



# Loss Control and YOU

## Cuts & Lacerations

By **Mike Huss**  
Loss Control Supervisor

Annually, millions of people suffer preventable workplace injuries. Cuts and lacerations often rank as the second or third largest source of these injuries. Roughly 30 percent of all workplace injuries involve cuts or lacerations, and not surprisingly 70 percent of those injuries are to the hands or fingers. Thankfully, these incidents have been decreasing in recent years.

Common injuries include:

- Scratches, abrasions, or minor cuts requiring first aid
- Needle sticks, or puncture wounds
- Deep lacerations requiring medical attention such as sutures
- Lacerations involving nerve and/or tendon damage
- Amputations

### Causes

Cuts are often due to external physical forces, accidental injury and actions such as:

- Employees in a hurry, taking short cuts or not following safety guidelines
- Improper training and lack of established safety procedures
- Failure to wear cut-resistant gloves or wearing improper gloves for the job
- Contact with sharp items such as nails, screws, steel/metal, glass, staples, splinters, paper, etc.
- Hand tools with blades e.g., knives, box cutters, screw-

drivers, chisels

- Powered machinery with missing or improperly adjusted guarding of cutting blades, pinch points, chain and sprockets, conveyor belts, etc.
- Improper tool for the job or tool used improperly e.g., using scissors or kitchen cutlery as a utility knife, using a screwdriver as a pry bar
- Tools in poor condition e.g., slippery, cracked or broken handle, dull blade
- Poor housekeeping (e.g., clutter, debris), and poor lighting

### Control Measures

One of the most common sources of cuts and lacerations is the use of knives and other cutting tools. The key to preventing these and other types of injuries is keeping body parts away from these hazards, and establishing work procedures to identify and control the exposure. Control measures to consider include:

- Developing effective procedures and training employees to follow them
- Wear proper personal protective equipment e.g. eyewear, gloves, sleeves, long pants, etc.
- Maintaining proper machine guarding at all times
- Use the proper tool for the job and inspect tools prior to use
- Safely use the tool as intended and keep the tool under control at all times
- Always use a sharp blade since a dull blade requires greater force which increases potential hazards
- Pull the blade toward you

when cutting on a horizontal surface

- Practice good housekeeping and keep work areas clear
- When cutting thick material, use several passes of the blade and apply increasing downward pressure with each pass
- Don't leave exposed blades unattended; use self-retracting cutting blades
- Maintain proper storage or use a separate drawer for sharp cutting tools

### Treatment

Minor cuts and scrapes usually don't require a trip to the emergency room. Yet proper care is essential to avoid infection or other complications. These guidelines can help you care for simple wounds:

1. **Clean the wound** - rinse the wound with cool clear water. Wash around the cut with soap; avoid getting soap into the wound as this can irritate the wound. Use tweezers cleaned with rubbing alcohol to remove any dirt and debris remaining in the wound.
2. **Stop the bleeding** - minor cuts and scrapes usually stop bleeding on their own. If they don't, apply gentle direct pressure with a clean cloth or bandage. Hold the pressure continuously for 20 to 30 minutes and if possible elevate the wound. A wound that is more than 1/4-inch deep or is gaping or jagged edged and has fat or muscle protruding usually requires stitches.
3. **Apply an antibiotic** - after

you clean the wound, apply a thin layer of an antibiotic cream or ointment to help keep the surface moist. The ointment can discourage infection and help your body's natural healing process.

4. **Cover the wound** - bandages can help keep the wound clean and keep harmful bacteria out. Change the dressing at least daily or whenever it becomes wet or dirty. After the wound has healed enough to make infection unlikely, exposure to the air will promote wound healing.
5. **Watch for signs of infection** - see a medical professional if the wound isn't healing or you notice any redness, increasing pain, drainage, warmth or swelling.
6. **Get a tetanus shot** - doctors recommend a tetanus shot every 10 years. If your wound is deep or dirty and your last shot was more than five years ago, your doctor may recommend a tetanus shot booster. Get the booster as soon as possible after the injury.

With thorough analysis, planning, awareness and proper treatment you can develop a cut prevention plan to help eliminate these types of injuries from your workplace.

# Safety News & Events Calendar

By [Kim Coonrod](#)  
Loss Control Manager

## [NIOSH Publishes Guide to Preventing Health Care Falls](#)

"Slip, Trip, and Fall Prevention for Healthcare Workers," DHHS (NIOSH) Publication No. 2011-123, has been posted by NIOSH. The agency cited 2009 U.S. Bureau of Labor Statistics data: The incidence rate of lost workday injuries from same-level slips, trips, and falls in health care facilities was 38.2 per 10,000 employees, which was 90 percent above the average rate for all other private industries combined (20.1 per 10,000 employees). According to NIOSH, slips, trips, and falls are the second-most-common cause of lost workday injuries in health care facilities.

The 56-page booklet includes a slips, trips, and falls checklist, prevention tips, a section about employee training and communication, and separate sections about each of 10 top hazards causing slips and falls for workers.

## [Needlesticks, Sharps Injuries Dropping but Safety Device Push Must Continue](#)

Reducing sharps injuries is one of the great success stories of occupational health and infection prevention. October 2010 marked the 10th anniversary of the Needlestick Safety and Prevention Act, which is credited with changing the safety paradigm. While many challenges remain to protect health care workers, safety experts are pausing to acknowledge the progress that's been made. They also are touting changes in device design that evolved from simplistic needle shields to passive devices that don't require additional steps to activate safety features.

## [Institute Offers 10 Tips for Preventing Workplace Violence](#)

The National Institute for the Prevention of Workplace Violence recently released a list of 10 key lessons learned from workplace violence incidents in the 21<sup>st</sup> century.



The institute, which provides research, training and consulting on violence prevention, cited recent shootings at Virginia Tech, CNN, Kraft Goods and Fort Hood, among other places.

### Safety Calendar

**March**—[Workplace Eye Wellness Month](#)

**April**—[Alcohol Awareness Month](#)

**May**—[National Electrical Safety Month](#)

### Lessons from Losses

By [Courtney Rosengartner](#)  
Loss Control Coordinator

A nursing home housekeeper strained her back when assisting a fallen resident from the floor to his wheelchair. The claimant was not trained in patient care duties such as lifting. The next day she felt strong pains in her middle and lower back. She missed a few days from work and was released on light duty with a fifteen pound lifting limit. The nature of her work requires her to bend and move continuously cleaning the facilities. She continues to suffer from back pain and her treatment is ongoing.

Training in safe patient handling should be provided. Hazards include overexertion, lifting alone, lifting patients who cannot support their own weight and awkward postures. Manual lifting should be minimal

and only performed by authorized personnel. Mechanical lifting and transfer devices should be supplied and used every time.

According to the Bureau of Labor Statistics employees in nursing and personal care facilities suffer over 200,000 work-related injuries and illnesses a year. Many of these are serious injuries. More than half require time away from work. Worker's compensation costs for the industry now amount to nearly \$1 billion per year. Workers in nursing homes are 2x as likely as other workers to be injured on the job.

### Safety Programs

By [Nick Gustafson](#)  
Loss Control Coordinator

A comprehensive written safety program is an important tool for every business to have, in fact, in many cases it is required by state or federal OSHA regulations. A written program gives your employees vital information on how to avoid injuries and what to do in case of an emergency. FirstComp offers templates for written programs as well as assistance in developing a program that's right for your business. Contact the Loss Control department to request assistance in designing the program that fits your needs!

**For information about any of FirstComp's Loss Control Services, please call (888) 500-3344 or email [losscontrol@firstcomp.com](mailto:losscontrol@firstcomp.com)**

## Class Code

## Focus:

## Long Term Care

[A Back Injury Prevention Guide for Health Care Providers – Cal/OSHA](#)

[Safe Lifting and Movement of Nursing Home Residents – CDC](#)

[Ergonomics for the Prevention of Musculoskeletal Disorders – OSHA](#)

[Information for Employers – Complying with OSHA's Bloodborne Pathogens Standard](#)

[A Best Practices Approach for Reducing Bloodborne Pathogens Exposure – Cal/OSHA](#)

[Model Plans and Programs for the OSHA Bloodborne Pathogens and Hazard Communications Standards – OSHA](#)

[Workbook for Designing, Implementing, and Evaluating a Sharps Injury Prevention Program – CDC](#)

[Preventing Needlestick Injuries in Health Care Settings – NIOSH](#)

[Slip, Trip, and Fall Prevention for Healthcare Workers - NIOSH](#)

[Guidelines for Preventing Workplace Violence for Health Care & Social Service Workers](#)

[Personal Protective Equipment – OSHA](#)

[Eye Protection for Infection Control - CDC](#)

[Employee Fire and Life Safety – NFPA](#)