going to be for this year.

Even though the old calendar started on January 1st, many things don’t really get started until springtime. One such event is our ILCA membership drive. We are always looking for new members throughout the year, but this is the time that we should be pushing for every new member that we can get. Sign them up before they get involved in their summer activities. Otherwise, they won’t want to be interrupted while hanging out at the beach or on vacation or always some other reason for not getting involved.

At last years convention, we gave out a special award to the member that brought in the most new members — we will again present a special award this year for that individual member that sponsors or signs up the most members. As I remember last year the winner brought in eight new members, I am sure that someone can out do that one.

If you need ILCA applications, send a note to Raquel DeLaRosa at NAMIC or you can print one off of our ILCA web site at insurancelosscontrol.org. Please make sure that you put your name on the application as a sponsor, so we can count it for the contest.

More important than winning the contest, we want to boost our membership before our Annual Meeting and Conference in October, so that we can have larger crowd than we have had at past conferences. Every member counts. If each of us sponsored just one additional member, we would double the size of our organization. Remember that this is the only organization that is devoted solely to the Insurance Loss Control Industry for field staff and their managers. You make the organization what it is by participating and getting new members or signing up an old one.

Have a great Spring.

Tom Perry
Insurance Services Office

BUSH SIGNS REPEAL OF ERGONOMICS PROGRAM RULE INTO LAW

From Ergonomics Today™ and ErgoWeb.com
R. Michael M.Sc., AEP, March 21, 2001

Tuesday, March 20, 2001 marked the end of the present battle over ergonomics regulations as President Bush privately signed into law the repeal of OSHA’s Ergonomics Program Standard. In a public statement the President wrote, “The safety and health of our nation’s workforce is a priority for my administration. Together, we will pursue a comprehensive approach to ergonomics that addresses the concerns surrounding the ergonomics rule repealed today.” The statement also said that Bush felt the rules imposed by his predecessor were “unduly burdensome and overly broad.”

Several organizations have spoken about this latest development. CNN.com reports that the AFL-CIO immediately issued the statement, “It’s a sad day for injured workers.” The Washington Post reported Martha G. Burk, chair of the National Council of Women’s Organizations as saying women suffer many ergonomic injuries from keyboard work and machine cleaning.

In contrast to these opinions, White House spokesman Ari Fleischer said Bush “believes that we can protect the health and safety of workers without passing a regulation that is terribly burdensome to the economy and to the small businesses on which their growth depends.” He also said that Bush has directed Labor Secretary Elaine Chao to find ways to protect workers’ health and safety without hurting businesses. Chao has said she would consider issuing a different ergonomics rule. (Note from Editor, current ergonomic news can be found at the Ergonomics Today web site at www.ergoweb.com.)
OSHA AFFIRMS NEED FOR SAFER DEVICES TO PREVENT NEEDLESTICKS

As mandated by the Needlestick Safety and Prevention Act, OSHA has revised its bloodborne pathogens standard to clarify the need for employers to select safer needle devices as they become available and to involve employees in identifying and choosing the devices. The updated standard also requires employers to maintain a log of injuries from contaminated sharps.

"These changes in the OSHA bloodborne pathogens standard reaffirm our commitment to protecting health care providers who care for us all," said Labor Secretary Alexis M. Herman. "Newer, safer medical devices can reduce the risk of needlesticks and the chance of contracting deadly bloodborne diseases such as AIDS and hepatitis C. Employers need to consult their workers and use the safer devices when possible."

According to the Needlestick Act, in March 2000, the Centers for Disease Control and Prevention estimated that selecting safer medical devices could prevent 62 to 88 percent of sharps injuries in hospital settings.

"Our revised bloodborne pathogen standard sets forth clearly the importance of re-evaluating needle systems to identify safer devices every year. The new requirement to record all needlesticks will help employers determine the effectiveness of the devices they use and track how many needlesticks are occurring within their workplaces," said OSHA Administrator Charles N. Jeffress.

The revised OSHA Bloodborne Pathogen Standard specifically mandates consideration of safer needle devices as part of the re-evaluation of appropriate engineering controls during the annual review of the employer’s exposure control plan. It calls for employers to solicit front-line employee input in choosing safer devices. New provisions require employers to establish a log to track needlesticks rather than only recording those cuts or sticks that actually lead to illness and to maintain the privacy of employees who have suffered these injuries.

Passed unanimously by Congress and signed by President Clinton on Nov. 6, 2000, the Needlestick Safety and Prevention Act mandated specific revisions of OSHA’s bloodborne pathogens standard within six months. The legislation exempted OSHA from certain standard rulemaking requirements so that the changes could be adopted quickly.

The revised bloodborne pathogens standard is scheduled for publication in the Jan. 18 Federal Register. The updated rules become effective April 18, 2001.

Contact: Susan Hall Fleming at (202) 693-1999 for more information.

CPSC RECOMMENDS CO ALARM FOR EVERY HOME

After a recent rash of carbon monoxide poisonings — including incidents in Maryland, Pennsylvania and New Jersey — the U.S. Consumer Product Safety Commission (CPSC) is repeating its recommendation that every home should have a carbon monoxide (CO) alarm. CPSC also urges consumers to have a professional inspection of all fuel-burning appliances — including furnaces, stoves, fireplaces, clothes dryers, water heaters, and space heaters — to detect deadly carbon monoxide leaks.

These appliances burn fuels, such as gas, both natural and liquefied petroleum; kerosene; oil; coal; or wood. Under certain conditions, fuel-burning appliances can produce deadly CO. However, with proper installation and maintenance, they are safe to use.

CO is a colorless, odorless gas produced by burning any fuel. The initial symptoms of CO poisoning are similar to the flu, and include headache, fatigue, shortness of breath, nausea and dizziness. Exposure to high levels of CO can cause death.

"CO poisoning associated with using fuel-burning products kills more than 200 people each year," said CPSC Chairman Ann Brown.

CPSC recommends that the yearly professional inspection include checking chimneys, flues and vents for leakage and blockage by creosote and debris. Leakage through cracks or holes could cause black stains on the outside of the chimney or flue. These stains can mean that pollutants are leaking into the house. In addition, have all vents to furnaces, water heaters, boilers and other fuel-burning appliances checked to make sure they are not loose or disconnected.

Make sure your appliances are inspected for adequate ventilation. A supply of fresh air is important to help carry pollutants up the chimney, stovepipe or flue, and is

continued on page 6
The Occupational Safety and Health Administration today issued a revised rule to improve the system employers use to track and record workplace injuries and illnesses.

OSHA's recordkeeping requirements, in place since 1971, were designed to help employers recognize workplace hazards and correct hazardous conditions by keeping track of work-related injuries and illnesses and their causes. The revised rule will produce better information about occupational injuries and illnesses while simplifying the overall recordkeeping system for employers. The rule will also better protect employees' privacy.

"Recordkeeping is a critical part of safety and health efforts in every workplace," said Secretary of Labor Alexis M. Herman. "The revision we are announcing today will not lessen an employer's recordkeeping responsibilities, but it will make it easier to successfully meet the requirements."

The final rule becomes effective on Jan. 1, 2002, and will affect approximately 1.3 million establishments. OSHA is publishing the rule now to give employers ample time to learn the new requirements and to revise computer systems they may be using for recordkeeping. (During this transition period, employers must adhere to requirements of the original rule).

Like the former rule, employers with 10 or fewer employees are exempt from most requirements of the new rule, as are a number of industries classified as low-hazard-retail, service, finance, insurance and real estate sectors. The new rule updates the list of exempted industries to reflect recent industry data. (All employers covered by the Occupational Safety and Health Act must continue to report any workplace incident resulting in a fatality or the hospitalization of three or more employees).

"After three decades of what many employers considered complicated recordkeeping requirements with cumbersome forms and limited technological assistance, OSHA is revising this rule to address some of these concerns. This rulemaking completes a larger agency effort to revise, update and simplify requirements that many considered too lengthy and complex," said OSHA Administrator Charles N. Jeffress. "The new rule combines previous regulatory requirements and interpretations into one clear and precise document that will aid an employer's ability to increase workplace safety."

The revised rule includes a provision for recording needlestick and sharps injuries that is consistent with recently-passed legislation requiring OSHA to revise its bloodborne pathogens standard to address such injuries. This provision is expected to result in a significant increase in recordable cases annually.

The recordkeeping rule also conforms with OSHA's ergonomics standard published last November. It simplifies the manner in which employers record musculoskeletal disorders (MSDs), replacing a cumbersome system in which MSDs were recorded using criteria different from those for other injuries or illnesses. The revised forms have a separate column for recording MSDs, which will improve the compilation of national data on these disorders.

One of the least understood concepts of recordkeeping has been restricted work; the new rule clarifies the definition of restricted work or light duty and makes it easier to record those cases. Work-related injuries are also better defined to ensure the recording only of appropriate cases while excluding cases clearly unrelated to work.

The revised rule also promotes improved employee awareness and involvement in the recordkeeping process, providing workers and their representatives access to the information on recordkeeping forms and increasing awareness of potential hazards in the workplace. Privacy concerns of employees have also been addressed; the former rule had no privacy protections covering the log used to record work-related injuries and illnesses.

Written in plain language using a question and answer format, the regulation for the first time uses checklists and flowcharts to provide easier interpretations of recordkeeping requirements. Finally, employers are given more flexibility in using computers and telecommunications technology to meet their recordkeeping requirements.

OSHA's recordkeeping requirements provide the source data for the Bureau of Labor Statistics (BLS) Occupational Injury and Illness Survey, the primary source of statistical information concerning workplace injuries and illnesses. BLS collects the data and publishes the statistics, while OSHA interprets and enforces the regulation.


continued on next page
HIGHLIGHTS OF OSHA'S RECORDKEEPING RULE

OSHA's rule addressing the recording and reporting of occupational injuries and illnesses affects approximately 1.3 million establishments. The revision improves employee involvement, creates simpler forms, provides clearer regulatory requirements, and allows employers more flexibility for using computers to meet OSHA regulatory requirements. The final rule becomes effective on Jan. 1, 2002.

The following is a brief summary of some of the key provisions of the recordkeeping rule:

- Requires employers to record all needlestick and sharps injuries involving contamination by another person's blood or other bodily fluids.
- Requires employers to record standard threshold shifts (STS) in employees' hearing. (An STS is an adverse change in an employee's hearing threshold, relative to his/her most recent audiogram.) Provides a separate column on the OSHA Form 300 to capture statistics on hearing loss.
- Applies the same recording criteria to musculoskeletal disorders (MSDs) as to all other injuries or illnesses. Employer retains flexibility to determine whether an event or exposure in the work environment caused or contributed to the MSD. Forms include columns dedicated to MSD cases.
- Includes separate provisions describing the recording criteria for cases involving the work-related transmission of tuberculosis or medical removal under OSHA standards.
- Eliminates the term "lost workdays" and focuses on days away or days restricted or transferred. Also includes new rules for counting that rely on calendar days instead of workdays.
- Requires employers to establish a procedure for employees to report injuries and illnesses and tell their employees how to report. Employers are prohibited from discriminating against employees who do report. For the first time, employee representatives will have access to those parts of the OSHA 301 form relevant to the employees they represent.
- Protects employee privacy by (1) prohibiting employers from entering an individual's name on Form 300 for certain types of injuries/illnesses (e.g., sexual assaults, HIV infections, mental illnesses, etc.); (2) providing employers the right not to describe the nature of sensitive injuries where the employee's identity would be known; (3) giving employee representatives access only to the portion of Form 301 which contains no personal identifiers; and (4) requiring employers to remove employees' names before providing the data to persons not provided access rights under the rule.
- Requires the annual summary to be posted for three months instead of one. Requires certification of the summary by a company executive.
- Changes the reporting of fatalities and catastrophes to exclude some motor carrier and motor vehicle accidents.

- Updates three recordkeeping forms:
  - OSHA Form 300 (Log of Work-Related Injuries and Illnesses); simplified and printed on smaller legal sized paper.
  - OSHA Form 301 (Injury and Illness Incident Report); includes more data about how the injury or illness occurred.
  - OSHA Form 300A (Summary of Work-Related Injuries and Illnesses); a separate form updated to make it easier to calculate incidence rates.

- Eliminates different criteria for recording work-related injuries and work-related illnesses; one set of criteria will be used for both. (The former rule required employers to record all illnesses, regardless of severity).

- Requires records to include any work-related injury or illness resulting in one of the following: death; days away from work; restricted work or transfer to another job; medical treatment beyond first aid; loss of consciousness; or diagnosis of a significant injury/illness by a physician or other licensed health care professional.

- Includes new definitions of medical treatment, first aid, and restricted work to simplify recording decisions.

- Requires a significant degree of aggravation before a preexisting injury or illness becomes recordable.

- Adds additional exemptions to the definition of work-relationship to limit recording of cases involving the eating and drinking of food and beverages, common colds and flu, blood donations, exercise programs, mental illnesses, etc.

- Clarifies the recording of "light duty" or restricted work cases. Requires employers to record cases when the injured or ill employee is restricted from their "normal duties" which are defined as work activities the employee regularly performs at least once weekly.
CENTRAL SPRINKLERS

Central sprinklers have again been identified by UL as potentially not functioning at low water pressures or leaking. The models involved are glass bulb fire sprinkler heads manufactured prior to year 2000. This announcement is to notify all FR's of the reporting requirements that apply to both FRF51 and underwriting reports.

During the survey of a premises with a fire sprinkler system installed

- If glass bulb fire sprinkler heads are found, identify the manufacturer
- If they are Central fire sprinkler heads, then identify the date
- If the Central date is prior to 2000:
- Make the following under writing recommendation

Recommendation
Central Glass bulb fire sprinkler heads in the fire sprinkler system may be a model identified by UL as being defective. Recommend the fire sprinkler service company be contacted immediately to assess and determine the appropriate corrective action, including replacement.

- Enter sprinkler information on the ASGR. No grading points are to applied just for the presence of these sprinklers; however, if they are leaking apply SCOPES item 1123.b.
- Note the presence of these sprinklers in the Comments section of the FRP-51.

The following figure is provide to assist in identifying glass bulb sprinklers.

A SPRINKLER SUCCESS FOR NATIONAL PARK SERVICE

A small fire broke out on Monday night, January 8, 2001, in the basement of a historic building next to Independence Hall, but the fire was extinguished quickly. The smoky, one-alarm fire started at about 11:30 p.m. Monday near a transformer in the basement of Old City Hall, which adjoins Independence Hall, fire officials said. Independence National Historical Park spokesman Phil Sheridan said there was no damage to Independence Hall and only minimal damage to Old City Hall.

"We were successful with our fire detection and the fire suppression system that came on automatically, detected the fire, turned the sprinkler system on and, with the assistance of the Philadelphia Fire Department, helped put the fire out pretty quickly," Sheridan said. The U.S. Supreme Court used Old City Hall from the time the building was completed in 1791 until 1800, when the nation's capital moved to Washington. City government and courts occupied the building during the 19th century. Independence Hall originally was built as the first Statehouse in colonial Pennsylvania. The Declaration of Independence was signed there in 1776 and it was later the meeting place of the Continental Congress and the Constitutional Convention.

Reprinted with permission of APs.

ILCA WEB CENTRAL

Occupational Safety and Health Administration (OSHA)
www.osha.gov

National Safety Council
www.nsc.org

American Society of Safety Engineers
www.asse.org

National Fire Protection Association
www.nfpa.org

Insurance Information Institute
www.iii.org

Institute for Business & Home Safety
www.ibhs.org

Insurance Institute for Highway Safety
www.highwaysafety.org

National Council on Compensation Insurance (NCCI)
www.ncci.com

Property and Casualty.com
www.propertyandcasualty.com

Ultimate Insurance Links-By: G. Barry Klein, CFCU, CLI
www.UltimateInsuranceLinks.com

Ergonomics Today & Ergo Web
www.ergoweb.com
CPCS Recommends CO Alarm continued from page 2
necessary for the complete combustion of any fuel. Never block ventilation air openings.

CPCS recommends that every home should have at least one CO alarm that meets the requirements of the most recent Underwriters Laboratories (UL) 2034 standard or International Approval Services 6-96 standard.

Contact Ken Giles at (301) 504-0580, Ext. 1184, for more information.