

What does the future hold? Can we predict losses from employing a quantitative approach to employer safety procedure evaluation?

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Redefining Loss Prevention Model to Focus Strictly on Injury Prevention

- (1) Target worst actors for loss prevention services.
- (2) Require three site visits during first year--.
1 month, 3 months, 9 months after selection.
- (3) Use detailed scoring (0 to 3) system to rate effectiveness of safety procedures.
- (4) 0 or 1 score obligates recommendation and follow-up—failure to correct can lead to loss of policy.

Redefining Loss Prevention Model to Focus Strictly on Injury Prevention

- (5) Use tablet technology and software specifically designed to manage loss control service delivery and data collection.
- (6) Follow serviced policyholders in prospective study to determine losses going forward and determine any link between scoring and/or recommendations and follow-up.
- (7) Employ software to capture data in relational data base, allowing study of scoring patterns for possible statistical relationship to losses.
- (8) If successful, use any confirmed statistical relationships as leading indicators for pricing purposes.

Use of Incentives

- (1) Experiment being conceived to test incentives as motivation for roofing employers to adopt special safety practices.
- (2) Would be grafted onto regular three-visit schedule, with awards to be given at each visit upon verification of compliance with requirements.
- (3) Removing disincentives—all roofers selected for LC to be required to give three-week work schedules, on pain of losing policy for non-compliance. Participating in underground economy made more difficult.
- (4) Look for correlation between successful completion of incentive program and reduced losses, incidence, and/or severity.

Injury and Illness Prevention Program

Management commitment/assignment of responsibilities

3 2 1 0

Safety communications system with employees

3 2 1 0

System for assuring employee compliance with safe work practices

3 2 1 0

Scheduled inspections/evaluation system

3 2 1 0

Accident investigation

3 2 1 0

Procedures for correcting unsafe or unhealthy conditions

3 2 1 0

Safety and health training and instruction

3 2 1 0

Recordkeeping and documentation

3 2 1 0

Overall Rating

3 2 1 0

3 = Outstanding 2 = Acceptable 1 = Needs Improvement 0 = None

Specific Safety Issues and Programs

Confined Space Program					
<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> N/A	
Excavation Safety					
<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> N/A	
Scaffold Safety					
<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> N/A	
Ladder Safety					
<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> N/A	
Flagging Safety					
<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> N/A	
Fall Protection					
<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> N/A	
Heat Illness Prevention Program					
<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> N/A	
Lockout and Blockout					
<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> N/A	
Machine Guarding					
<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> N/A	
Emergency Action Plan					
<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> N/A	

Hazard Communication Program					
<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> N/A	
Respiratory Protection Program					
<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> N/A	
Pesticide Safety					
<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> N/A	
Ergonomics Program					
<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> N/A	
Back Injury Prevention					
<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> N/A	
Fleet Safety					
<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> N/A	
ATV Safety					
<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> N/A	
Forklift Safety (Industrial Truck)					
<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> N/A	
Tractor Safety					
<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> N/A	
Crane Safety					
<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> N/A	
BloodBorne Pathogen Exposure Control Program					
<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0	<input type="checkbox"/> N/A	

Hearing Conservation Program

3 2 1 0 N/A

Workplace Violence Program

3 2 1 0 N/A

Personal Protective Equipment

3 2 1 0 N/A

Night Work

3 2 1 0 N/A

Overall Rating

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