SAFETY & LOSS PREVENTION

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HANDWASHING AWARENESS WEEK DECEMBER 1-7,2019





HANDWASHING AWARENESS

Our hands are one of the most common transmitters of pathogens. Practicing hand hygiene is the simplest and most effective way to prevent infections.

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NATIONAL HANDWASHING AWARENESS WEEK december 1-7, 2019

This year, National Handwashing Awareness Week (December 1-7) reminds us all to be vigilant about hand washing to prevent the spread of germs, especially as cold and flu season kicks into high gear.

Handmashing

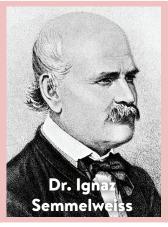
One of the most common modes of transportation for bacteria and viruses is via hands — in fact, 80% of communicable diseases can be transferred by touch, according to the Centers for Disease Control (CDC). This is why the single most important way to prevent the spread of infections and illnesses is through proper handwashing techniques. Bacteria and viruses can easily be picked up on your hands. Touching your face or preparing food with contaminated hands can allow these germs access into your body and cause illnesses such as colds, flu, strep throat, diarrhea, and pneumonia. (Pneumonia and diarrhea are the number one and number two causes of childhood death, and they are preventable!)

In order to avoid the spread of germs, the CDC strongly recommends washing your hands:

· Before, during, and after preparing food

- · Before eating food
- Before and after caring for a person who is sick with vomiting or diarrhea
- After using the toilet or cleaning a child who has used the toilet
- · After changing diapers
- After blowing your nose, coughing, or sneezing
- After touching an animal, animal waste, or animal food or treats
- · After touching garbage

Handwashing is simple and has been proven effective, and yet not everyone takes the time to

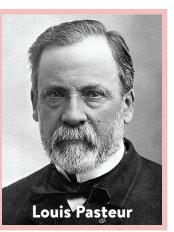


Did You Know...?

In 1847, Dr. Ignaz Semmelweiss, an early pioneer of antiseptic procedures, observed that infant deaths were drastically reduced

by hand disinfection with a chlorinated lime solution. Despite these results, Dr. Semmelweiss's findings did not align with the medical opinions of the time, and the medical community mocked him for it. In fact, some doctors were so offended at that suggestion that they should wash their hands that they committed him to an insane asylum, where he died just 14 days later of a gangrenous wound.

It wasn't until after his death that Dr. Semmelweiss's observations were provided support by the discoveries of French biologist and "father of microbiology" Louis Pasteur, who proved that microorganisms do not develop spontaneously, but rather through contamination.



do it. Less than 75% of women and less than 50% of men wash their hands after using the bathroom.

Even among those who do wash their hands, they probably aren't doing it right. A 2013 Michigan State University study observed 3,749 people in public restaurants and found that only 5% of people who washed their hands did so correctly. Notably, researchers in this study found that people were more likely to wash their hands when provided a clean sink, and that people at clean sinks scrubbed longer than those at dirty sinks. People were also more likely to wash their hands when a sign encouraging hand washing was present.

A more recent study in 2018 by the U.S. Department of Agriculture (USDA) found 97% of people failed to wash their hands sufficiently enough to kill harmful bacteria. This study involved placing 383 volunteers in test kitchens and observed them as they prepared food. Only 3% of these participants used proper handwashing techniques. Failure to do so can lead to crosscontamination of food and other surfaces, resulting in food-borne illnesses.

The most common mistake most people make is not washing long enough (most people in these studies washed for 6-10 seconds, whereas washing for at least 20 seconds is recommended), followed by not using soap and neglecting to dry hands after washing (damp hands are 1,000 times more likely to spread bacteria than dry hands). How do you know whether you are washing your hands correctly? The CDC recommends following these **five steps:**

- Wet hands with clean, running water. Standing water often contains germs that can recontaminate clean hands. Temperature does not affect microbe removal, so use water at a temperature that is comfortable for you. Turn off the faucet to save water once hands are wet.
- 2)Lather up by applying soap and rubbing hands together. Soap works as a surfactant to break down dirt and germs, and friction helps to loosen them. Be sure to lather all surfaces, including the backs of hands, between fingers, and under fingernails. NOTE: The Food and Drug Administration has ruled that antibacterial soaps made with triclosan are no more effective than regular soap and water. Overuse of products with triclosan can potentially create antibiotic-resistant bacteria and have been linked to other health problems as well. Antibacterial soaps should not be used except in healthcare settings.

3)**Scrub hands** for at least 20 seconds (the time it takes to sing the Happy Birthday song twice). Shorter periods of scrubbing do not adequately remove germs.

4)**Rinse hands** under clean, running water. Soap and friction lift dirt and germs, and running water rinses them away.

The American Medical Association and the American Academy of Family Physicians endorse the following **Four Principles of Hand Awareness:**

1) Wash your hands when they are dirty

- 2) Wash your hands before eating
- 3) Do not cough or sneeze into your hands
- 4) Do not put your fingers in your eyes, nose, or mouth

5)**Dry hands** using a clean towel or air dryer (remember that wet hands transfer germs more easily than dry hands). The jury is out on which method is more effective or better for the environment, so use whichever hand drying method you prefer.

Washing with soap and water remains the preferred method of removing dirt and germs from hands. But what if soap and water are unavailable? Hand sanitizers containing at least 60% alcohol can help to kill germs when you cannot wash your hands. According to the CDC, hand sanitizer is an acceptable alternative to soap and water in some situations. For instance, in healthcare settings, healthcare professionals must clean their hands constantly throughout the day, and handwashing stations are not always available. However, the CDC suggests always using soap and water after using the bathroom, and when preparing food.

As with handwashing, hand sanitizers must be used correctly in order to be effective:

- Apply gel to the palm of one hand (read the label for the correct amount – a common mistake is not using enough gel to kill germs).
- 2)**Rub hands together.** Rub all surfaces of the hands and fingers until hands are dry. This typically takes about 20 seconds. **Be sure hands are dry before using them.**

NOTE: While hand sanitizers can reduce the number of some germs, they do not kill certain germs, such as C.diff, nor do they remove dirt, grease, pesticides, or heavy metals from hands. Hand sanitizers may not be as effective on visibly dirty or greasy hands. Keep hand sanitizer out of the reach of young children, as alcohol poisoning can occur if swallowed.

HAND HYGIENE IN HEALTHCARE

Hand hygiene in healthcare facilities is even more important as a preventative measure against the spread of infectious bacteria. Yet studies show one in every 25 hospital patients experiences a secondary infection every day. Why? Studies also show that healthcare providers clean their hands less than half as often as they should.

Proper hand hygiene must be understood and practiced by all people working in healthcare facilities. Hospitals, nursing homes, and clinics should have a hand hygiene program. This can improve adherence by staff to hand hygiene practices, which can reduce infections and the spread of antibiotic-resistant bacteria. An effective hand hygiene program should do the following:

- · Provide annual training for all personnel
- · Assess hand hygiene techniques being used for efficacy and adherence
- · Identify and address barriers to hand hygiene
 - Are enough handwashing stations and hand sanitizers available in all resident and patient care areas?
 - Are the personnel satisfied with the hand hygiene products provided?
- Use "cues to action" such as posters, signs, pamphlets, etc. to enhance awareness of personnel, residents, and visitors to the facility.

In addition to the recommendations for the general public, the CDC has the following guidelines for healthcare personnel. Clean hands:

- · Before preparing food for patients
- · Before and after direct contact with a patient's intact skin
- After direct contact with blood, mucous or other bodily excretions, nonintact skin, or wound dressings
- After contact with inanimate objects (e.g. medical equipment) in the patient's immediate vicinity
- $\cdot\,$ Before moving hands from a contaminated body site to a clean body site during patient care
- · After glove removal



A "cue to action" such as these handwashing posters, can increase adherence to hand hygiene practices in workplaces and healthcare facilities.

NOTE: Certain pathogens, such as C.diff bacteria, are not killed by alcohol-based hand sanitizers, and are notoriously difficult to remove from hands, even with proper handwashing. Gloves should be used in addition to (NOT instead of) handwashing to prevent hand contamination.

CLIMBING UP

without **FALLING DOWN**



We've all done it — stood on a chair to reach a high shelf, climbed onto a desk to hang a banner from the ceiling, cut a corner to save time. Unfortunately, chairs and tables are not designed for standing on and can tip easily when weight is not distributed properly, causing serious injuries.

Between July 2018 and June 2019, employees at state agencies and universities filed 2,177 reports of slip, trip, or fall injuries, costing the state of Florida more than \$7.3 million in injury claims. Of these, 40 occurred when the employee fell off a ladder or a stool, or stood on something other than a ladder or a stool.

Falling is the most common accident for office workers, according to the Centers for Disease Control. In fact, office workers suffer fall-related injuries more than twice as often as non-office workers.

Fortunately, the solution is simple:

ALWAYS USE A STEP STOOL OR LADDER!

Employers are required to provide a proper step stool or ladder for accessing outof-reach items. If you do not know where to find a step stool in your office, ask for one before completing any task that cannot be done within ordinary reach. Like any tool, step stools and ladders must be used safely:

- Be sure the step stool is in good condition and will hold your weight (observe capacity ratings posted on the stool).
- Place the stool on level ground, as close as possible to the object you are trying to reach.
- Always center your weight on the stool never lean to the side or attempt to pick up items from the floor.
- Keep both feet flat on the step stool at all times. If you are on a stool and still cannot reach without standing on your toes, use a ladder instead.
- Never use a step ladder folded flat as a straight ladder, as it needs to be open in order to be stable.

HOW TO CHOOSE THE RIGHT TOOL FOR THE JOB

Determining which type of stool or ladder to use means familiarizing yourself with the different options and their uses:





STEP STOOL: The smallest of the climbing tools, with 1-3 steps. Self-standing (does not need to be leaned against any type of support to be used). Many can be folded flat. Mostly used indoors to reach items on tall cabinets and shelves.

STEP LADDER: Larger, heavier, more sturdy, and better for more demanding tasks than step stools. Good for reaching higher areas anywhere in a room for a short period of time (e.g., changing a lightbulb, cleaning a tall piece of furniture, etc.). Self-standing and typically foldable. Can be used indoors or outdoors. Can have rungs on one side or both sides.

PLATFORM LADDER: Similar to a step ladder, but with a platform and a guard rail at the top. Better for extended periods of time and jobs that require two hands, as it provides a comfortable work area on which to stand, or even turn around. Good for tasks like painting, wiring, construction, etc.

EXTENSION OR "STRAIGHT" LADDER: Consists of two parts – the "base," which must be planted firmly on the ground, and the "fly," which can extend to make the ladder's reach taller. They are without support and must be leaned against something to be used. Used primarily outdoors for reaching second story windows, roofs, or trees. Be sure the ladder is tall enough to extend at least 3 feet above the point of support and to be set at the proper angle (one quarter of the working length of the ladder from the vertical surface).

MULTI-PURPOSE LADDER: A combination ladder that can be folded into different positions depending on the task. Can be folded into a step ladder, extended into a straight ladder, or even used to make scaffolding for planks or platforms.

SCARED SAFE

AVOIDING HALLOWEEN HAZARDS

Forget the ghosts and ghouls – the most frightening thing about October 31 is the risk of injury and death from accidents. Here are some of the most common Halloween hazards and how you can avoid them.

CARS: Child pedestrians are twice as likely to be struck and killed by a car on Halloween than on any other day of the year. Most of these accidents occur between the hours of 5:00-9:00 pm, with children ages 12-15 being most at risk (likely because this is the age when children are old enough to trick-or-treat without supervision). Young drivers aged 15 to 25 pose the most risk of striking a pedestrian (33%), followed by drunk drivers (14%), who put everyone at risk, not just pedestrians. According to the National Highway Traffic Safety Administration, 44% of all people killed in car crashes on Halloween night are caused by drunk drivers.

- Supervise children under 12 years of age, and instruct older children how to stay safe by staying in groups and well-lit areas. Walk on sidewalks or paths whenever possible. Cross at crosswalks and street corners.
- Pedestrians should wear bright colors and/or reflective tape, or flashing lights on clothing and bags to make themselves more visible. Carry glow sticks and/or flashlights. Be extra careful when wearing a mask that can block your view.

• Drivers should take extra care to look out for pedestrians. DON'T DRIVE if you have been drinking alcohol. Remember, buzzed driving is drunk driving.

FIRE: Many traditional Halloween decorations involve open flame – candles, jack-o-lanterns, etc. Unfortunately, a lot of other popular decorations, such as dried flowers, cornstalks, and crepe paper, as well as billowy costumes, are highly flammable. The National Fire Protection Association reports that Halloween decorations ignite and cause around 900 home fires each year.

- Use glow sticks or battery-operated candles instead of real candles in jack-o-lanterns and walkways. If you choose to use real candles, never leave them unattended.
- Never place candles near flammable objects or in areas where people may knock them over.
- Wear flame-resistant materials, such as nylon and polyester.

KNIVES: Even the most expert pumpkin carver can have an accident. Pumpkin carving caused 41% of the estimated 4,500 Halloween related injuries reported in 2017, according to the U.S. Consumer Product Safety Commission.

Use only the small pumpkin carving tools that come in kits, which are designed to minimize injuries (and make carving elaborate patterns easier).

TRIPS & FALLS: Long, bulky costumes, masks that obscure vision of obstacles, and the darkness all contribute to tripping and falling, the second most common Halloween-related injury. Falling from heights while setting up or taking down Halloween decorations is also common. Use face paint or makeup instead of masks to improve vision. (Be sure to use FDA approved products, and test them for allergic reactions before using them on your face.)

Alter any costumes to prevent tripping before leaving the house. Be sure to use a proper ladder, and use it properly when setting up decorations. For the do's and don'ts of ladder safety, see the Consumer Product Safety Commission's post here. onsafety.cpsc.gov/ blog/2011/12/03/ladder-safety-101/

Following these Halloween safety tips can help keep you and your loved ones out of the hospital, or worse ... the graveyard! Happy haunting!



WORKPLACE VIOLENCE WARNING SIGNS

Employees are the first line of defense against workplace violence. Be alert to disturbing behavior and report concerns to your supervisor or human resources department.

POTENTIAL WARNING SIGNS

Look out for these signs of potential trouble:

- · Increasingly erratic, unsafe, or aggressive behavior
- Crying or moodiness, sudden changes in personality
- Feelings of hostility regarding a perceived injustice or wrongdoing
- Social isolation from friends and colleagues
- Sudden decrease in work performance, excessive tardiness or absenteeism
- Changes in home life or marital status; financial or legal difficulties
- Airing of grievances with threats and/or plans of retribution

- $\cdot \,$ Making unreasonable or impossible demands
- Showing disrespect and/or holding grudges against authority figures
- Obsession with real-life incidents of workplace violence and/or weapons

Most employees who commit acts of violence in the workplace will show potential red flags before ever committing a violent act. It may feel uncomfortable to do so, but reporting your concerns can help supervisors and human resource managers put the pieces together to stop potential incidents of violence before they happen — better to err on the side of caution.

APPROPRIATE INTERVENTION

Here's how you can help ensure the safety of you and your colleagues:

- Be aware of sudden, drastic changes in attitude or behavior toward others
- Take note of any or all of the potential warning signs listed on this page
- Reach out for help by providing supervisors and human resource managers with any information regarding potentially concerning behavior
- Call 911 or local law enforcement in the case of an active emergency

IN AN ACTIVE SHOOTER SITUATION, REMEMBER: RUN. Leave belongings behind HIDE. Out of sight, behind a door or large piece of furniture FIGHT. Attempt to incapacitate or disrupt the shooter HIDE. Out of sight, behind a door or large piece of furniture FIGHT. Attempt to incapacitate or disrupt the shooter HIDE. Out of sight, behind a door or large piece of furniture FIGHT. Attempt to incapacitate or disrupt the shooter HIDE. Out of sight, behind a door or large piece of furniture HIDE. Out of sight, behind a door or large piece of furniture HIDE. FIGHT. Attempt to incapacitate or disrupt the shooter HIDE. Out of sight, behind a door or large piece of furniture HIDE. FIGHT. Attempt to incapacitate or disrupt the shooter HIDE. Out of sight, behind a door or large piece of furniture HIDE. Out of sight, behind a door or large piece of furniture HIDE. FIGHT. Attempt to incapacitate or disrupt the shooter HIDE. FIGHT. Attempt to incapacitate or disrupt the shooter HIDE. FIGHT. Attempt to incapacitate or disrupt the shooter HIDE. FIGHT. Attempt to incapacitate or disrupt the shooter HIDE. FIGHT. Attempt to incapacitate or disrupt the shooter HIDE. FIGHT. Attempt to incapacitate or disrupt the shooter HIDE. FIGHT. Attempt to incapacitate or disrupt the shooter HIDE. FIGHT. Attempt to incapacitate or disrupt the shooter HIDE. FIGHT. Attempt to incapacitate or disrupt the shooter HIDE. FIGHT. Attempt to incapacitate or disrupt the shooter HIDE. FIGHT. Attempt to incapacitate or disrupt the shooter



An email blast will be sent from the State Loss Prevention Program prior to each of these webinars with registration information.

UPCOMING TRAINING WEBINARS FOR 2019:

10/09/19 ACCIDENT INVESTIGATIONS

10/23/19 SAFETY COORDINATOR ORIENTATION

11/06/19 GETTING THE MOST OUT OF YOUR SAFETY COMMITTEE MEETING

All webinars will be offered on each date through GoToMeeting at both 10:00 am and 2:00 pm (Eastern Time).

For questions, contact Juana Powell in the Division of Risk Management / Loss Prevention: Juana.Powell@myfloridacfo.com

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Florida Department of Financial Services Division of Risk Management

200 East Gaines Street Tallahassee, Florida 32399

Molly Merry, CPA Division Director

Robin Delaney Assistant Division Director

Jeffrey W. Cagle Chief of Risk Financing & Loss Prevention

Wendy McSwain, MSA Loss Prevention Section Administrator



Office of the Director

State of Florida Loss Prevention Section

Bureau of State Liability & Property Claims

Bureau of State Employee Workers' Compensation Claims (850) 413-3123

Safety Coordinator Appointment Form

(850) 413-4700
(850) 413-4756
(850) 413-3122
(850) 413-3123
(850) 413-4756

SAFETY AND LOSS PREVENTION OUTLOOK TEAM:

Lori Taylor Managing Editor/Writer

Wendy McSwain Staff Editor

Terry Taylor Graphic Designer

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