



GREAT WEST CASUALTY COMPANY

The Difference is Service®

WORKPLACE SAFETY AWARDS





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This material is intended to be a broad overview of the subject matter and is provided for informational purposes only. Great West Casualty Company does not provide legal advice to its insureds, nor does it advise insureds on employment-related issues; therefore, the subject matter is not intended to serve as legal or employment advice for any issue(s) that may arise in the operations of its insureds. Legal advice should always be sought from the insured's legal counsel. Great West Casualty Company shall have neither liability nor responsibility to any person or entity with respect to any loss, action, or inaction alleged to be caused directly or indirectly as a result of the information contained herein.



WORKPLACE SAFETY AWARDS PROGRAM

Great West Casualty Company is proud to work with the industry that moves our nation's economy. To show our appreciation of your commitment to the highest standards of excellence, we invite you to participate in our Workplace Safety Awards program.

ELIGIBILITY

We have made it easy to participate! Great West insureds with five (5) or more employees, who currently have workers compensation coverage with Great West, are eligible to participate.

HOW IT WORKS

Record any work-related incidents that occur throughout the year on the enclosed Incident Frequency Chart, and hang the poster in a common area for all employees to see. At the end of the year, use the submission form located in this booklet to calculate the Total Incident Rate (IR). When finished, fax or email the submission form to your Great West regional safety office. Your submission will be cross-referenced with Great West's insured files. Insureds may be contacted to discuss questionable cases. To help you complete the submission form, please refer to the following pages for instructions on defining and recording incidents and calculating average number of workers, hours worked, and incident rate.

AWARDS

All participating insureds will receive one of the following awards based on their incident rate performance:

PLATINUM = TOP 25%

GOLD = 26-50%

SILVER = 51-75%

PARTICIPATORY = 76%+

If you have any questions, contact your Great West Casualty Company Safety Representative or Regional Safety Department.



PART 1: OVERVIEW

DEFINITION OF AN INCIDENT

An injury or illness is considered work related if an event or exposure in the work environment caused or contributed to the condition or significantly aggravated a pre-existing condition. Work relatedness is presumed for injuries and illnesses resulting from events or exposures occurring in the workplace, unless an exception specifically applies. See 29 CFR Part 1904.5(b)(2) for exceptions. The work environment includes the establishment and other locations where one or more employees are working or are present as a condition of their employment.

Designating a matter as a “work related incident” does not constitute an admission of any liability with regard to any workers compensation claim presented which arises from the incident.

RECORDING OF INCIDENTS

Record those work-related injuries and illnesses that result in:

1. Death
2. Loss of consciousness
3. Days away from work
4. Restricted work activity or job transfer
5. Medical treatment beyond first aid

You must also record work-related injuries and illnesses that are significant (as defined below) or meet any of the additional criteria listed below.

You must record any significant work-related injury or illness that is diagnosed by a physician or other licensed healthcare professional. You must record any work-related case involving cancer, chronic irreversible disease, a fractured or cracked bone, or a punctured eardrum. See 29 CFR 1904.7.

ADDITIONAL CRITERIA

You must record the following conditions when they are work-related:

1. Any needlestick injury or cut by a sharp object that is contaminated with another person’s blood or other potentially infectious material.
2. Any case requiring an employee to be medically removed under the requirements of an OSHA health standard.
3. Tuberculosis infection as evidenced by a positive skin test or diagnosis by a physician or other licensed health care professional after exposure to a known case of active tuberculosis.
4. An employee's hearing test (audiogram) reveals:
 - a. that the employee has experienced a Standard Threshold Shift (STS) in hearing in one or both ears (averaged at 2000, 3000, and 4000 Hz).
 - b. the employee's total hearing level is 25 decibels (dB) or more above audiometric zero (also averaged at 2000, 3000, and 4000 Hz) in the same ear(s) as the STS.



MEDICAL VS. FIRST AID

Medical treatment includes managing and caring for a patient for the purpose of combating a disease or disorder. The following are not considered medical treatments and are NOT recordable:

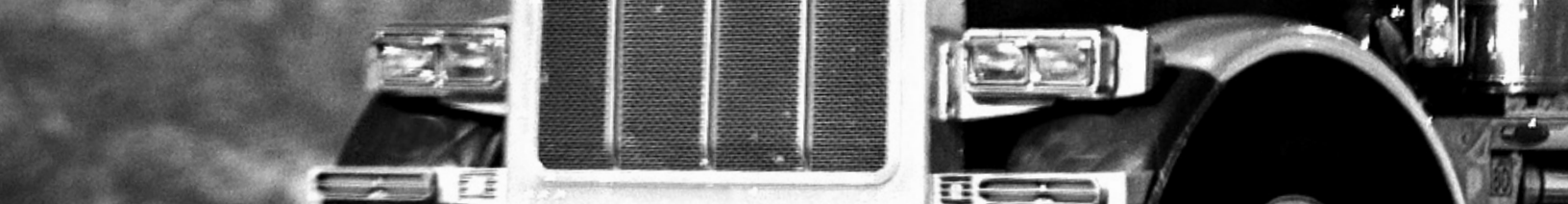
1. Visits to a doctor or healthcare professional solely for observation or counseling.
2. Diagnostic procedures, including administering prescription medications, that are used solely for diagnostic purposes; or any procedure possibly labeled first aid.

If the incident required only the following types of treatment, consider it first aid and DO NOT RECORD the case:

1. Using non-prescription medications at non-prescription strength.
2. Administering tetanus immunizations.
3. Cleaning, flushing, or soaking wounds on the skin's surface.
4. Using wound coverings, such as bandages, gauze pads, and/or butterfly bandages.
5. Using hot or cold therapy.
6. Using any totally non-rigid means of support, such as elastic bandages, wraps, non-rigid back belts, etc.
7. Using temporary immobilization devices while transporting an accident victim (splints, slings, neck collars, or back boards).
8. Drilling a fingernail or toenail to relieve pressure or draining fluids from blisters.
9. Using eye patches or simple irrigation/cotton swab to remove foreign bodies not embedded in or adhered to the eye.
10. Using irrigation, tweezers, cotton swabs, or other simple means to remove splinters or foreign material from areas other than the eye.
11. Using finger guards.
12. Using massages.
13. Drinking fluids to relieve heat stress.

RESTRICTED WORK

Restricted work activity occurs when, as the result of a work-related injury or illness, an employer or health care professional keeps, or recommends keeping, an employee from doing the routine functions of his or her job or from working the full work day that the employee would have been scheduled to work before the injury or illness occurred.



CLASSIFYING INJURIES

An injury is any wound or damage to the body resulting from an event in the work environment.

Examples: cut; puncture; laceration; abrasion; fracture; bruise; contusion; chipped tooth; amputation; insect bite; electrocution; or a thermal, chemical, electrical, or radiation burn. Sprain and strain injuries to muscles, joints, and connective tissues are classified as injuries when they result from a slip, trip, fall, or other similar incident.

CLASSIFYING ILLNESSES

Skin Diseases or Disorders

Skin diseases or disorders are illnesses involving the worker's skin that are caused by work exposure to chemicals, plants, or other substances.

Examples: contact dermatitis, eczema, or rash caused by primary irritants and sensitizers or poisonous plants; oil acne; friction blisters; chrome ulcers; or inflammation of the skin.

Respiratory Conditions

Respiratory conditions are illnesses associated with breathing hazardous biological agents, chemicals, dust, gases, vapors, or fumes at work.

Examples: silicosis, asbestosis, pneumonitis, pharyngitis, rhinitis or acute congestion, farmer's lung, beryllium disease, tuberculosis, occupational asthma, reactive airways dysfunction syndrome (RADS), chronic obstructive pulmonary disease (COPD), hypersensitivity pneumonitis, and toxic inhalation injury such as metal fume fever, chronic obstructive bronchitis, and other pneumoconioses.

Poisoning

Poisoning includes disorders, evidenced by abnormal concentrations of toxic substances in blood, other tissues, other bodily fluids, or the breath, that are caused by the ingestion or absorption of toxic substances into the body.

Examples: poisoning by lead, mercury, cadmium, arsenic, or other metals; poisoning by carbon monoxide, hydrogen sulfide, or other gases; benzene, benzol, carbon tetrachloride, or other organic solvents; insecticide sprays, such as parathion or lead arsenate; or other chemicals such as formaldehyde.

Hearing Loss

Noise-induced hearing loss is defined for record-keeping purposes as a change in hearing threshold relative to the baseline audiogram of an average of 10 dB or more in either ear at 2000, 3000, and 4000 Hz in the same ear(s).

Other Illnesses

Examples: heatstroke, sunstroke, heat exhaustion, heat stress, and other effects of environmental heat; freezing, frostbite, and other effects of exposure to low temperatures; decompression sickness; effects of ionizing radiation (isotopes, x-rays, radium); effects of nonionizing radiation (welding flash, ultra-violet rays, lasers); anthrax; bloodborne pathogenic diseases, such as AIDS, HIV, hepatitis B, or hepatitis C; brucellosis; malignant or benign tumors; histoplasmosis; and coccidioidomycosis.



PART 2: CALCULATING HOURS WORKED

At the end of the year, OSHA requires you to enter the average number of employees and the total hours worked by your employees on the 300A Summary. If you do not have these figures, you can use the information on the next two pages to estimate the numbers. You will need this information to calculate your incident rate as part of the Workplace Safety Awards program.

CALCULATING THE AVERAGE NUMBER OF EMPLOYEES WHO WORKED FOR YOUR COMPANY DURING THE YEAR

- _____ Enter the total number of employees your company paid in all pay periods during the year.
(A) Include all employees: full-time, part-time, temporary, salaried, and hourly.
- ÷ _____ Enter the number of pay periods your company had during the year.
(B) Be sure to include any pay periods when you had no employees.
- = _____ Divide (A) by (B). Round the sum (C) to the next highest whole
(C) number. Write the value for (C) in the box below.

This number represents your average number of employees for the year.

CALCULATING THE TOTAL HOURS WORKED BY ALL EMPLOYEES

Include hours worked by salaried, hourly, part-time, and seasonal workers, as well as hours worked by other workers subject to day-to-day supervision by your establishment (e.g., temporary help services workers). Do not include vacation, sick leave, holidays, or any other non-work time, even if employees were paid for it. If your establishment keeps records of only the hours paid or if you have employees who are not paid by the hour, please estimate the hours that the employees actually worked. If this number is not available, fill in the blanks below for an estimate.

- _____ Enter the number of full-time employees in your company for the year.
(A)
- x _____ Enter the number of work hours for a full-time employee in a year.
(B)
- = _____ Multiply (A) and (B) to calculate the total number of full-time hours worked.
(C)
- + _____ Enter the number of any overtime hours, as well as the hours worked
(D) by other employees (part-time, temporary, seasonal).
- = _____ Add together (C) and (D). Round the sum (E) to the next highest
(E) whole number. Write the value for (E) in the box below.

This is the number you will use for your Incident Rate calculation.
Write this number in the blank marked "Total Hours Worked Last Year" on the submission form on the last page.



PART 3: CALCULATING INCIDENT RATE

CALCULATING INCIDENT RATE*

An incident rate is the number of recordable injuries and illnesses occurring among a given number of full-time workers (usually 100 full-time workers) over a given period of time (usually one year). Computing incident rates can help to evaluate a trucking company's injury and illness experience over time or to compare a trucking company's experience with that of your industry as a whole. Because a specific number of workers and a specific period of time are involved, these rates can help identify problems in your workplace and/or progress you may have made in preventing work-related injuries and illnesses.

Incident rate is determined by multiplying the total number of incidents by 200,000 and then dividing by the total number of hours worked by all employees during a calendar year. The 200,000 figure in the formula represents the number of hours 100 employees working 40 hours per week for 50 weeks per year would work (provides a standard base for calculating incident rates). See the example below.

Company X had two incidents recorded last year. In that time, 25 employees worked a total of 52,000 hours. Their incident rate is as follows:

$$\frac{2}{\text{(Total Incidents Last Year)}} \times 200,000 \div \frac{52,000}{\text{(Total Hours Worked Last Year)}} = \frac{7.69}{\text{(Total Incident Rate)}}$$

Aside from submitting your results to Great West, you can also compare your incident rate with those submitted to the Bureau of Labor Statistics (BLS). BLS conducts a survey of occupational injuries and illnesses each year and publishes incident rate data by various classifications (e.g., industry, employer size, etc.). You can obtain this published data at www.bls.gov/iif or by calling your BLS Regional Office.

*When figuring the incident rate, do not include vehicle crashes in your submission, i.e. backing, rear-end, etc. Crash frequency is calculated separately for the National Safety Awards. However, do include cases in which the driver was injured as a result of a crash. The driver's injury does qualify under these calculations.

WORKPLACE SAFETY AWARDS SUBMISSION FORM

Calculate your company's Incident Rate using the formula below. When finished, fax or email this form to be considered for a Great West Casualty Company Workplace Safety Award.

STEP 1: Fill in the field for Total Incidents* Last Year.

STEP 2: Fill in the field for Total Hours Worked Last Year.

STEP 3: Calculate the Total Incident Rate.

STEP 4: Fill in the company information below and fax or email to your regional Safety Services Department by **March 1st.**

_____	X 200,000	÷	_____	=	
(Total Incidents Last Year)			(Total Hours Worked Last Year)		TOTAL INCIDENT RATE

Company: _____		TL <input type="checkbox"/>	LTL <input type="checkbox"/>
Contact Person: _____			
Policy Number: _____			
Address: _____			
City: _____	State: _____	Zip: _____	
Phone: _____	Fax: _____	Email: _____	

**Designating a matter as a "work-related incident" does not constitute an admission of any liability with regard to any workers compensation claim presented which arises from the incident.*

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The Difference is Service®





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