

JANUARY 2015 – Winter Edition

Slip, Trip and Fall Prevention

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Work-related slip, trip and fall incidents rank second to overexertion injuries in the healthcare industry with 25% of all work related injuries. For KING, slips, trips and falls accounted for 20% of all work related injuries and 24% of the cost for 2013. In addition, slips, trips and falls were significantly more likely to result in fractures and multiple injuries than were other types of injuries.

Research conducted by the National Institute for Occupational Safety and Health (NIOSH) has shown that implementing a comprehensive STF prevention program in the healthcare environment can lead to significant declines in STF-related workers' compensation claims. Some facilities reported a 59% decline after implementing a comprehensive STF prevention program.



The top 10 contributing factors for Slips, Trips and Falls in the healthcare industry is wide and varied:

- 1. Contaminates on the floor (Water, Grease, Oil, Fluids, Food)
- 2. Poor Drainage: Pipes and Drains
- 3. Indoor walking surface irregularities
- 4. Outdoor walking surface irregularities
- 5. Weather conditions: ice and snow
- 6. Inadequate Lighting
- 7. Stairs and handrails
- 8. Stepstools and ladders
- 9. Tripping Hazards: clutter, including cords, hoses and wires
- 10. Improper use of floor mats and runners

First Steps Towards Prevention

Review incident reports, workers' compensation claims, OSHA logs and staff logs for narrative descriptions of incidents and identify what types of STFs are most common at your facility. Identify specific locations and where multiple STFs or "injury hot spots" may have happened over the years.





Slips, Trips or Falls

- 1. What was the first initiating event?
 - Slip
 - Trip (including caught on)
 - Loss of Balance
 - Unknown
- 2. Which choice best describes the STF injury event?
 - A slip or trip that did not result in a fall
 - A fall from an elevation, such as 0
 - A fall while standing on a chair
 - A fall from a ladder or stepstool
 - A fall down stairs or steps
 - A fall from a non-moving vehicle
 - Other fall from an elevation (describe)
 - A same-level fall, such as
 - A fall while walking or working
 - A fall from a chair while sitting
 - A fall while tripping up stairs
 - Other same-level fall (describe)

Editor's Note:

The KING Safety Matters newsletter is published quarterly to provide general safety information. It is not a substitute for adequate safety training, or intended to provide complete safety information or training, on any specific subject. The information contained herein is intended to assist safety efforts, and increase safety awareness.

In order to ensure the contents of the newsletter are helpful and important to you, please feel free to send comments, suggestions and feedback to:

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- 3. Where there are hazards present that may have contributed to the injury event?
 - Contaminant (examples: water, soap, body fluids, grease/oil, coffee, wax, gel, slippery not otherwise • classified, etc.)
 - Objects (examples: objects or items on the floor, propped against the wall or in the pathway)
 - Ice or snow
 - Surface irregularity due to buckled, loose or damaged mat, carpeting or rug, cracked tile, loose gravel, utility hole in floor
 - Curb or wheel stop •
 - Bodily reaction (examples: awkward posture, reaching, crouching, bending, or stated they just "fell") •
 - Lack of space/restricted pathway
 - Steps, stair or handrails •
 - Chair or stool
 - Lighting •
 - Inappropriate or malfunctioning footwear

All healthcare facility employees are at risk, therefore all employees should be trained on how to recognize STF hazards and be involved in the development and implementation and prevention of strategies. It is important to have a written program to cover housekeeping, reporting spills, initiating a prompt response for all staff.

In addition, check out the resources available in the Library on the KING website at www.kingonline.org. **Resources: NIOSH. OSHA**

