



McGill

*Educational Resource Centre in
Occupational Health and Safety
presents a Course on:*

Occupational Health and Safety Management for Physicians and Safety Directors

September 7 - 9, 1988

With the special participation of
Prof. Norman J. Keesal
Director, at the McGill Institute of Management,
Course Leader

*conducted by McGill University in a
unique environment,
Gault Estate
St. Hilaire, Quebec*



Sponsored by Consolidated Bathurst Inc.

OVERVIEW

Discussion objectives:

- Present key Safety Management **PRINCIPLES**
- Provide **FRAMEWORK** for applying principles
- Suggest **CRITERIA** for assessing your options
- Offer **EXAMPLES** of points made

Exchange thoughts about your problems
and questions.

WILL ADDRESS:

- 1. Applying Management Principles to Safety Management**
- 2. Selling safety**
- 3. Matching safety services to a Company**
- 4. Interesting health personnel in Safety**

PRINCIPLES OF SAFETY MANAGEMENT

Occupational Health and Safety Management for Physicians and Safety Directors
McGill Institute of Management
September 7-9, 1988

PRINCIPLES

MANAGEMENT PRINCIPLES

- Approach safety services systematically
- Set safety program objectives
- Make a plan for achieving objectives
- Implement your plan using right people
- Measure progress and keep scorecard
- Keep ahead of changes

Prepared by Ludwig Bessner, Jr.

PERSONAL NOTES

WE'RE GOING TO WORK WITH SELECTED MANAGEMENT PRINCIPLES

BASIC TO ANY PROGRAM IS THE NEED FOR A SYSTEMATIC APPROACH
DISCUSS ELEMENTS OF A SYSTEM APPROACH, INCLUDING LIFE CYCLE ^{END} POINT

AFTER DECIDING ON YOUR APPROACH, YOU NEED OBJECTIVES (MBO)

BABE RUTH STORY

NEED TO POINT OUT WHERE YOU ARE GOING TO "HIT THE SAFETY BALL"

OBSOLETE OBJECTIVES PREVAIL IN MANY PLACES ^{NEED}

NEED SAFETY PLAN FOR ACHIEVING SAFETY OBJECTIVES

COMPARE WITH FINANCIAL PLANNING, CORP, PERSONAL

NEED GOOD PEOPLE TO CARRY OUT A PLAN

POINT OUT CHANGES IN FIELD ~~1980-1990~~ 30 TECHNOLOGY

MEASURE PROGRESS TOWARD OBJECTIVES, NEED TO KEEP SCORE SO WE
KNOW WHAT WE ARE ACCOMPLISHING

NEED IS OBVIOUS BUT FEW DO IT ADEQUATELY

NEED TO KEEP AHEAD OF CHANGES

PRINCIPLE IS THAT NOBODY LIKE SURPRISES!

PRINCIPLES OF SAFETY MANAGEMENT

Occupational Health and Safety Management for Physicians and Safety Directors
McGill Institute of Management
September 7-9, 1988

OBJECTIVES

SAFETY OBJECTIVES

Matching safety services to the Company

Principle 1:

- Know your customers and your customers' needs

Principle 2:

- Always expect people to act in what THEY perceive to be in their own best interests, and YOU will never be disappointed.

Prepared by Ludwig Berman, Jr.

PERSONAL NOTES

OBJECTIVES: THE MEAT OF TODAY'S SESSION

TWO PRINCIPLES:

(READ)

OBSERVED THAT SUCCESSFUL SAFETY PROGRAMS ARE

1. CUSTOMER-ORIENTED PROGRAMS

2. CONFORM TO MEEKERS LAW

→ POLL GROUP FOR EXPERIENCES, ALTERNATIVE BASIS FOR OBJECTIVES

PRINCIPLES OF SAFETY MANAGEMENT

Occupational Health and Safety Management for Physicians and Safety Directors
McGill Institute of Management
September 7-9, 1988

YOUR CUSTOMERS

Whom must your safety program satisfy?

- ✓ whoever hired you:
 - had something in mind for you to get done
- ✓ your present supervisor
 - funds your group's wages and bills
- ✓ shareholders
 - Whoever pays organization's bills
- ✓ Individuals at risk
 - stakeholders in your programs
 - bearers of risks
- ✓ Legislators and other government officials

Prepared by Gailig Stearns, Jr.

PERSONAL NOTES

WORK OFF SLIDE

1. WHY HIRED? WHY ASKED TO MANAGE SAFETY
EXAMPLE - L POOL / AIRCRAFT OPS AT APCI

2. PRESENT BOSS: PAYS YOU, YOUR BILLS
PROBLEMS AT NTSB

3. SHAREHOLDERS
ASK CARBIDE

4. INDIVIDUALS AT RISK
THEY HAVE A STAKE IN PERFORMANCE OF YOUR PROGRAM
THEY MAY BEAR PERSONAL RISKS RTK

UNIONS

5. LEGISLATORS/REGULATORS/INSPECTORS CAN "FLUNK" YOU FOR PERFORMANCE

• WHAT CAN GET YOU FIRED?

• WHAT POWER DO YOU HAVE

TECH KNOWLEDGE

NOT POSITION

NOT MONEY

PRINCIPLES OF SAFETY MANAGEMENT

Occupational Health and Safety Management for Physicians and Safety Directors
McGill Institute of Management
September 7-9, 1988

YOUR CUSTOMERS

What do your CUSTOMERS expect of your safety program ?

- ? the pressures of their other problems
- + their perceptions of accidents
- + their safety and compliance experience
- = resultant expectations of your safety program

Prepared by Ludwig Bessner, Jr.

PERSONAL NOTES

NEED TO PUT SELF IN CUSTOMER'S SHOES

- WHERE DOES SAFETY RANK IN HIERARCHY OF PROBLEMS
- CHANGING - SOME EXECUTIVES GOING TO JAIL IN FRANCE, US + ?

THINK OF ACCIDENTS AS SINGLE CAUSE / OVERLY SIMPLISTIC
ACT OF GOD, ALWAYS HAPPENS TO OTHER GUY, OUR ENGINEERS ARE
COMPETENT

ASS U ME COMPLIANCE = SAFETY

NTSB EXPERIENCE, THEIRS?

1/2 acc = compliance

NEED TO UNDERSTAND CUSTOMERS' EXPECTATIONS OF YOUR PROGRAM,
AND THEN ADDRESS THEM !

How would this read in the newspaper

PRINCIPLES OF SAFETY MANAGEMENT

Occupational Health and Safety Management for Physicians and Safety Directors
McGill Institute of Management
September 7-9, 1988

YOUR CUSTOMERS

What SHOULD your customers want?

WHAT INFLUENCES YOUR OBJECTIVES?

- ? your perceptions of their need
- ? your safety experience
- ? your competition for resources
- ? your expectations of their safety program

Prepared by Ludwig Bessner, Jr.

PERSONAL NOTES

NEED TO WATCH THAT YOUR PERCEPTIONS DON'T GET IN WAY OF
CUSTOMER'S DESIRES
PERSONAL EXPERIENCES - I KNOW.....

WHAT HAS BEEN YOUR EXPERIENCE WITH SAFETY
PROBABLY 50 YEAR OLD TECHNOLOGY, IDEAS
MAYBE TRANSFER FROM OTHER DISCIPLINE *SP1*

*WHO IS
COMPETITOR*

YOUR VIEW OF WHAT YOU ARE COMPETING WITH FOR A SHARE OF
AVAILABLE RESOURCES - OTHER DEPARTMENTS, PRIORITIES

YOUR PERSONAL RELATIONSHIP TO "THEIR" SAFETY PROGRAMS, EG,
WHAT IS YOUR PRESENT STAKE IN THEIR PROGRAM.

NEED TO UNDERSTAND YOURSELF AND WHAT DRIVES YOU

PRINCIPLES OF SAFETY MANAGEMENT

Occupational Health and Safety Management for Physicians and Safety Directors
McGill Institute of Management
September 7-9, 1988

PROGRAM EXAMPLES

Considerations when setting objectives

- proactive vs reactive objectives
 - accident prevention
 - loss control *cost containment*
 - risk management
- explicit vs implicit objectives
 - SAFETY FIRST! (but.....)
- functional vs performance safety objectives
 - do this and that
 - get this done
- SMAP examples

Prepared by Lindsay Bennett, Jr.

PERSONAL NOTES

NONPERSONAL CONSIDERATIONS

WORK FROM SLIDE

EXAMPLES: COMPARE WITH DISEASE AGENT/HOST/ENVIRONMENT
REACTIVE ARE NEGATIVE APPROACH
FLY FIX FLY VS SAFETY FIRST TIME

2. RR EXPERIENCES, SAFETY FIRST BUT MOVE THAT FREIGHT

3. KEEP EYE ON PERFORMANCE, NOT FUNCTION

* NTSB EYE-OPENER

* SUBSEQUENTLY OBSERVED IN INDUSTRY, SHOW UP EVERY DAY

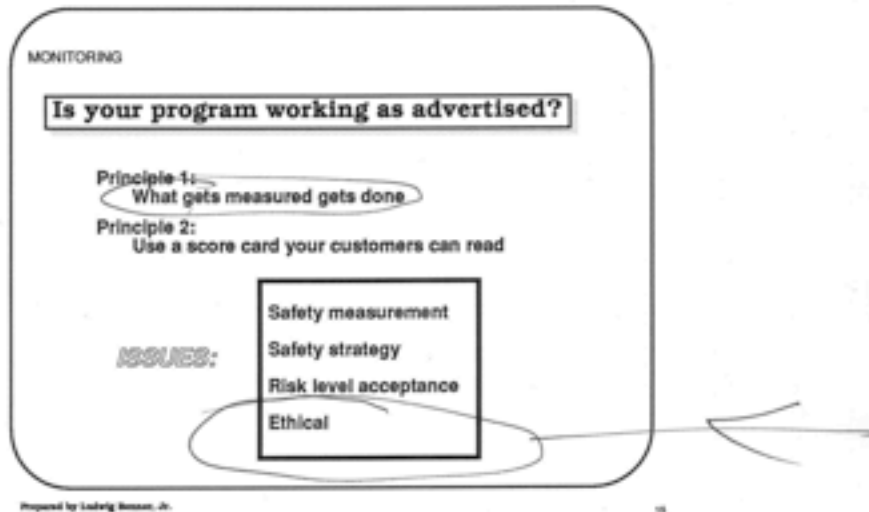
5. READ OFF SMAP OBJECTIVES

Mod of Bruce Karsh's TO SO

DO / TO

PRINCIPLES OF SAFETY MANAGEMENT

Occupational Health and Safety Management for Physicians and Safety Directors
McGill Institute of Management
September 7-9, 1988



PERSONAL NOTES

TRACKING RESULTS: MONITORING PROGRESS

1 REPEAT WGMGD

2. DISCUSS HOW YOU KEEP SCORE, USING MORT IDEAS

MONITORING SYSTEM SENSITIVITY

REVIEW ISSUES

1. WHAT YOU MEASURE, ANSI PROBLEMS POLIO EXAMPLE

*QC charts
extreme value analysis*

2. ASK WHAT SAFETY STRATEGIES GROUP KNOWS ABOUT?

DISCUSS ENERGY, MOTIVATION, CHANGE CONTROL, ETC
LOSS LIMITING VS AVOIDANCE STRATEGY

and effect on score keeping

3. WHO ACCEPTS WHAT LEVEL OF RISKS?

WHAT ARE RULES IN YOUR COMPANY? HOW DO YOU RECOGNIZE?

RACS *effect on score keeping* *who makes R&R decisions*

4. ETHICS OF RETROSPECTIVE MODE WHEN TECHNOLOGY IS AVAILABLE EPIDEMIOLOGICAL VS FTA APPROACH EXAMPLE

② EPA Legionella @ child care etc

Judgments get involved

Kessal's SET

PRINCIPLES OF SAFETY MANAGEMENT

Occupational Health and Safety Management for Physicians and Safety Directors
McGill Institute of Management
September 7-9, 1988

PROGRAM EXAMPLES

Safety Program Plan Elements

objectives	funding, sources
tasks performed, performer	staff qualifications
deliverables produced	equipment
quality control steps	change control process
performance audit system	Annual SPP updating

RACs = reasoned priorities

SOPs = in-house license

Prepared by Ludwig Bessner, Jr.

PERSONAL NOTES

WORK OFF SLIDE:

POLICY: Determines plan elements,

~ Work off SMAP objectives

→ Hit RAC use, general issue of risk level identification, acceptance

HIT SOPs as LICENSE

M

ref = Fax
Question

PRINCIPLES OF SAFETY MANAGEMENT

Occupational Health and Safety Management for Physicians and Safety Directors
McGill Institute of Management
September 7-9, 1988

MARKETING SAFETY

Marketing your Safety Program

Good Safety Results Don't Just Happen

Principle: Use the 5 Great Rules of Selling

ATTENTION

→ INTEREST

→ CONVICTION

→ DESIRE

→ CLOSE

Keep selling with PERFORMANCE

Prepared by Geoffrey Bennett, Jr.

18

PERSONAL NOTES

INTRODUCE INTERNAL MARKETING CONCEPTS

ATTENTION = DROP OTHER STUFF AND LISTEN TO YOU

INTEREST = WHET APPETITE TO HEAR MORE

CONVICTION = BELIEVE WHAT YOU ARE SAYING AND TRUST YOU

DESIRE = CAN PICTURE SELF BENEFITTING FROM RESULTS OF PROGRAM

CLOSE = GET COMMITMENT FOR SUPPORT

HILITE RECURRENT SELLING WITH ATABOYS AND SCORES

PRINCIPLES OF SAFETY MANAGEMENT
Occupational Health and Safety Management for Physicians and Safety Directors
McGill Institute of Management
September 7-9, 1988

RESOURCES

Funding your Safety Program

Who is willing to pay for your safety services?

Principle 1:

- No contract, not work concept.

Principle 2:

- Budgets help verify objectives

**MONEY IS THE BEST MEASURE OF VALUE
UNTIL SOMETHING BETTER COMES ALONG**

Prepared by Lindsey Bennett, Jr.

11

PERSONAL NOTES

SOMEBODY HAS TO PAY FOR YOUR PROGRAM

TWO POINTS:

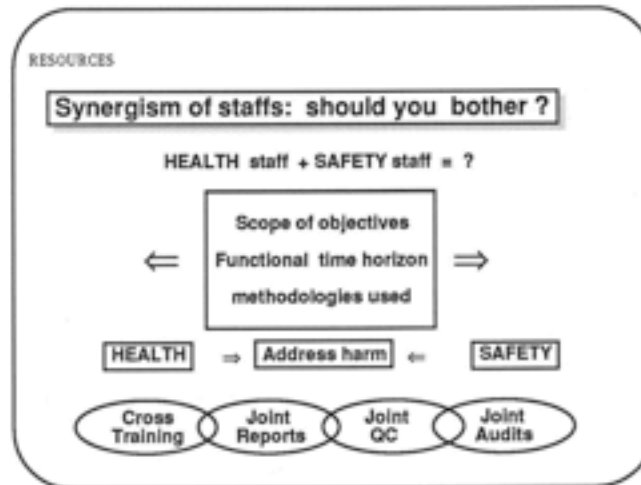
1. DO NOT WORK FOR NOTHING BECAUSE YOU WANT TO BE GUNG HO
2. HAVE TO WATCH YOUR SAFETY PEOPLE: THEY ARE USED TO OPERATING THAT WAY, ON A SHOE-STING BUDGET. TRADEOFF IS A FORM OF POWER IF THEY FUNCTION AS COPS OR ENFORCERS, OR EMERGENCY GUYS
2. BUDGET PROCESS HELPS HAMMER OUT PRIORITIES AND VALUE OF SERVICES TO BE PROVIDED. SAFETY PEOPLE NEED THIS DISCIPLINE!

BUDGETS ALSO GIVE YOU A BASELINE FOR MEASURING PERFORMANCE

WHAT IS → WHAT S/B

PRINCIPLES OF SAFETY MANAGEMENT

Occupational Health and Safety Management for Physicians and Safety Directors
McGill Institute of Management
September 7-9, 1988



Prepared by Isidore Rosen, Jr.

13

PERSONAL NOTES

GETTING RIGHT PEOPLE INTO RIGHT SLOTS

SYNERGISM: WHY BOTHER? *LEVERAGE RESOURCES*

WHAT SYNERGY DO YOU GET NOW?

DISCUSS DIFFERENCES IN BOX (*goals, perspective*)

DISCUSS SIMILARITY OF GOALS

DISCUSS STEPS IN CHAIN LINKS ONE BY ONE

PRINCIPLES OF SAFETY MANAGEMENT

Occupational Health and Safety Management for Physicians and Safety Directors
McGill Institute of Management
September 7-9, 1988

RESOURCES

Don't overlook new technical resources !

EXTERNAL and INTERNAL resources =

- new predictive safety analysis methods
- new safety readiness trees *check lists*
- new mishap investigation methods - *link to task design*
- new safety information sources - *research*
- new safety training resources - *flow charts*
- new research-defining display methods - *flow charts*

Prepared by Geoffrey Bennett, JR.

14

PERSONAL NOTES

DON'T OVERLOOK TECHNICAL RESOURCES THAT CAN HELP YOU
ACHIEVE YOUR OBJECTIVES

SAFETY TECHNOLOGY DEVELOPING RAPIDLY

WORK FROM SLIDE

PRINCIPLES OF SAFETY MANAGEMENT

Occupational Health and Safety Management for Physicians and Safety Directors
McGill Institute of Management
September 7-9, 1988

MONITORING

What system might work best for you?

- ? Self audit system *audit audit system*
- ? In-house audit teams *Staff + line H&S*
- ? cross-disciplinary teams *Saf, M, Env, Eng, Super, Admin*
- ? statistical QC-based system -

For any system, remember options include

direct vs indirect measures
output vs function options

Prepared by Ludwig Demming, Jr.

16

PERSONAL NOTES

MONITORING STRATEGIES

WORK OFF SLIDE

1. DAHLGREN APPROACH *AM - check sheet elaborates criteria*
2. ACCOUNTING/ IG APPROACH
3. FLYING SQUAD APPROACH *ad hoc*
4. STATISTICAL/DEMING APPROACH

CONSIDER

DIRECT MEASURES VS INDIRECT INDICATORS
PROBS

PRINCIPLES OF SAFETY MANAGEMENT

Occupational Health and Safety Management for Physicians and Safety Directors
McGill Institute of Management
September 7-9, 1988

PITFALLS

Safety problem symptoms include

- ☒ Big surprise mishaps
- ☒ Repetitive accidents
- ☒ Safety things not getting fixed
- ☒ Restless, reluctant customers

Prepared by Geoffrey Bennett, M.D.

17

PERSONAL NOTES

PROBLEM SYMPTOMS

WORK OFF SLIDE






1. UNPREDICTED MISHAPS INDICATE INADEQUATE ANALYSIS, *a change control*
2. REPEAT ACCIDENTS TELL YOU YOU DON'T UNDERSTAND THEM
3. THINGS NOT GETTING FIXED - RISK-TAKING NEEDS REEXAMINED
4. RESTLESS CUSTOMERS - INDICATES DISSATISFACTION WITH YOUR COSTS OR PERFORMANCE OR SOMETHING

OTHERS INCLUDE HOUSEKEEPING, WARNINGS, ET C

PRINCIPLES OF SAFETY MANAGEMENT
Occupational Health and Safety Management for Physicians and Safety Directors
McGill Institute of Management
September 7-9, 1988

PITFALLS

Major Safety Program Pitfalls include

-  compliance = safety mindset
-  risk are accepted by wrong person
-  system not working as advertised
-  too busy solving last year's problems
-  inadequate technical analyses

Prepared by Ludwig Bessner, Jr.

18

PERSONAL NOTES

CORPORATE CULTURE PROBLEMS FOR YOU =

WORK OFF SLIDE

1. COP MENTALITY, PRIORITIES? *This is* REG AGENCIES ACHILLES HEEL
EXAMPLE = OSHA, RR SAFETY PROGRAMS

2. CHANGES INTRODUCED WITHOUT ADEQUATE THOUGHT, EFFECT IS
UNAUTHORIZED RISK ACCEPTANCE DECISION LEVEL

3. - AND YOU ARE LAST TO FIND OUT ITS NOT WORKING

4. REFLECTS FLY-FIX-FLY OUTLOOK, DEADLY! *Epi drives state*

5. YOU CAN'T ESTIMATE RISK LEVELS, WITH ALL THAT ENTAILS

SOPS FALLING BEHIND, NOT FOLLOWED,

PRINCIPLES OF SAFETY MANAGEMENT

Occupational Health and Safety Management for Physicians and Safety Directors
McGill Institute of Management
September 7-9, 1988

THE END

**TIME
FOR
QUESTIONS
AND
ANSWERS**

Prepared by Ludwig Bessner, Jr.

25

PERSONAL NOTES

Show if appropriate

Ask, answer questions as they arise