

Best-In-Class Thoughts

*"Talent wins games, but
teamwork and intelligence
wins championships"*

– Michael Jordan

*"Teamwork divides the
task and multiplies the
success."*

– Author Unknown



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Note from Leanne

Being safe (contrary to popular belief) is not just about having common sense, though you do have to use some common sense in order to be safe. Being safe requires an individual to pay attention to everything: our actions, the actions of the people around us, the equipment that we use; ultimately, it's a full-time job. There are times when being safe is something anyone can do, regardless of their experience, their knowledge etc. But when we're exposed to a hazard that's beyond our expertise, we should stop what we're doing, and get the experts involved. Sometimes the experts are the supervisors or the managers at a Resource Center. Sometimes the experts are on the Safety Team. And sometimes, the experts are not MER employees at all. Being safe is about knowing our limits and getting help when we reach those limits.

Why are Site Assessments important?

Site Assessments help prevent injuries and illnesses. Through critical examination of the workplace, site assessments identify and record hazards for corrective action. Regular site assessments are an important part of the overall occupational health and safety program.

What is the purpose of Site Assessments? They allow managers to:

- Listen to the concerns of workers and supervisors
- Gain further understanding of jobs and tasks
- Identify existing and potential hazards
- Determine underlying causes of hazards
- Monitor hazard controls (personal protective equipment, engineering controls, policies, procedures)
- Recommend corrective action (Ensure all corrective actions are documented on the Site Assessment)

Aspects to Assess – Every site assessment must examine who, what, where, when and how. Pay particular attention to items most likely to develop unsafe or unhealthy conditions because of stress, wear, impact, vibration, heat, corrosion, chemical reaction or misuse. Review the entire work area each time, including areas where no work is done regularly, such as parking lots, rest areas, storage areas, etc. Look at all workplace elements - the environment, the equipment and the process. The environment includes such hazards as noise, vibration, lighting, temperature, and ventilation. Equipment includes materials, tools and apparatus for producing a product or a service. The process involves how the worker interacts with the other elements in a series of tasks or operations.

Additionally, Site Assessments offer a great opportunity to provide positive feedback to employees, which is just as important to communicate as the opportunities for improvement.



Did you know...?

A review of permit-required confined space incidents from 2005 through 2009 revealed that there were 481 fatalities, about 1 fatality about every 4 days.

Surprisingly, physical hazards (struck by, caught in, collapses, and falls) accounted for 294 or 61% of the fatalities.

Atmospheric hazards (including fires) accounted for 160 or 33% of the incidents.

These numbers serve to remind us how important proper safety precautions are when it comes to confined spaces.

<http://rocorescue.wordpress.com/2011/11/01/confined-space-fatalities-a-closer-look-at-the-numbers/>

bleach your rope. Air-dry your rope away from direct sunlight. Do not dry it in a dryer.

Always remember:

- Store your rope away from heat, sunlight and chemicals. Protect your rope from all compounds containing acids, alkalis and oxidizing agents. Avoid contact with petroleum substances such as gasoline and oil which do not appreciably affect nylon ropes by themselves but may contain additives that can cause damage. These substances also attract dirt which causes the rope to wear more quickly.
- Always use proper lowering techniques. Fast rappels, bounding, or swinging can damage your rope. Some rope devices place a sharp bend in the rope which creates excessive heat buildup and stresses the rope's fibers, leading to accelerated wear.
- **NEVER use a rescue rope for any purpose other than for what it was intended.** It is not for securing material, restraining hose, etc.
- Never step on a rope. Stepping on a rope grinds dirt into the rope fibers, causing excessive wear.

http://www.ussartf.org/ropes_knots.htm

Caring for Rescue Rope

MER has rope rescue equipment in multiple resource centers, and in the coming months will be adding more advanced equipment to build our Confined Space Rescue kits. Since the equipment is rated for Life Safety, it's especially important to ensure that it is cared for and maintained properly. Below are some guidelines:

Inspection of Ropes

Inspect your rope before and after each use. It is the user's responsibility to know the history of the rope and to determine when it should be retired; keep a rope log on how many times it has been used and the number of falls held. When in doubt, retire your rope. Generally, a rope should be discarded after holding a long hard fall, if it has flat or soft spots, becomes stiff, or shows sheath damage.

Retire a rope after no more than four years of infrequent use, two years of occasional use (2 days or less a week), or one year of active use. Also, multiple short lead falls (common in sport climbing), bounding rappels, and shock-loaded top rope falls can have a cumulative negative effect on the rope's shock-absorbing capacity.

Use and Care of Ropes

Always protect your rope at potential abrasion points. Most ropes are retired because they become frayed, not because of the number of falls held. Watch for sharp edges like metal tank man ways, concrete building/ vault edges, I-beams, and even rope bag grommets, which can cut a rope's sheath. Retire your rope if you can see the core at an abraded area or if the rope feels lumpy or flat in spots.

Keep your rope clean. Dirt shortens rope life by causing internal as well as external abrasion. Transport and store your rope in a protective bag or pack. Wash a dirty rope in cold water using mild, non-detergent soap. Adding fabric softener while washing improves rope flexibility by lubricating the fibers. Do not



There's an App for that!

Emergency Response Guide (ERG 2012)



PHMSA (U.S. DOT Pipeline and Hazardous Materials Safety Administration)'s 2012 Emergency Response Guidebook provides first responders with a go-to resource to help deal with hazmat accidents during the critical first 30 minutes.

Strains & Sprains

What is a sprain? A sprain is an overstretching or a tear of one or more ligaments, which are tough bands of tissue that hold two bones together. They are typically caused by falling, twisting, or getting hit forcing a joint out of its normal position. This can cause ligaments around the joint to stretch or tear. The most common site for a sprain is the ankle, which typically occurs when a person missteps and lands on the side of the foot; although, the wrist and thumb are other

common areas for sprains. The usual signs and symptoms of a sprain are pain, swelling, bruising, and not being able to move or use the joint. Sometimes people feel a pop or tear when the injury happens.

What is a strain? A strain involves the overstretching or tearing of a muscle or tendon, which are tough bands of tissue that attach muscle to bone. Strains are caused by twisting or pulling a muscle or tendon, and can happen suddenly or develop over days or weeks. A sudden (acute) strain is caused by a recent injury, lifting heavy objects the wrong way, or overstressing the muscles. Chronic strains are usually caused by moving the muscles and tendons the same way over and over. Two common sites for a strain are the back and the hamstring muscle in the back of the thigh. A strain can cause pain, muscle spasms, muscle weakness, swelling, cramping, and trouble moving the muscle. If a muscle or tendon is torn completely, it is often very painful and hard to move.

How do we prevent strains and sprains? You can:

- Avoid exercising or playing sports when tired or in pain.
- Eat a well-balanced diet to keep muscles strong.
- Exercise daily and maintain a healthy weight.
- Wear shoes that fit well.
- Replace shoes if the heel wears down on one side.
- Warm up and stretch before playing a sport.

How are sprains and strains treated? RICE (Rest, Ice, Compression, Elevation) for 1-2 days after the injury:

- Rest the injured joint
- Apply an icepack for 20 minutes 4-8 times a day
- Wrap the joint with a compression bandage
- Elevate it above the level of your heart

Your health care provider may recommend a non-steroidal anti-inflammatory medication such as ibuprofen to help reduce pain and swelling. After treating pain and swelling, doctors usually say to exercise the injured area to prevent stiffness and increase strength. See your doctor for severe strains and sprains.

http://www.niams.nih.gov/health_info/Sprains_Sprains_and_strains_ff.asp

Wellness Tip:

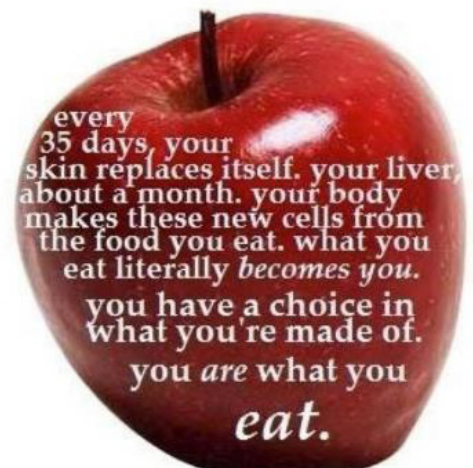
Big or small, prepare for it all

Life is full of the unexpected, but one thing is certain, being prepared makes life's challenges easier to handle.

Get a kit — Put together an emergency preparedness kit that includes food; water (at least 1 gallon per person, per day); extra cash; first aid kit; flashlight; radio; multipurpose tool; medications and medical items; copies of personal documents; cell phone with chargers; map of the area; emergency blanket; emergency numbers; sanitation supplies such as disinfecting bleach; and other essential items.

Make a plan — Develop a plan for family communication in the event of an emergency. Agree on evacuation routes so everyone knows what to do and where to go.

http://www.redcross.org/images/MEDIA_CustomProductCatalog/m4240186_AR_C_CLX_Brochure.pdf



Fitness Challenge

Touch Your Toes

Flexibility really does equal fitness. Research shows that from age 35 to 50, the average man's flexibility decreases by 25 percent. That can lead to shoulder injuries and runner's knee. Plus, tight pectoral muscles limit your strength, so your weight workouts will suffer too.

The Test: One of the best measures of flexibility is the sit-and-reach test. Place a yardstick on the floor and put a foot-long piece of masking tape across the 15-inch mark.

Sit down with your legs out in front of you and your heels at the edge of the tape, one on each side of the yardstick.

Put one hand on top of the other and reach forward on the yardstick as far as you can by bending at your hips. Your score is the number your fingertips touch.

http://www.menshealth.com/mhlists/be_fit/Touch_Your_Toes.php#ixzz2M2p10Sj2



Values

Professionalism
Integrity
Mutual Respect
Discipline



Safety Goal Award

In February 2013, MER recognized teams that earned notable success in 2012 in the four Company Goals: Safety, Client Satisfaction, Growth and Profitability. MER is proud to announce that the 2013 Safety Goal award has been presented to the New Castle, DE team for their continued commitment to and success in Safety. Over the years, the New Castle team has had many high profile projects requiring significant preparation and safe execution of highly hazardous

activities. From water blasting barges to cleaning a mustard gas tank for a high profile client, the New Castle team has consistently managed all of their projects with safety at the forefront. The team is currently in their sixth consecutive year without a recordable injury, which is a fantastic reflection of the dedication to safety that the employees have. Congratulations to the New Castle team on their recognition for excellence in safety!

Employee Development Corner

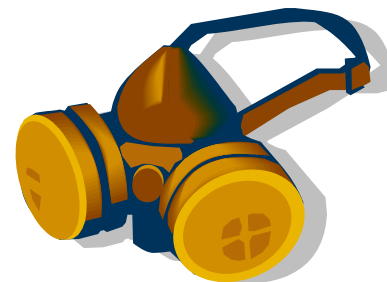
Medical Clearances: Understanding your Spirometry Results

Spirometry measures how much air you can inhale and exhale, as well as how fast you can exhale. Spirometry values can help determine if your lungs aren't working as well as they should be. The three key spirometry measurements (FVC, FEV1 and FEV1/FVC Ratio) for a given individual are compared to reference values. Each reference value is based on healthy individuals with normal lung function and expresses the value that would be expected for someone of the same sex, age and height. To find the reference value on your spirometry report, look for the column marked "reference" or "predicted" value.

FVC: Forced Vital Capacity

FEV1: Forced Expiratory Volume-one second: The amount of air you blow out in one second from the beginning of the test.

FEV1/FVC: The ratio of FEV1 to FVC. For example, if the FEV1 is 4 and the FVC is 5, then the FEV1/ FVC ratio would be 4/5 or 80%. This means the individual can breath out 80% of the inhaled air in the lungs in one second.



SPIROMETRY TEST	NORMAL	ABNORMAL	
FVC and FEV1	Equal to or greater than 80%	Mild Moderate Severe	70-79% 60-69% less than 60%
FEV1/FVC	Equal to or greater than 70%	Mild Moderate Severe	60-69% 50-59% less than 50%

There are a number of factors that determine whether or not an individual is cleared to wear respiratory protection. Spirometry results are just one of these factors. If you have questions or concerns about your individual test results please feel free to contact Lauren Legendre (781-983-0108) to be connected with someone at WorkCare or your personal doctor.

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Safety Brief

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