



# Using Self-Assessments Tools To Cost Effectively Improve Your Injury Prevention Program

Jason Barry, BSI

Lucas Digman, CSP, Mayo Clinic



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# Webinar Logistics

- All participants are muted
- 45 minute presentation
- 10 minutes Q&A session
  - Use the Questions box on your sidebar to submit questions
  - We'll respond to as many questions as we can in the Q&A session so we can end on time!
- Web/Phone Conference Issues or Concerns
  - If you are having difficulty seeing/hearing the presentation, please submit a question using the Questions box
- A short evaluation survey will be sent after the session – please help us with your feedback!
- All attendees will receive a link to the recorded webinar and presentation slides within a day or two of the webinar

# Today's Speakers



Jason Barry  
Senior Consultant, BSI EHS Services and Solutions

- An accomplished healthcare EH&S professional who specializes in reducing staff injuries through the combined application of systems safety and technology solutions.
- Has worked with leading healthcare organizations across the US to successfully help drive down costs and improve efficiencies at hospital sites.
- Previously worked as the Injury Prevention Program Manager at UCLA Health and as the Center of Excellence position for Healthcare Risk & Safety under the UC Office of the President's enterprise risk management initiative.

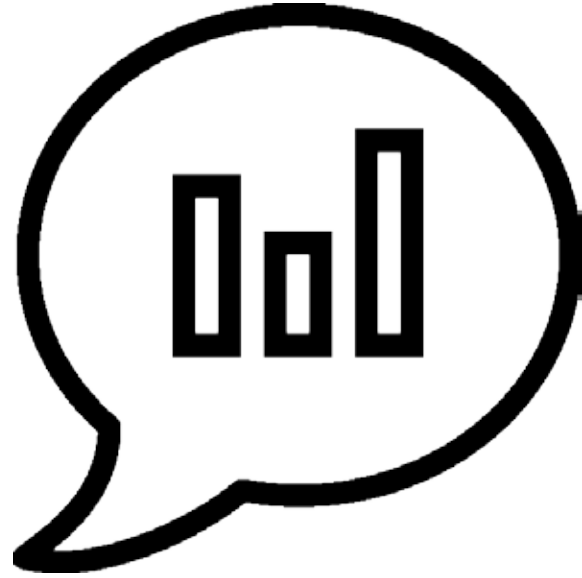
# Today's Speakers



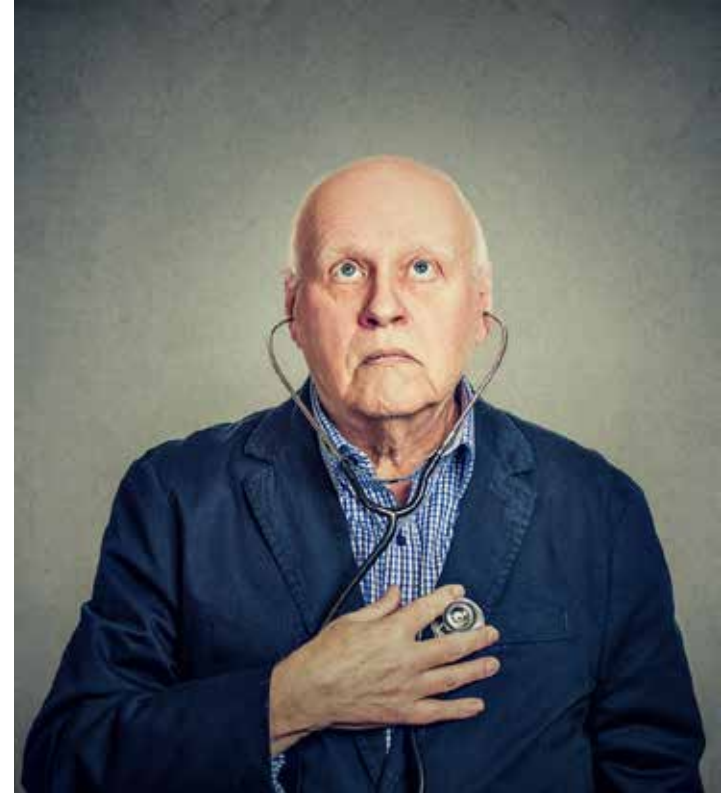
Lucas Digman, CSP  
Safety Coordinator, Mayo Clinic

- Focuses on facilitating system based improvements with specific experience working with clinical and research laboratories, environmental services, and respiratory therapy.
- Has experience in technology as it applies to safety management and led the development and deployment of an electronic supervisor safety self-assessment.
- Began his career at Mayo Clinic in 2003 as a clinical laboratory technologist before transitioning to a safety role in 2008.
- Holds the Certified Safety Professional (CSP) designation, a BS in Biology from the University of Wisconsin – Superior, and an MS in Risk Control from the University of Wisconsin – Stout.

**Interactive Poll - What role do you have in your organization**

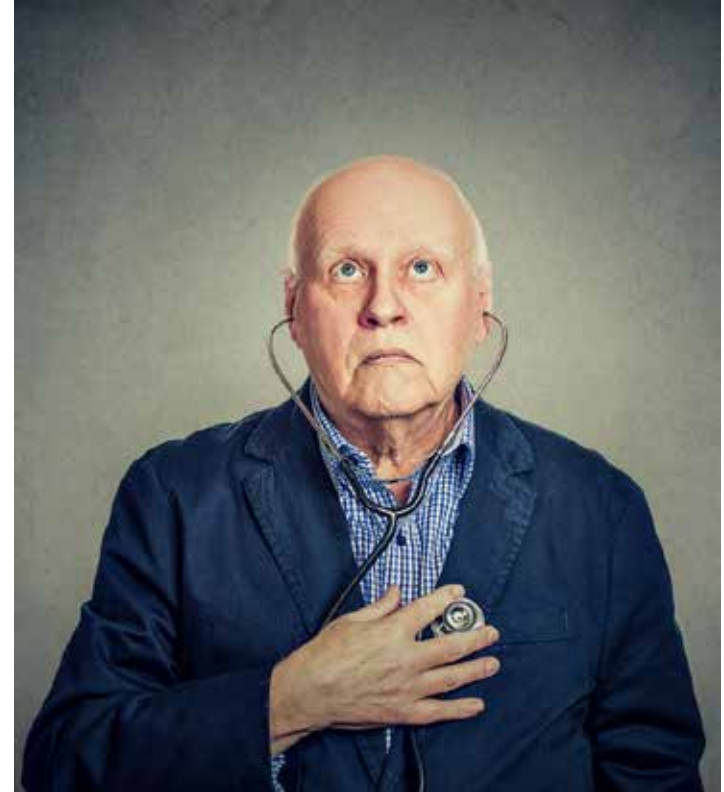


# Leading Statement



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- As a professional interested in staff injury prevention, self assessments are:



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- As a professional interested in staff injury prevention, self assessments are:
  - The most cost effective way to assess your safety program(s)
  - One of the best ways to extend your reach to more areas and/or sites
  - A necessary tool to drive your EHS strategy





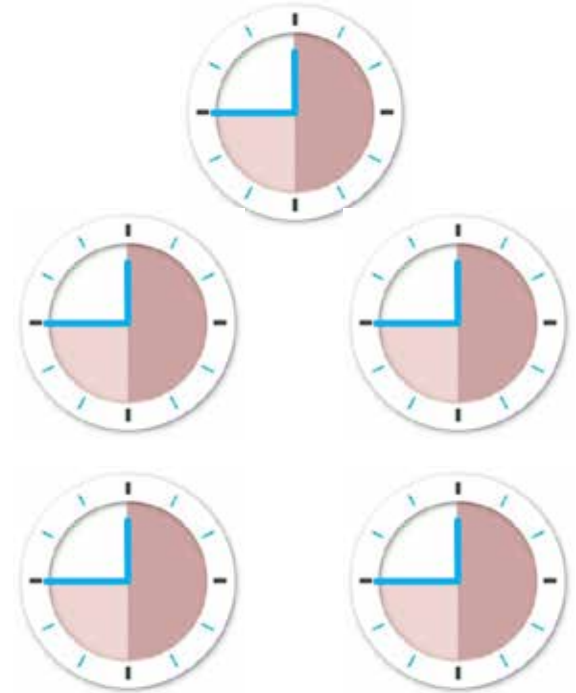
# Consider This...

- How much time would it take for you/your staff to assess a site's safety program (from top to bottom)?



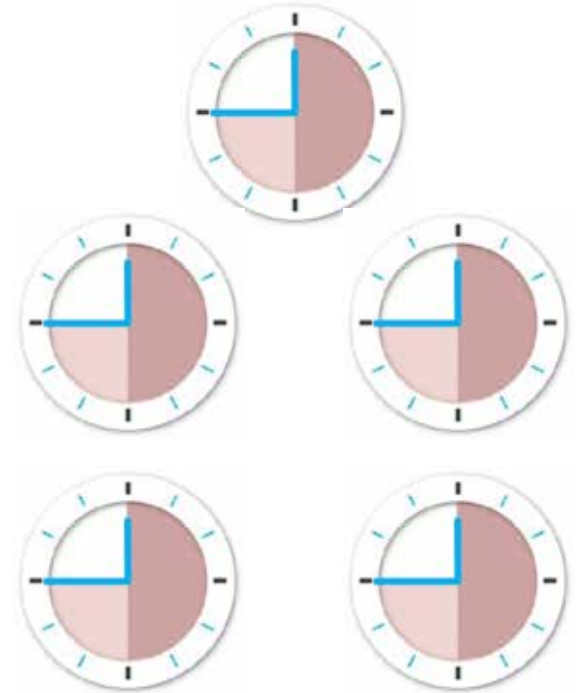
# Consider This...

- How much time would it take for you/your staff to assess a site's safety program (from top to bottom)?
- How about 5 sites? 10?



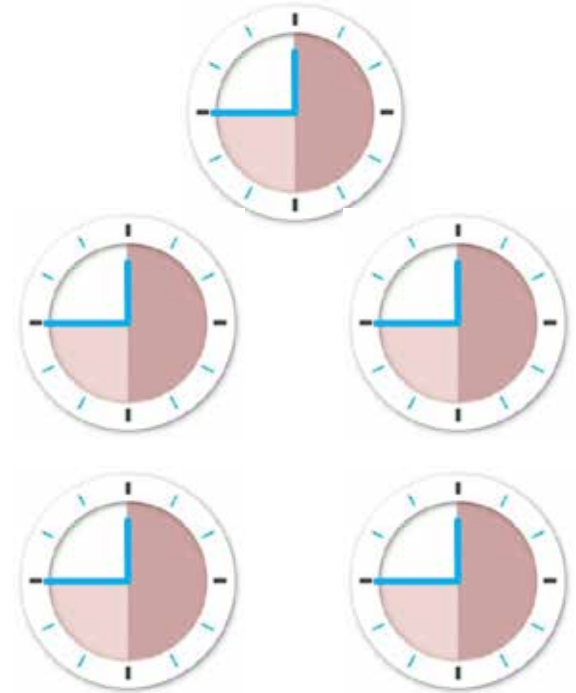
# Consider This...

- How much time would it take for you/your staff to assess a site's safety program (from top to bottom)?
- How about 5 sites? 10?
- What ball would be dropped if you focused your time on assessments?



# Consider This...

- How much time would it take for you/your staff to assess a site's safety program (from top to bottom)?
- How about 5 sites? 10?
- What ball would be dropped if you focused your time on assessments?
- Say you need outside help... how much would consultants charge to assess your site(s)?



**Interactive Poll - How much time would you estimate for you/your staff to assess a single site's safety program (from top to bottom)?**



# What We'll Cover Today

- In this webinar, we'll cover
  - What self-assessments are
  - A case study of how Mayo Clinic uses them
  - How you can design and implement self-assessments at your site(s)
  - Questions and answers



# So, What Are Self-Assessments?

# Definition

- Self-driven questionnaires designed to measure performance against a set standard or goal



# They Are A Combination Of...

Standards/Goals



An interview by a Subject Matter Expert (SME) where they “drill down” into specific content



# What Does That Really Mean?

- Self-Assessments are the result of taking a standard, or goal, and converting it into a series of questions

# Example

## **Standard:**

The organization/business unit/department has an effective process to identify hazards, establish controls, and measure effectiveness of controls over time

# Example

## Standard:

The organization/business unit/department has an effective process to identify hazards, establish controls, and measure effectiveness of controls over time

## Break the Standard Down Into Elements:

1. A process to identify hazards
2. A process to establish controls
3. A mechanism to measure effectiveness of controls over time
4. The processes are effective

# Example

## **Create Questions That Verify If Elements Are In Place**

1. Is there a policy/procedure in place for hazard ID?
2. Are hazards controlled in accordance with the hierarchy of controls?
3. Is there a mechanism in place to track hazards and controls?
4. Are job tasks periodically assessed to determine if controls are effective?
5. etc....

# Example

## Site Level Self-Assessment

(for measuring program elements across various sites)

Self Assessment Tool



Jason Barry

SELF-ASSESSMENT

Self-Assessment

### Hospital Staff Injury Prevention Core Elements Self-Assessment

At your organization...

#### Section 1 - Organizational Values

Is employee safety clearly viewed by staff and leadership as an organizational core value on the same level of importance as productivity, quality and patient safety?

Yes

No

Is there a written employee safety policy or plan in place?

Yes

No

Are employee safety results or metrics reviewed and discussed routinely at executive meetings?

Yes

No

# In Summary

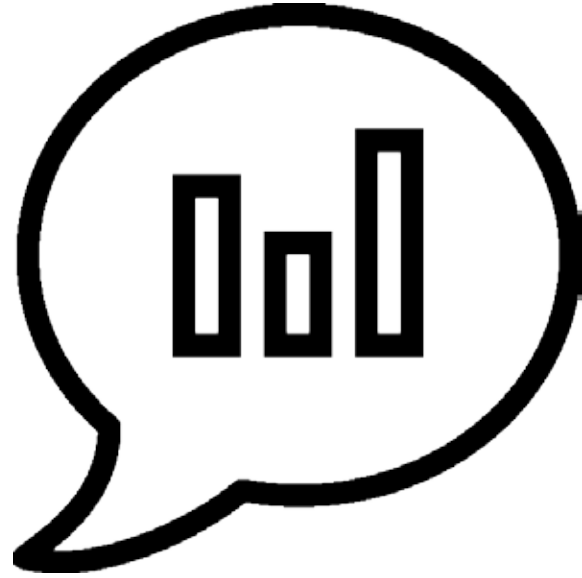
- Self-Assessments are tools that help you understand your program(s):
  - More accurately
  - More rapidly
  - Across a broader scope
  - At a lower cost

# In Summary

- Self-Assessments are tools that help you understand your program(s):
  - More accurately
  - More rapidly
  - Across a broader scope
  - At a lower cost
- Some other benefits are that you can...
  - Set your standard for safety performance for a system, site, or department and then measure against it (including to show progress over time)
  - Show progress against EHS operational components, and not just against Work Comp losses
  - **Scale** a **consistent analysis** across multi-site systems
  - Benchmark and compare operational components of EHS instead of just losses



**Interactive Poll - Have you ever used self-assessments in your injury prevention or safety program?**





## Case Study

Mayo Clinic

Lucas Digman, CSP



## Our Journey

Electronic Safety Self-Assessment at  
Mayo Clinic in Rochester



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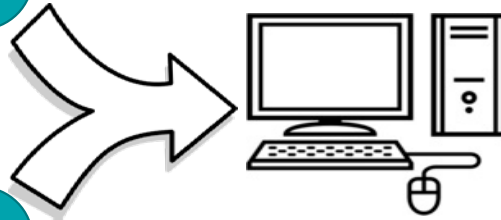
# Setting The Stage

- Designed...
  - For supervisors to complete
  - To be work environment specific
  - With multi-disciplinary content
- Intended to provide value to both the supervisor and the institution
  - Supervisor education on safety standards/expectations
  - Institution gathers detailed safety information across the organization (hazard identification, conformance data, etc)
  - Institution can set EHS priorities and strategy based off of aggregated, or individual department, responses

# How We Designed The Self-Assessments



Multidisciplinary  
Subject Matter Experts



MAYO  
CLINIC



Sources of  
Standards



Work Unit Supervisors To  
Complete

# Options For Delivery

- We chose to deliver using software instead of paper assessments
  - Allowed for easy distribution and collection of responses
  - Allowed for branching logic (subsequent questions change dependent on answers)
  - Easier/faster data analysis
  - Could design to inform of specific requirements, assess conformance to a requirement, and provide additional resources for assistance through links
  - Ability to include message about what they were receiving and how it fits in with their role and responsibilities

# Choosing Software Options

- We explored commercially available SAAS software
- Competing priorities drove the use of existing resources
  - Internally available survey options: REDCap, Survey Resource Center
  - Limited capabilities, but worked for our needs
  - Similar functionality to commercially available web-based survey tools, such as Survey Monkey.

# Question Look and Feel

## Work Area, Environment, and Hazard Types

Choose the work areas and work types that best describe the work that employees in your direct report work unit(s) perform. These selections will help filter the questions that apply to your area.

Please select the work areas and work types that best describe the activities that employees in your direct report work unit(s) perform.

\* must provide value

- Office area
- Remote/Telework
- Lab - CAP accredited (e.g., DLMP)
- Research Lab (and non-CAP accredited labs)
- Patient Care - Inpatient / Long Term Care
- Patient Care - Outpatient / Clinic Area / Patient Transport
- Patient Care - Surgery (OR, core, etc.)
- Clinical Support Service Areas (LCS, Respiratory Care Dispatch, etc.)
- Facilities Support Service Areas (Engineering, Maintenance, Plumbing, Supply Chain Distribution, Warehouse, Waste/Recycling, etc.)
- Kitchen / Dietary
- Janitorial or Housekeeping Supply/Service Areas
- Mechanical
- Outdoor Grounds
- Other

Are exit doorways and hallways free of obstructions to allow for clear visibility and exit?

- Yes
- Partial
- No
- N/A

Corridor Clutter Managers Toolkit:

<http://intranet.mayo.edu/charlie/emergency-preparedness-rst/fire/our-products/management-of-corridor-clutter-managers-toolkit/>

Are staff informed of the ergonomics resources available online and encouraged to proactively adjust their workstation to prevent awkward postures?

- Yes
- Partial
- No
- N/A

Ergonomics Resources:

<http://intranet.mayo.edu/charlie/safety-rst/ergonomics/>

Have employees who work in a chemical fume hood completed the online education module, RST Chemical Fume Hood Operator Safety: 257002CMPL000615?

- Yes
- Partial
- No
- N/A

Safety Education Guide:

<http://intranet.mayo.edu/charlie/safety-rst/safety-homepage/education/>



# Pros/Cons Of The Option Used

## Pros

- Cost effective
- Easy configuration
- Low cost learning
- Base for continuous improvement
- Step in the right direction

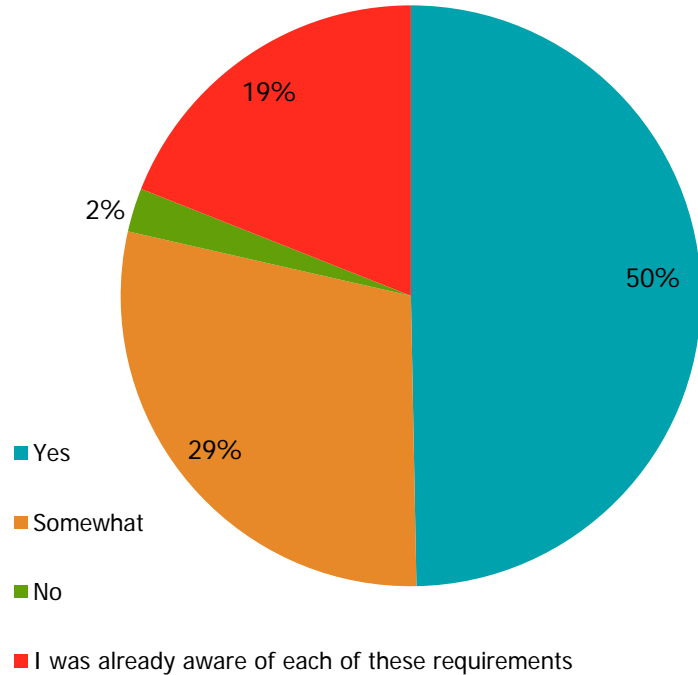
## Cons

- Limited data analysis
- Manual follow up
- Year over year comparison requires manual review – data is not centralized. Export to excel
- Not connected to database, so distribution list is slightly outdated due to staffing changes
- No automated CAPA (corrective action/preventative action) follow up to verify if identified issues are resolved or being worked on.

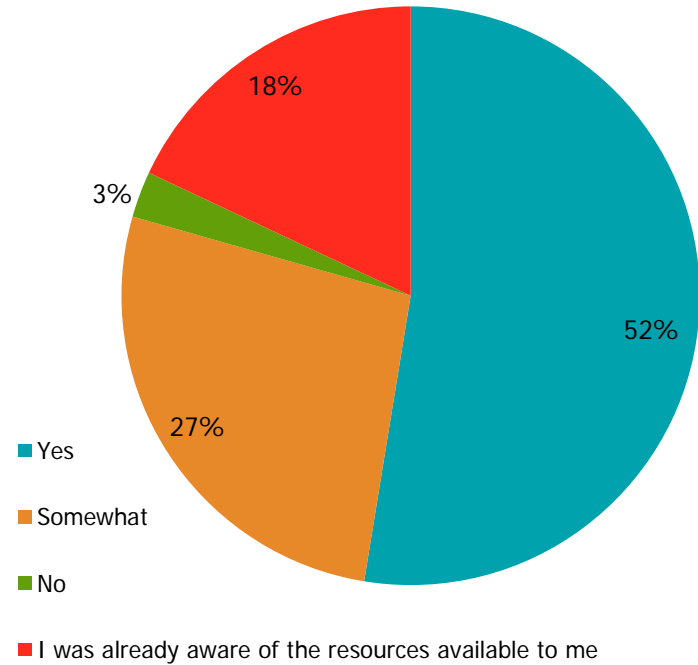
# Outcomes

- Drives accountability by establishing expectations and asking how the work unit is performing against them
- Demonstrates value of Safety by showing resources available for support
- Supervisors self-identified issues *and* resolutions
- Saved time
  - Imagine spending as little as 30 minutes evaluating 850 work units; that is 425 hours, not including time for scheduling and reporting.
  - Time spent developing questions and configuring the self-assessment was significantly less
- Results enable prioritization of targeted onsite audits
- Most importantly, feedback showed an increase in knowledge and awareness...

**I am more knowledgeable about Mayo Clinic safety requirements after having completed the self-assessment.**



**I am more knowledgeable about the resources available to help me meet the requirements after having completed the self-assessment.**



# Looking Forward

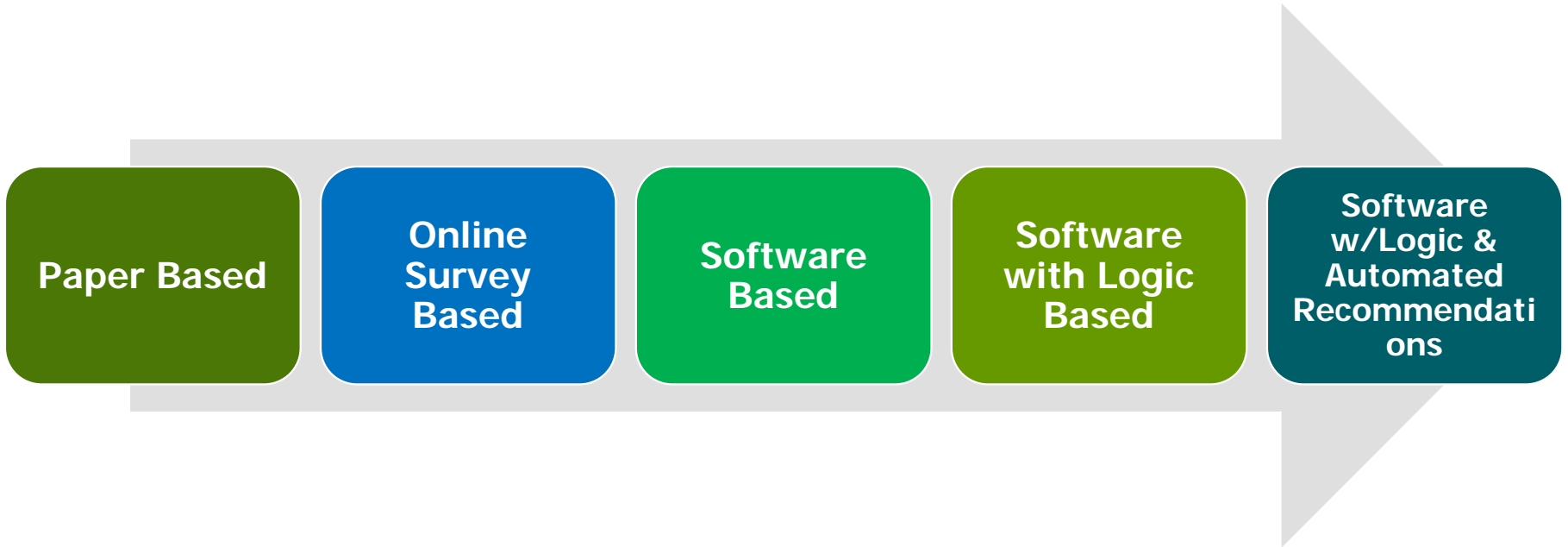
- Dedicated software solution
- Integrated data analytics
  - Drill down data dashboards (accessible to leaders and oversight groups)
- Enhanced features
  - Purpose built, full featured software: Database, single sign on
- Expanded scope
  - Include an automated CAPA documentation process. Add ability for work areas or audit teams to create/input onsite inspection while still combining data with that of self-assessment data for that location
  - Deploy to all Mayo Clinic sites, not just Rochester.



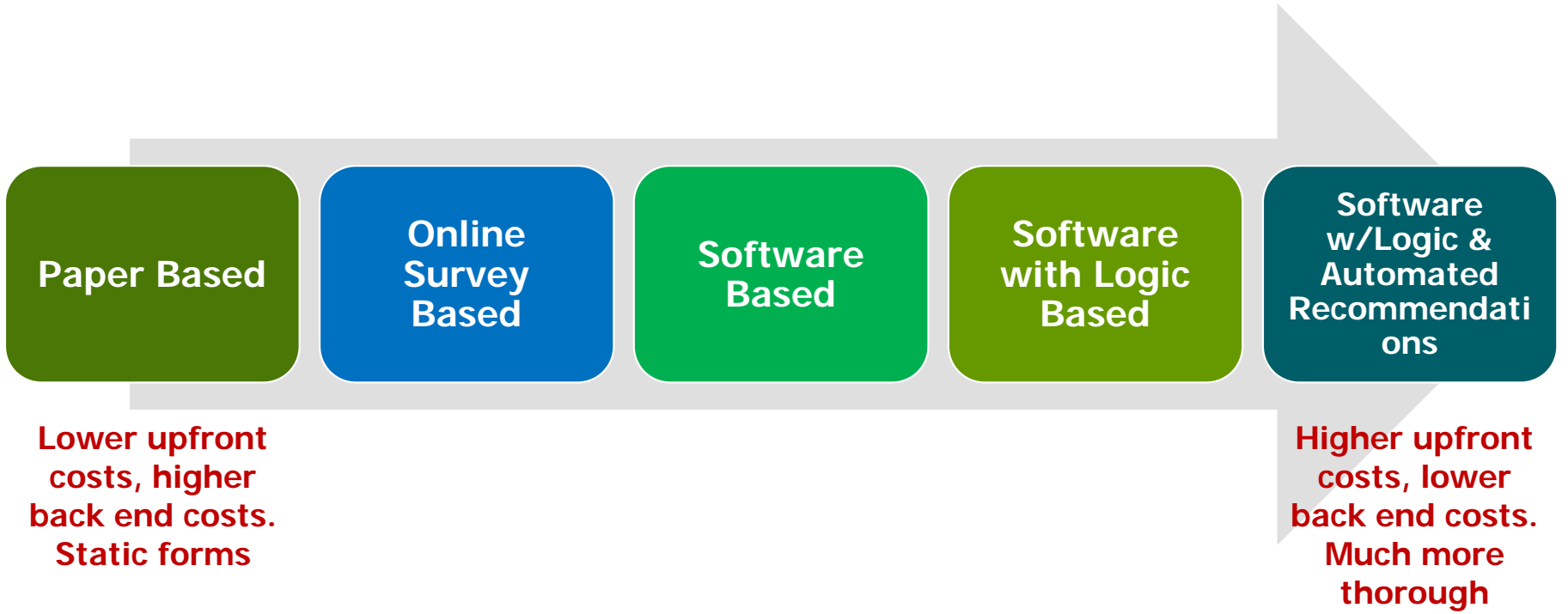
# Self-Assessments At Your Organization



# Can Be Simple Or Complex



# Your Costs



# Design Based On Your Audience

- It is important to know about your audience
  - Your audience dictates how you design questions
- There are 3 groups that provide very different insights into your program



# Design Based On Your Audience

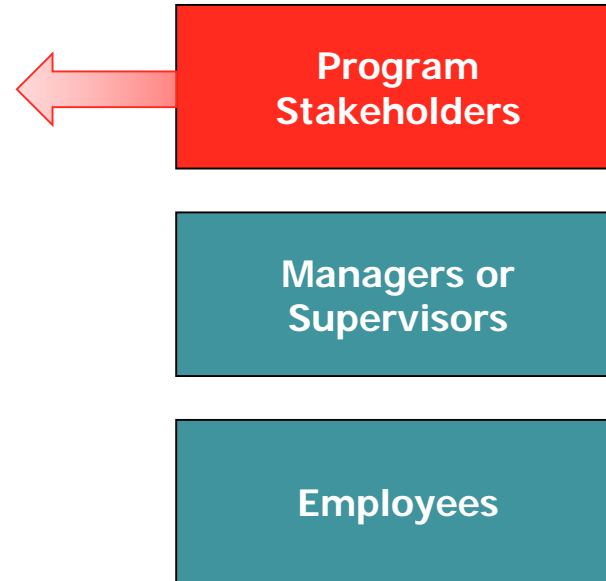
**Program  
Stakeholders**

**Managers or  
Supervisors**

**Employees**

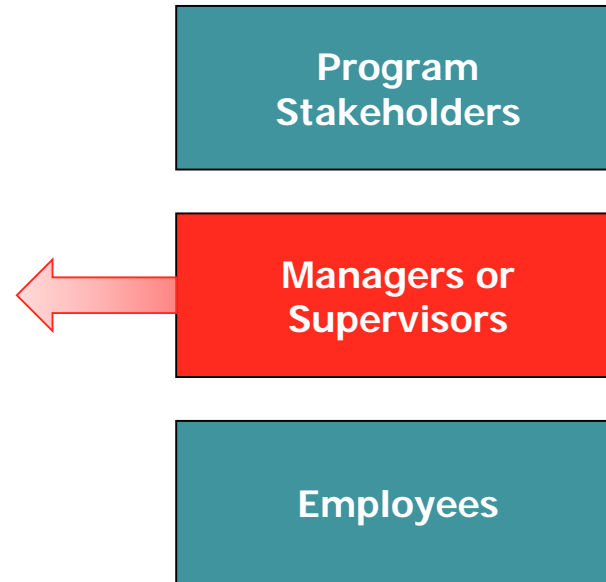
# Design Based On Your Audience

- Target if looking to understand the key program elements that are in place for a given program (e.g. SPH, Ergo, Sharps)
- Helps to communicate program level expectations from a central office to sites in a non-threatening way



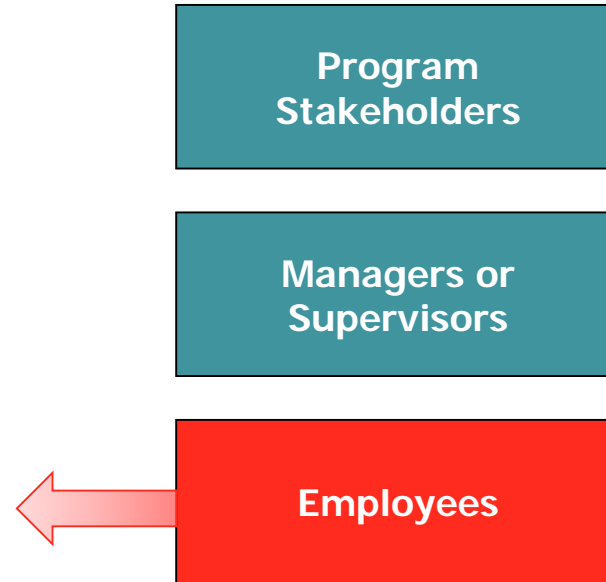
# Design Based On Your Audience

- Target if looking to understand:
  - High level hazards at the unit/area level
  - The effectiveness of program communications
  - Management's understanding of programs
- Is a tool for subtle education of managers/supervisors



# Design Based On Your Audience

- Target if looking to understand:
  - Day to day hazards and challenges at the unit/area level
  - If program elements are understood and followed at the floor level
- Is a tool for subtle education of employees

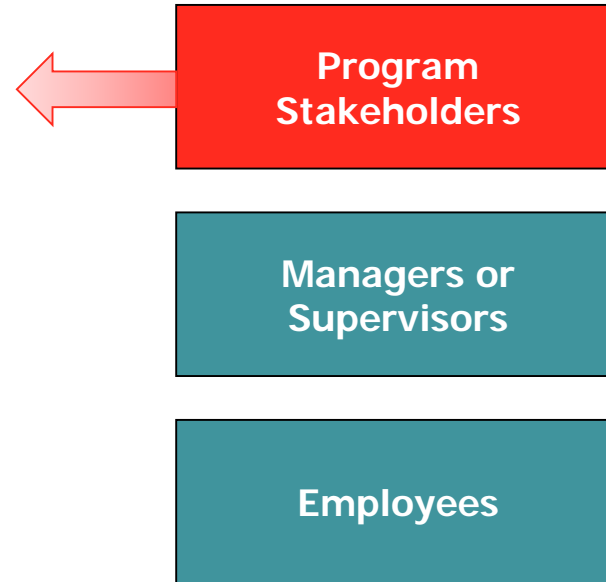


# Sequencing Is Important

- The order in which you develop and assign Self-Assessments is very important
- Always start from the broadest scope to the most narrow
- Results from your broad scope assessment will dictate how you design your narrower scoped assessments

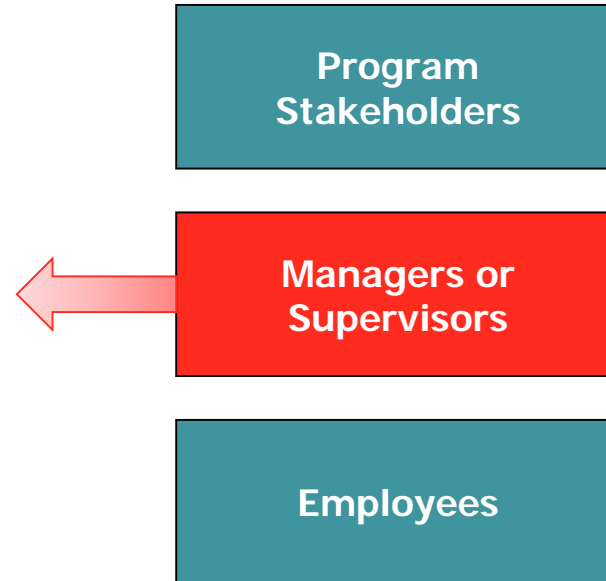
# Start With “Program Level”

- Allows multi-site systems to set a standard, benchmark program elements, and measure progress
- Allows an individual site to see if best practice program elements are in place to start with
- Helps you determine what to work on from a program level (e.g. training, communication, processes, etc)



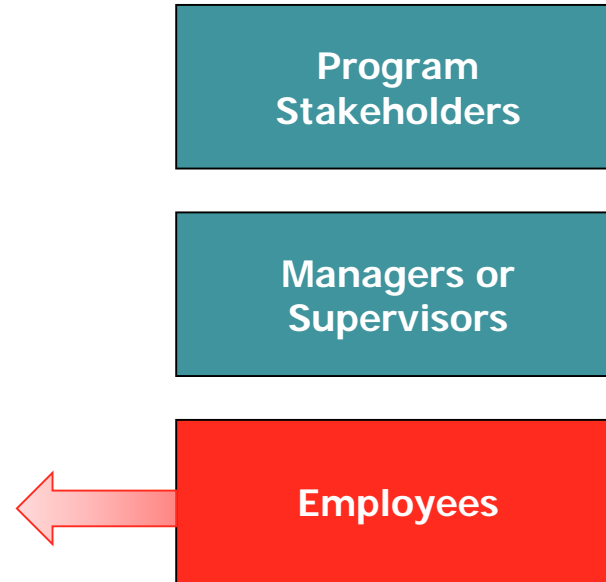
# Then Move Down to Managers/Supervisors

- Allows you understand how programs are received and used at the unit/area level
- Begins education of Managers/Supervisors
- Helps you to determine which departments to focus in on, and hone in on what they specifically need



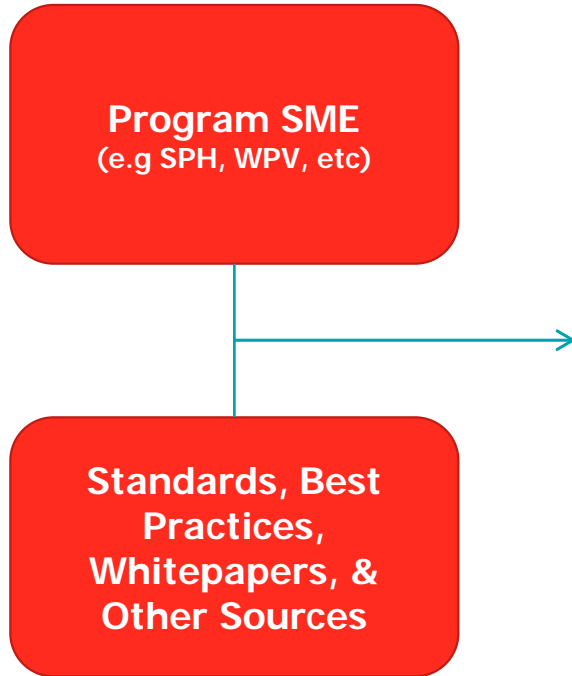
# Lastly, Finish Up With Employees

- Allows you to see if strategies set at program and department levels are effective
- Begins education of employees
- Begins taking you into “the weeds” of program management (e.g. obstacles to safety, culture of safety, etc)

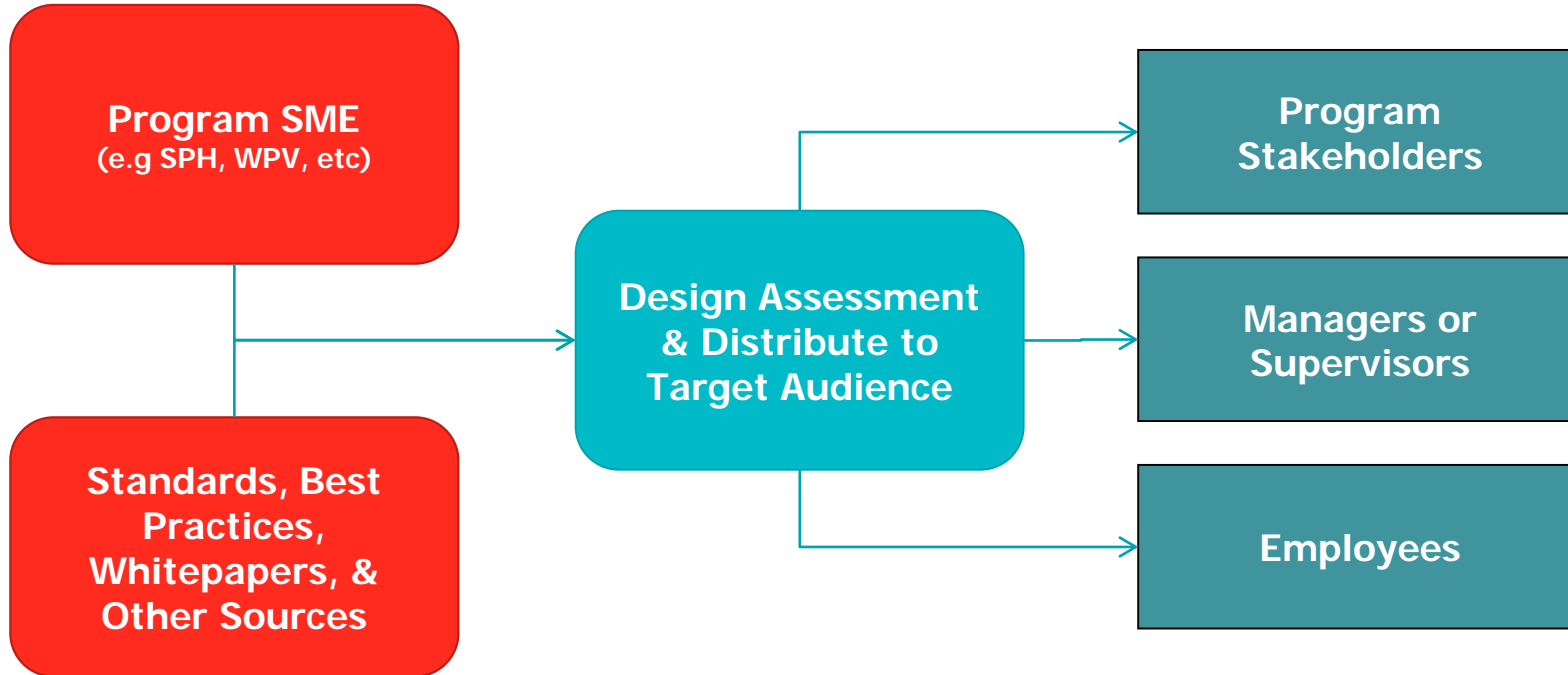




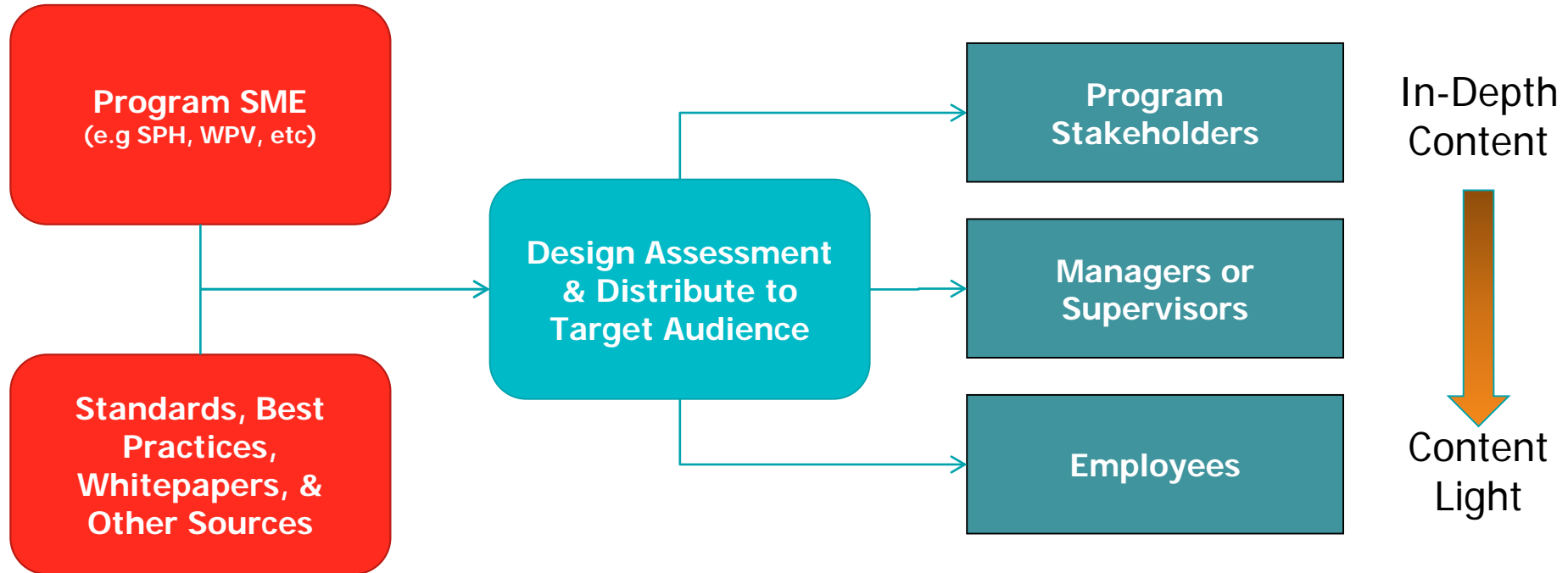
# Bringing It All Together – Steps To Design



# Bringing It All Together – Steps To Design



# Bringing It All Together – Steps To Design



# Don't Recreate The Wheel

## Free Resources

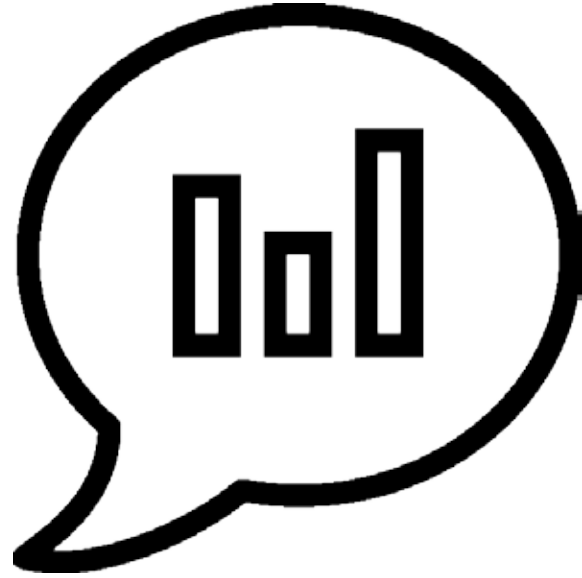
- OSHA
- NIOSH
- ASHRM
- And more...

\*most free resources are paper based

## Paid Resources

- Pre-made program based assessments based on best practices (Program Level)
- Several self-design options from simple survey tools to in-depth software tools
- Many paid resources cost less than designing on your own

**Interactive Poll – Do you plan to use self-assessments at your organization?**



Questions?



# Resources – Visit the RAPID website



The screenshot shows the BSI website header with the logo and tagline "...making excellence a habit." The navigation menu includes Home, Standards (eg. ISO 9001), Our services, Industry sectors, and About BSI. A search bar is also present. The main content area features a red banner for the "Hospital Staff Injury Prevention Program - RAPID" with sub-navigation for RAPID Program, How we help, Resources, Training, and Contact us. Below this is a photograph of three healthcare professionals in a clinical setting. Text on the page reads "Costly hospital staff injuries" and includes a note: "\*Based on data from the Bureau of Labor Statistics".

[www.bsigroup.com/rapid-us](http://www.bsigroup.com/rapid-us)



# Thank You!

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