
BULLETIN



February 1993

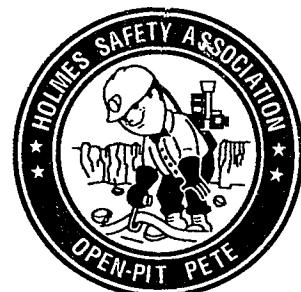
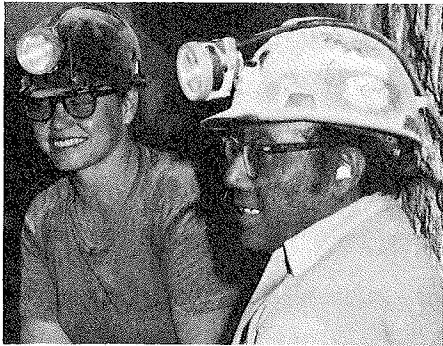


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Please note: The views and conclusions expressed in HSA Bulletin articles are those of the authors and should not be interpreted as representing official policy of the Mine Safety and Health Administration.

KEEP US IN CIRCULATION

The Holmes Safety Association Bulletin contains safety articles on a variety of subjects: fatal accident abstracts, studies, posters and other safety-related topics. This information is provided free of charge and is designed to assist in presentations to groups of mine and plant workers during on-the-job safety meetings.

Welcome new members

NAME	CHAPTER NO.	LOCATION	NAME	CHAPTER NO.	LOCATION
Broad Mountain Partners	10194	Frackville, PA	Lone Tree Mine	10219	Valmy, NV
Portable Crusher No. 1001	10195	North Las Vegas, NV	Mountain Top Trucking	10220	Mt. Carbon, WV
Portable Crusher No. 1002	10196	North Las Vegas, NV	Ember Contracting, Inc.	10221	Betsy Layne, KY
Portable Crusher No. 1003	10197	North Las Vegas, NV	Calvin Lenig Prep.	10222	Shamokin, PA
Portable Crusher No. 1004	10198	North Las Vegas, NV	Champlain Stone, Ltd.	10223	Fort Ann, NY
Portable Crusher No. 1005	10199	North Las Vegas, NV	Wausau Insurance	10224	St. Cloud, MN
Portable Crusher No. 1006	10200	North Las Vegas, NV	Conrad O. Hinshaw	10225	Goldfield, NV
Portable Crusher No. 1007	10201	North Las Vegas, NV	Nye County Road Dept.	10226	Tonopah, NV
Frehner Construction Company	10202	North Las Vegas, NV	Boot Leg Canyon Pit	10227	Boulder City, NV
Nevada Department of Transportation	10203	Tonopah, NV	Tom Kanopsic	10228	North Benton, OH
Eastco No. 1	10204	Louisa, KY	Doan Ford Inc.	10229	Belmont, OH
Eastco No. 2	10205	Fort Gay, WV	TCG Materials, Inc.	10230	Delevan, NY
Wayco No. 1	10206	Louisa, KY	Dove Gray	10231	Marion, NC
Sewell Mine No. 4	10207	Dailey, WV	Champlain Stone, Ltd.	10232	Warrensburg, NY
Wolf Valley	10208	Knoxville, TN	Cal-Mat San Bernardino Plant	10233	San Bernardino, CA
Corellis Trucking	10209	Rensselaer, NY	H.G. Fenton Material Co.	10234	San Diego, CA
Quality Rock, Inc.	10210	Idabel, OK	Fourth Street Rock Crusher	10235	San Bernardino, CA
Lewis Creek Mine	10211	Madisonville, KY	Henegon Limited	10236	Colton, CA
Airway Pit No. 1	10212	Las Vegas, NV	Texas Mining Co.	10237	Riverside, CA
American Resource Corp.	10213	Goldfield, NV	Clemente Latham	10238	Wynantskill, NY
Maintenance & Supply	10214	Strawberry Plains, TN	Pennsylvania Land Improvement	10239	Dornsife, PA
Hinesburg Sand & Gravel	10215	Hinesburg, VT	Locust Mountain	10240	Telford, TN
Shelburne Quarry	10216	Essex Junction, VT	Millertown "A"	10241	Knoxville, TN
Plant No. 1	10217	Phoenix, AZ	Ronald Sidwell	10242	New Lexington, OH
Saline County Road Department	10218	Benton, AR	Chemstone Products Co.	10243	Mendota Heights, MN

Danger in and around mines

bloodborne diseases

The human immunodeficiency virus (HIV) and hepatitis B virus (HBV) are a direct concern to workers exposed to blood and other body fluids. These infections place workers such as emergency medical technicians and first aid providers at substantial risk.

Acquired Immunodeficiency Syndrome (AIDS) is a bloodborne and sexually transmitted disease that may develop months or years after the worker is infected with

the HIV virus. To date, no vaccine is available to prevent or cure AIDS, but some drugs have been found that may prolong the lives of AIDS patients.

Hepatitis B is a disease of the liver. The hepatitis B virus is transmitted through sexual contact, needle sharing, and contaminated blood. A hepatitis B vaccine is available that is effective in the prevention of HBV infection.

Universal precautions

- All victims are to be considered **potentially infectious** for HIV, HBV, and other bloodborne diseases.
- Emergency medical technicians or first aid providers must always maintain **continued self protection**.

Infection control program

All operations need to review and implement policies and procedures that will provide a high degree of protection for the worker that may be in direct contact with any infectious disease.

- evaluate hazards
- recognize job exposures
- develop controls to limit exposure
- provide all personal protective equipment
- maintain safe handling and disposal of biohazards
- create follow-up and treatment programs for workers
- present training programs to workers potentially exposed

Personal protective equipment

Wearing the proper personal protective equipment is a normal part of any safety and health program. Depending on the type of exposure, these items will need to be readily accessible to the emergency medical technicians and the first aid providers.

- gloves of appropriate material and quality
- masks and protective eye wear and/or face shields
- emergency CPR pocket masks or other ventilation devices
- gowns or aprons made of, or lined with, impervious material

Reprinted from the North Carolina Department of Labor's August 1992 issue of Danger in and around mines.

Holmes Safety Association

Monthly safety topic



Fatal powered haulage accident

GENERAL INFORMATION: A 29-year-old shuttle car operator with 8 years total mining experience, one year at this classification, was killed when the victim struck a protruding coal rib while turning into the No. 3 Entry from the right crosscut.

The mine is developed into the Red Ash coalbed, averaging 39 to 48 inches in height. Employment is provided for 73 persons, 66 of whom work underground on two production shifts and one maintenance shift per day, five days per week.

There are three active sections utilizing continuous mining machines and shuttle cars. Coal is transported to the surface on belt conveyors. The mine produces approximately 2,500 tons of raw coal per day. Transportation of personnel and supplies is provided by trolley-powered track-mounted equipment.

DESCRIPTION OF ACCIDENT: At about 2:45 p.m., the 003 Section Crew, under the supervision of the second shift section foreman, entered the mine and traveled to the section. After examining the face areas, the section foreman made work assignments and mining operations began in the face of the No. 3 Entry about 3:15 p.m.

The victim, a standard drive shuttle car operator, had loaded and dumped one shuttle car of coal and was returning to the

continuous mining machine in the face of the No. 3 Entry. As he turned the corner into the No. 3 Entry from the crosscut between the Nos. 3 and 4 Entries, the shuttle car contacted the corner of the right rib immobilizing the car. A protrusion of the rib corner extended into the operator's compartment of the shuttle car crushing the victim against the rear of the compartment.

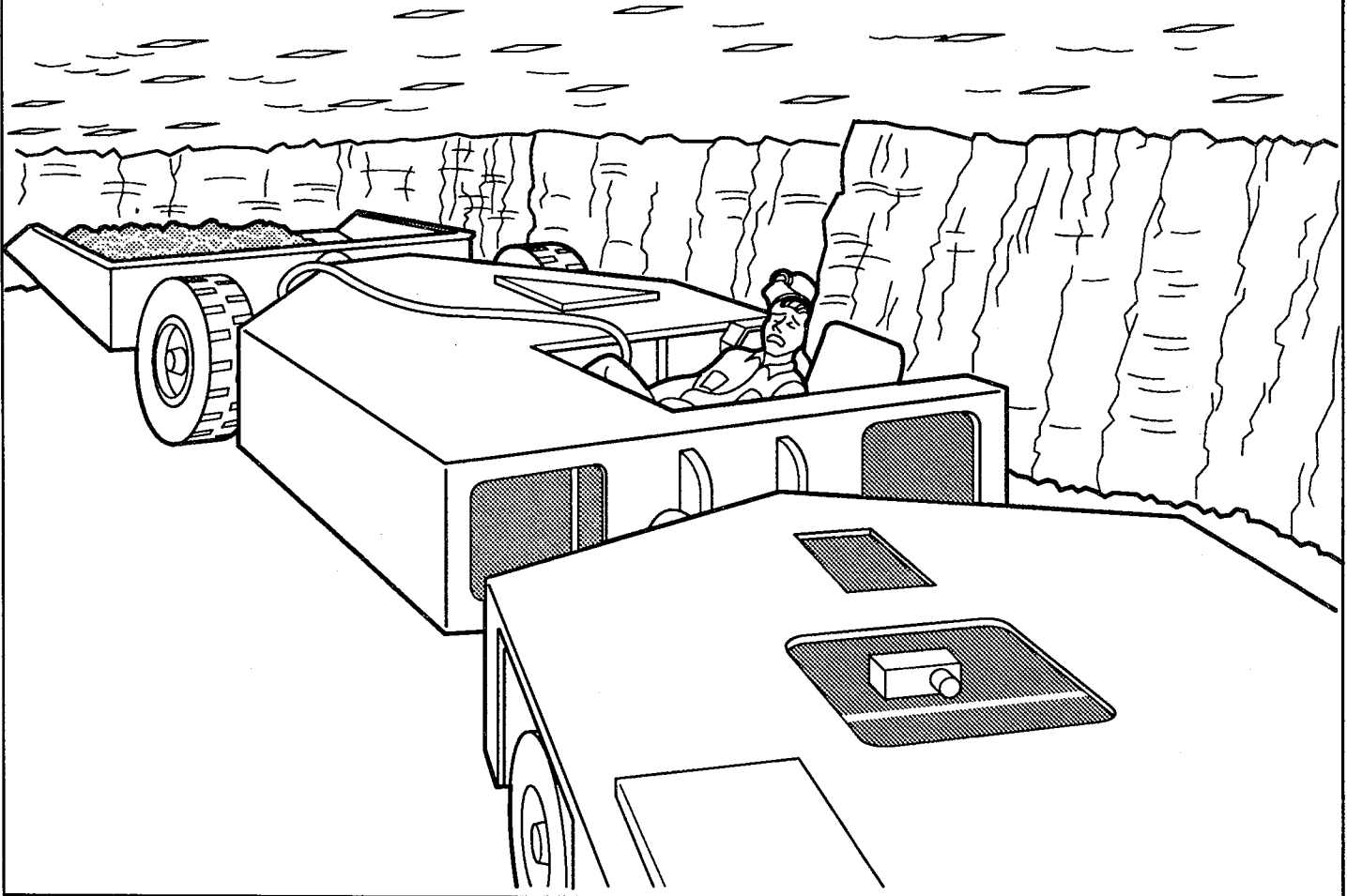
The continuous mining machine operator became concerned when the victim failed to return to the mining machine to be reloaded. He found the victim's shuttle car in the intersection two crosscuts outby the face of the No. 3 entry in an area that is part of an 8 entry "super" section being mined using two continuous mining machines and three shuttle cars.

The continuous mining machine operator called out to the victim but received no reply. He checked closer and saw that the victim was seriously injured. He summoned help and examined the victim searching in vain for vital signs. When help arrived, the victim was removed from the shuttle car, placed on a stretcher, and CPR was administered. He was then transported to the surface where an ambulance from the rescue squad transported him to the hospital where he was pronounced dead.

CONCLUSION: The accident and resulting fatality occurred when the victim

Coal mine fatalities to date — thru 02-17-93

Type	1989		1990		1991		1992		1993	
	UG	S	UG	S	UG	S	UG	S	UG	S
Roof fall	4	0	1	0	5	0	5	0	4	0
Haulage	0	0	2	0	0	1	0	0	0	3
Machinery	0	1	1	0	0	0	0	0	0	0
Electrical	0	0	2	0	0	0	0	0	0	2
Other	0	2	0	3	2	3	0	2	0	2
Total	4	3	6	3	7	4	5	2	4	7



contacted a protruding coal rib while attempting to negotiate a turn into the No. 3 Entry from the right crosscut. During the investigation it was determined that the car headlights were on in the direction opposite to the direction of travel at the time of the accident. The rib corner was inclined

inward with the top portion protruding toward the entry. Trailing cables under tension and the scoop bucket during cleaning operations had caused the coal rib to be undercut on this corner—this protrusion was created as a result of poor mining practices.

Rehabilitation: Mending bones and bonds

Why do so many companies have difficulty in returning injured employees to work? The answer, say rehab experts, may lie not in employees' medical treatment, but in treating them like strangers.

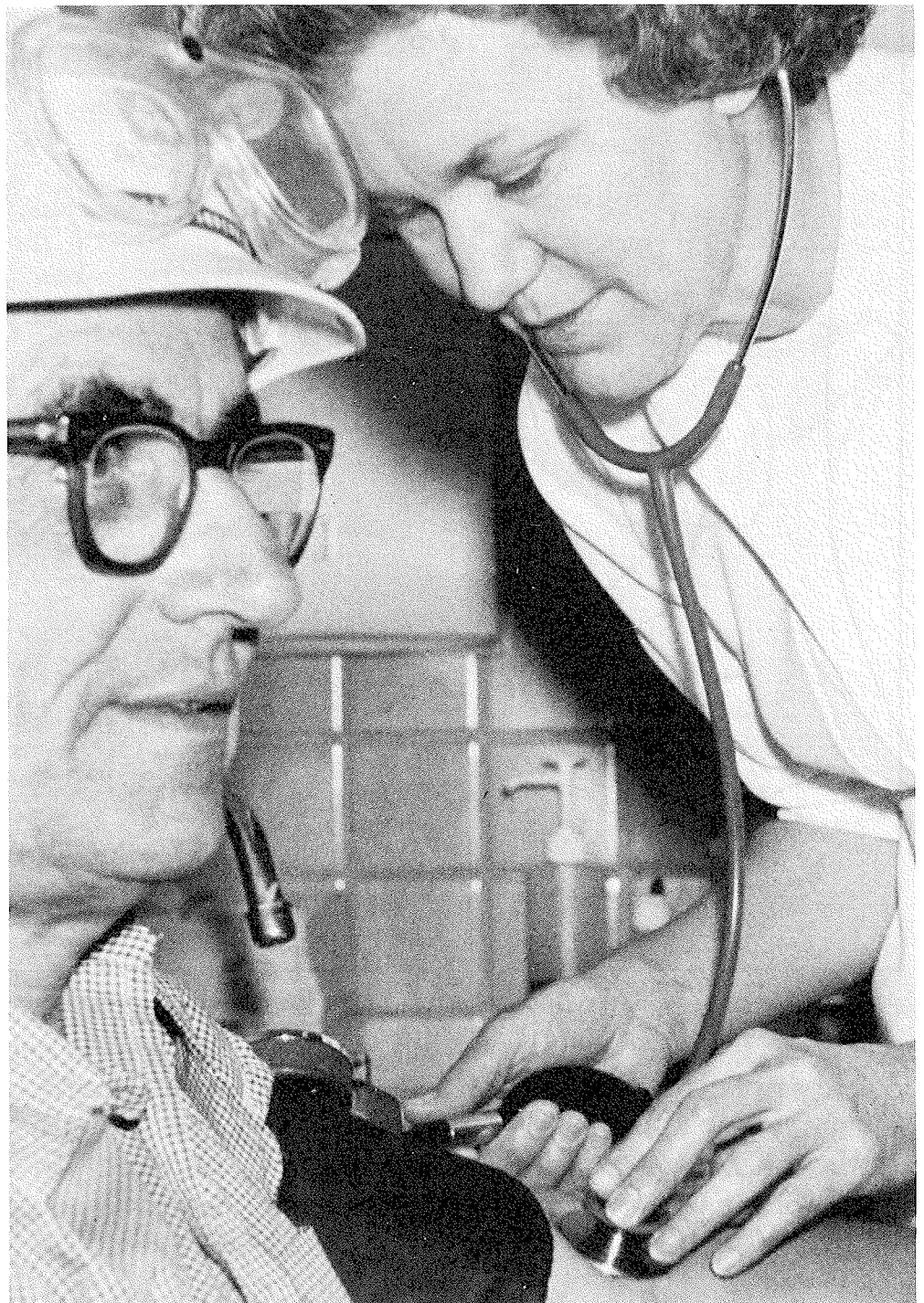
By S.L. Smith

Ask people to talk about themselves, and they will invariably mention their jobs. People identify themselves by their work, their careers.

No wonder, then, that an injury that keeps someone off work frequently involves more than the physical problem. Injuries can cause people to view themselves, their jobs, and their employers in a different light. That's why successful rehabilitation programs must be capable of healing the mental bonds between an employer and employee as well as healing the body.

"It's really important for people to understand that when you have a chronic injury that keeps you from working, well, your job is a big part of your identity. I've been a nurse for 22 years and it's a big part of how I view myself. When I got injured, I felt like I lost part of my identity."

Sue Carlisle is an OB/



GYN nurse at a Pittsburgh-area hospital. She suffered a back injury at work a little over a year ago. For Carlisle, the worst part of her injury wasn't the pain or inconvenience—it was the depression she suffered as a result of being off work. "A doctor told me I might never work again after my injury. I became really depressed. Finally, another physician told me to go back to work even if it was only a couple of hours a day. Just getting in and out of the car, getting dressed for work, walking around, talking to coworkers was therapeutic," remembered Carlisle.

According to Dorothy Windham O'Shea, vice president of BENESYS, a Houston-based mental health services company, work is more than a financial necessity for most people. It offers a worker a sense of fulfillment and importance that can become lost during the recovery period following an accident.

"Accidents often instill a fear in employees and members of their families, and this trauma must be addressed if the worker is to recover and return to work as quickly as possible," said O'Shea. "It's important to convince the injured employee that his or her employer does care, is concerned, and wants to be of assistance."

A positive attitude, on the part of both employer and employee, can go a long way to foster a quick return to work. And given the escalating cost of workers' compensation, employers increasingly say they can no longer afford to have employees in extended recuperation, or to write them off as part of the cost of doing business.

Medical approaches to rehabilitation have changed as well. The old prescription of complete bedrest and no work until a 100 percent recovery has been achieved is

as outdated as last week's television guide. Statistics now prove the sooner an injured employee is returned to the workforce, even in a light-duty or modified-duty position, the better the chance of recovery from that injury.

As a result of these changing attitudes, many companies which never considered a light- or modified-duty program are now hustling to develop and implement them. According to Rebecca Shafer-Mills, vice president of Marsh & McLennan, Inc., a Hartford law firm, once someone is out for two weeks, the chance of him or her ever returning to work is less than 50 percent.

The reason for this, said Shafer-Mills, is that workers become psychologically, as well as physically, unemployed. The best way to combat the psychologically debilitating aspects of an injury is to maintain contact with the injured employee, and to bring him or her back to work in any capacity possible. Shafer-Mills recommends that companies set a goal of returning 90 percent of their injured employees to work within four days or whatever the state waiting period might be.

"There's an employer in New Jersey where if a doctor prescribes four hours of bedrest—the employee can work four hours but needs four hours of bedrest—they actually bring the employee into the facility and they have a little infirmary with dividers between the beds so employees can rest there. They bend over backwards to get employees back, because they don't want them to become psychologically unemployed," said Shafer-Mills.

Keeping in touch

Maintaining open communication with injured employees, even if it is just a phone

call a week, can be crucial to returning them to the workplace in a timely fashion. "Injured employees often have no contact with their employers during recovery, other than being sent forms to fill out," noted BENESYS's O'Shea.

Edward Welsh, former director of the Michigan Bureau of Workers' Compensation, now lectures at the School of Labor and Industrial Relations, Michigan State University, East Lansing, Michigan. Ac-

ording to Welsh, a supervisor or someone who has worked closely with that employee should stay in touch and informed about the recovery process. A *pro forma* call from human resources or an insurance company is not going to make an employee feel anyone is truly concerned about his or her welfare.

"If you set up a good relationship with a worker in the first place, if someone is talking to the worker from the moment



he's injured, then it's pretty easy to say, 'The doctor's released you, let's go back to work,'" said Welsh. However, he added, "If you get hurt and they kick you out and nobody calls you for three months and the first person who calls you says, 'Hey, you have to come back to work tomorrow,' you're going to resent that."

Shafer-Mills counsels her clients to not only call injured workers while they are

off, but also to bring them into the plant for a weekly meeting. Unless the employee is bedridden, there is no reason why he or she can't attend a 1- or 2-hour meeting once a week, Shafer-Mills insisted.

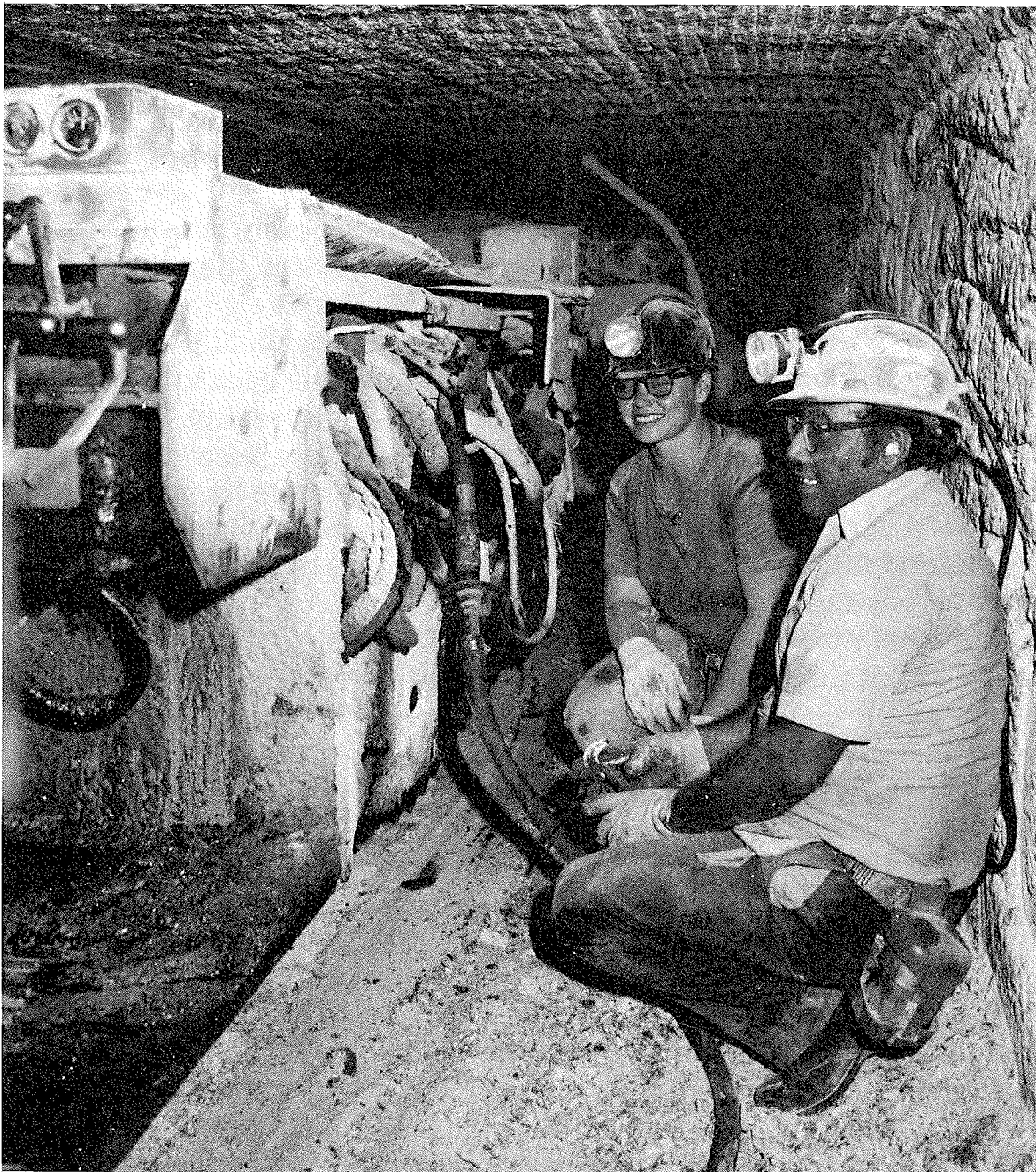
The physician's role

Physicians treating injured workers must be made aware of their specific job duties and about any modified- or light-

duty programs available to those employees upon their return to work.

"When doctors know that you want people to come back to work," commented Welsh, "they have a whole different attitude than if they say to themselves, 'This is one of those companies where workers have to be 100 percent better before they'll take them back.'"

Health care providers should have a copy of an injured employee's job description and



must be made aware of how much the employer is willing to modify it, suggested Shafer-Mills. If you have a light-duty program, make sure the doctor knows that too. Unless told otherwise, most doctors will assume a company intends to return a fully recovered employee to his old job. Bill Donlon, corporate claim/safety manager for Standex International Corp., Salem, N.H., said that his company tries to develop relationships with health care providers servicing the areas surrounding Standex facilities. "By associating ourselves with a medical provider, they become more familiar with us and they are better able to work with us to get injured employees back to work."

Orrin Mann, M.D., specializes in occupational medicine. He said that in the cases he handles, "In-depth knowledge of workplace hazards, ergonomics, biomechanics, and industrial knowledge will make a big difference in terms of the outcome of the patient's treatment."

Mann requests job descriptions, or at the very least, tries to find out what types of work his patients do, what hazards they are likely to face, and what modified duty positions are available with their employers. He also contacts employers after examining an injured worker, to notify them of the person's condition and prognosis.

"In a perfect world," said Mann, "communication among the patient, us, and the employer wouldn't make any difference in the return-to-work process. In the real world, there are frequently labor-management disputes and physicians, by the very nature of occupational medicine, are always walking the tightrope between the two. The best way to handle that is to be objective and to give good medical infor-

mation and treatment to the employee, let him know what the diagnosis is, and also let him know that the employer knows what his work restrictions might be."

At Standex, company officials maintain contact with both the employee and the doctor throughout the treatment process. Often, if an injury looks like it will require time off work, a job description is sent to the hospital or doctor with the employee.

"Then we call the doctor or he calls us and tells us what jobs that person can or cannot do, based on the job description," said Donlon. "Sometimes we try to work out a light-duty or alternative job right then and there."

He added, "Doctors are reluctant to send people back to work if they don't know what the job is. They've got their reputations, and professional liability. They don't want to send someone back to work who's not able to work. In reality, that person might be able to do a restricted-duty or light-duty job. The more the doctor works with us, the more he'll trust us, and hopefully, the employee will trust him "

Modified-duty blues

While light- or modified-duty programs can help bring workers back to their company faster, they are no panacea. A lack of commitment by either the employer or the employee to the program can doom their usefulness, say rehabilitation experts.

With some modified-duty programs said Shafer-Mills, employers "only considered the financial aspect, when really what they're trying to do is keep the employee gainfully in the workforce. It has to be a positive program. It can't be a negative program, where an employer puts someone off in a cold room and makes him sort

nuts and bolts.”

David Brown, who works in food-service for a national airline, suffered a lower back injury over a year and a half ago. Since the initial injury, Brown has returned to work and been reinjured six times. He is currently undergoing physical therapy and rehabilitation at The Workplace, an acute care and rehabilitation facility near Pittsburgh.

Brown complained that in the past, his supervisors were forcing him to return to work too early. “No one knows more about a job than the people who do it,” he pointed out. “Companies should listen to their workers. Spend some time and money on them. Make them feel like they’re worth the effort.”

“A lot of companies, when they bring employees back on light duty, give them stupid stuff to do—packing crates, cleaning the warehouse. That’s really bad for your self-esteem.”

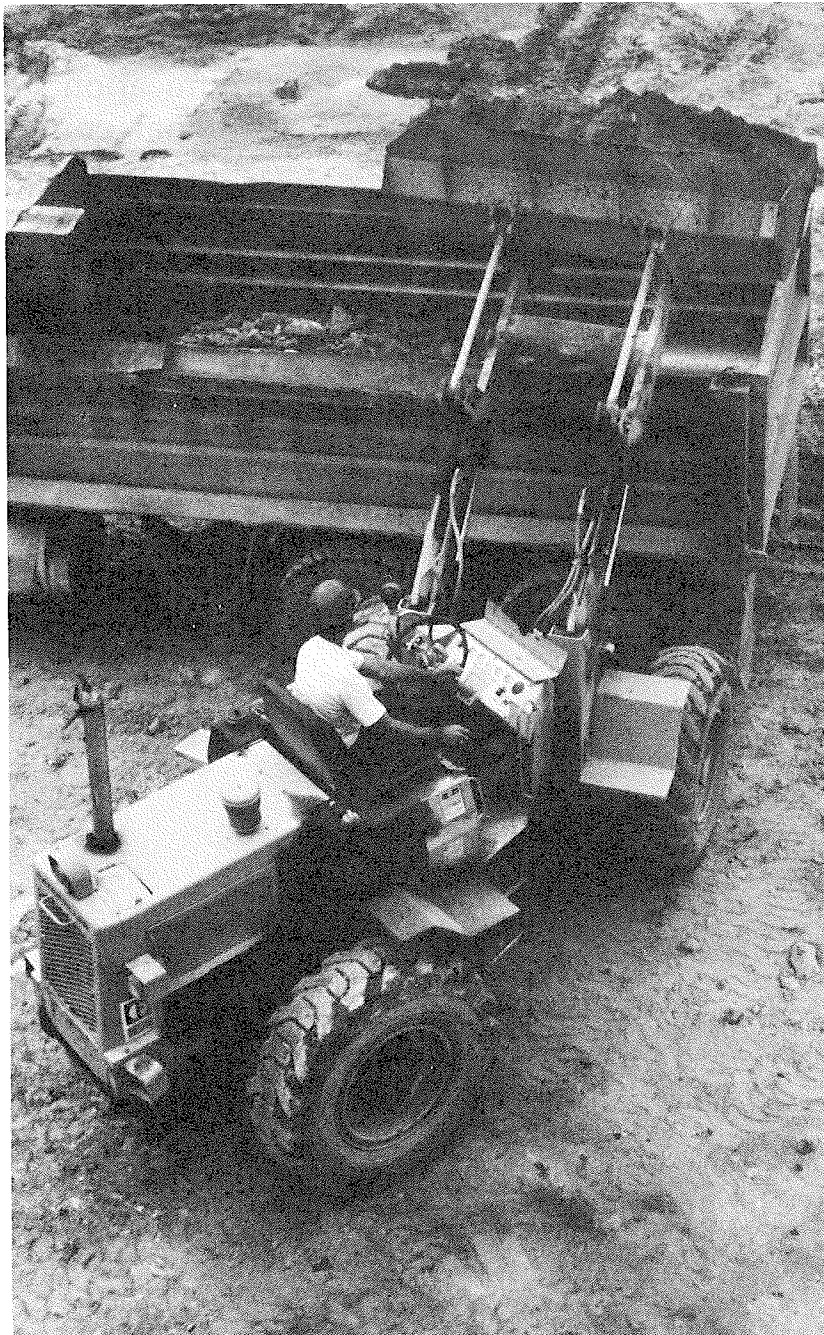
Brown was hoping to return

to work before the end of March. If he does return, said Mann, who is the physician at The Workplace where Brown is undergoing therapy, he will be bucking the odds.

“There’s a lot of data to show that people who are dissatisfied with their jobs have a tendency to stay off the job longer when they’re injured. They have no incentive to go back,” said Mann.

Brown readily admitted that he was unhappy with his company and the manner in which he has been treated since his injury. He complained that no one from his company had called to find out about his progress. According to him, that would make all the difference in the world.

Brown says his mental attitude has improved considerably since he began rehabilitation. “Before I started rehab, I was really depressed. I was suicidal. I was telling people, ‘Show me a bridge, give me some pills.’ The depression gets better, though,



when you start to feel like you're getting better."

Psych out

Keith Johnston, a rehabilitation engineer in Toledo, Ohio, jokes that he should go back to school and get a second degree in psychology. While he is paid to deal with the physical aspects of an injury, he often finds himself in the role of sympathetic listener for injured workers. "I never realized how important the psychological factors could be on this job," admitted Johnston. "I end up being a counselor more than I end up being an engineer. Of all the things that dictate whether a project I'm working on will be successful, the psychological factors are the strongest."

Injured workers often suffer from psychological trauma or Post Traumatic Stress Syndrome (PTSD). "An employee suffering PTSD will often express his or her

emotional suffering by manifesting physical symptoms. For example, a patient may complain of pain that has no diagnosed organic cause and the usual methods of treatment or physical therapy are ineffective," said O'Shea.

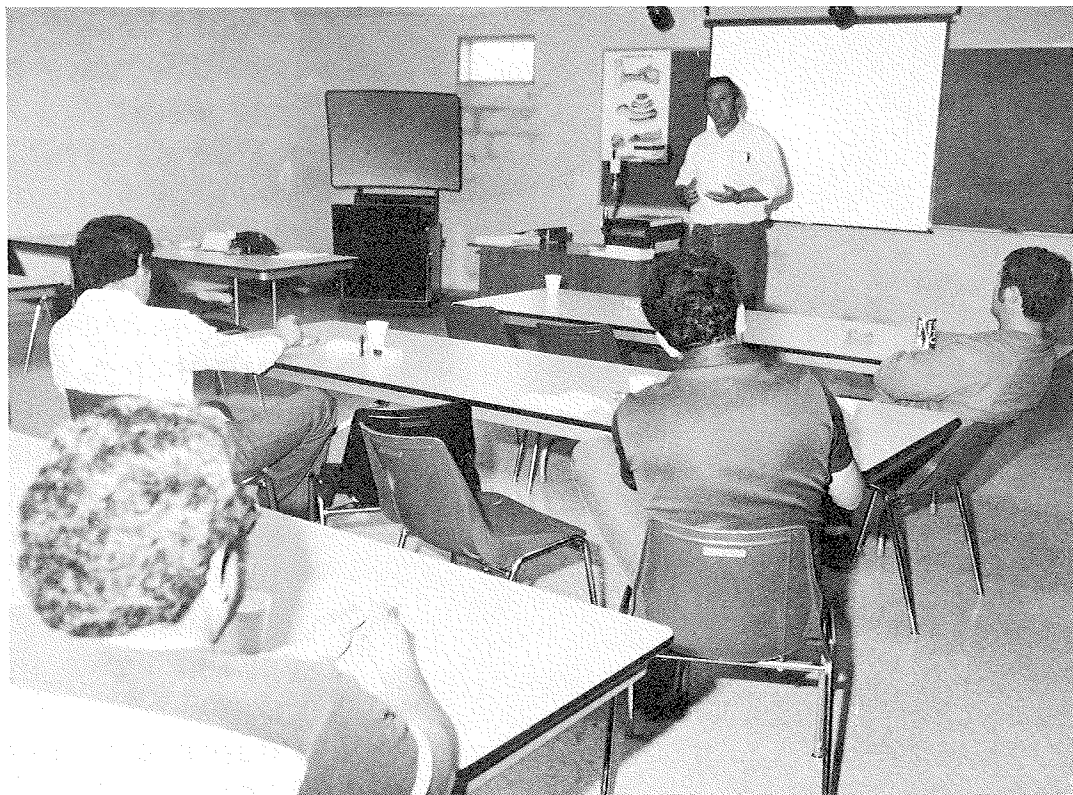
She suggests that injured employees receive a psychological evaluation as well as a physical one after an injury. She also suggests that the fundamental needs of the worker's family—finances, child care, transportation—be examined.

Communication between the worker and his or her employer should also be assessed. According to Thomas D. Wood, director of physical therapy at The Workplace, communications can break down as soon as the worker heads for the emergency room or his doctor.

"The employer isn't aware of what's going on. The employer might not get in touch with the injured employee because

they're dealing with a number of other entities like the hospital or doctor," said Wood. "As a result, both the employer and employee kind of feel lost. The employee feels no one cares about him, and the employer feels like the employee might be dragging an injury out."

Because of past abuses of the workers' comp system, Wood said, many employers take injuries personally. They



act as if injured employees are "out to get them," especially if the employee has notified an attorney. But through prompt return to work, employers can keep tabs

on employees' physical condition, and can see for themselves what kind of progress is being made.

Rehabilitating the workplace

When Joanne Kapnick, the administrative assistant to the president and CEO of The Andersons, an agricultural firm in Maumee, Ohio, was diagnosed with carpal tunnel syndrome, the first thing she did was talk to her employer. Rather than file a workers' compensation claim and take time off work, Kapnick and her employer agreed on a plan that allowed her to stay on the job.

Keith Johnston, a rehabilitation engineer with the Ability Center in Toledo, Ohio, was called in to take a look at Kapnick's workstation. He made modifications to the workstation, recommended a new chair which he then further modified, and added some new equipment. The cost of the changes was \$2,500, a far cry from the \$4,000 to \$18,000 that ergonomic workers' compensation claims in Ohio can cost.

"Employers are finally starting to realize how much it costs when someone is injured. Once they've been injured, it's cheaper to get them back to work in some fashion than to write them off as a total disability," said Johnston. Although Kapnick's carpal tunnel syndrome hasn't been cured by the modifications, the pain she was suffering has been relieved and she is able to function and do her job. Kapnick was very involved with her workstation redesign, which she said is "certainly an aid. It made it easier to stay on the job, and there is certainly less pain involved."

Kapnick was in a high-profile position at The Andersons, a company which tries to be proactive on safety and health issues. Stacy Schmitt, director of safety, health, and environmental protection, said the company "wanted to do something that would make an impact, not only for her, but for the company as a whole. We thought she would make an excellent test case to do that."

Since the redesign of Kapnick's workstation, a number of other employees have come forward and asked for workstation changes. Schmitt said he welcomes the requests.

"Ergonomics is one of those issues where we feel if we don't make a move today, we're going to be paying for it significantly down the road. We got Keith involved at an early stage, to help us understand what we could do to help our employees out," emphasized Schmitt.

When employees are injured, the company welcomes them back as soon as a physician signs a release. "Our policy is to let the employee know we can't do the job without him, and that he or she is an important part of what we do here every day. We let them know we need their assistance to get the job done," said Schmitt.

Supervisors are expected to maintain, at the least, weekly contact with injured employees. "We want to make sure they understand we miss them and it's tough getting the job done without them," he added.

Injury management

Once an injury has been diagnosed and treated, get the employee back on the job as quickly as possible. "Unless someone is completely bedridden," said Shafer-Mills, "there's no reason why they should be off work. There must be some productive job they can do within the facility."

If possible, get the injured employee involved in the design of the job. Employees who have input into their modified- or light-duty jobs will be happier to return to work than employees who have no control over their duties

Said Carlisle, "Just getting back to work on light duty, doing administrative tasks, made me feel better.

I felt like I was a nurse again, and my attitude about my recovery became more positive." Standex involves injured workers in discussions about modified jobs, be-

cause, as Donlon pointed out, "It is ultimately their choice to return or not. Sometimes we include union representatives in this process as well, because it might affect

other people out in the plant. Typically, the more people you get involved, the better the end result will be."

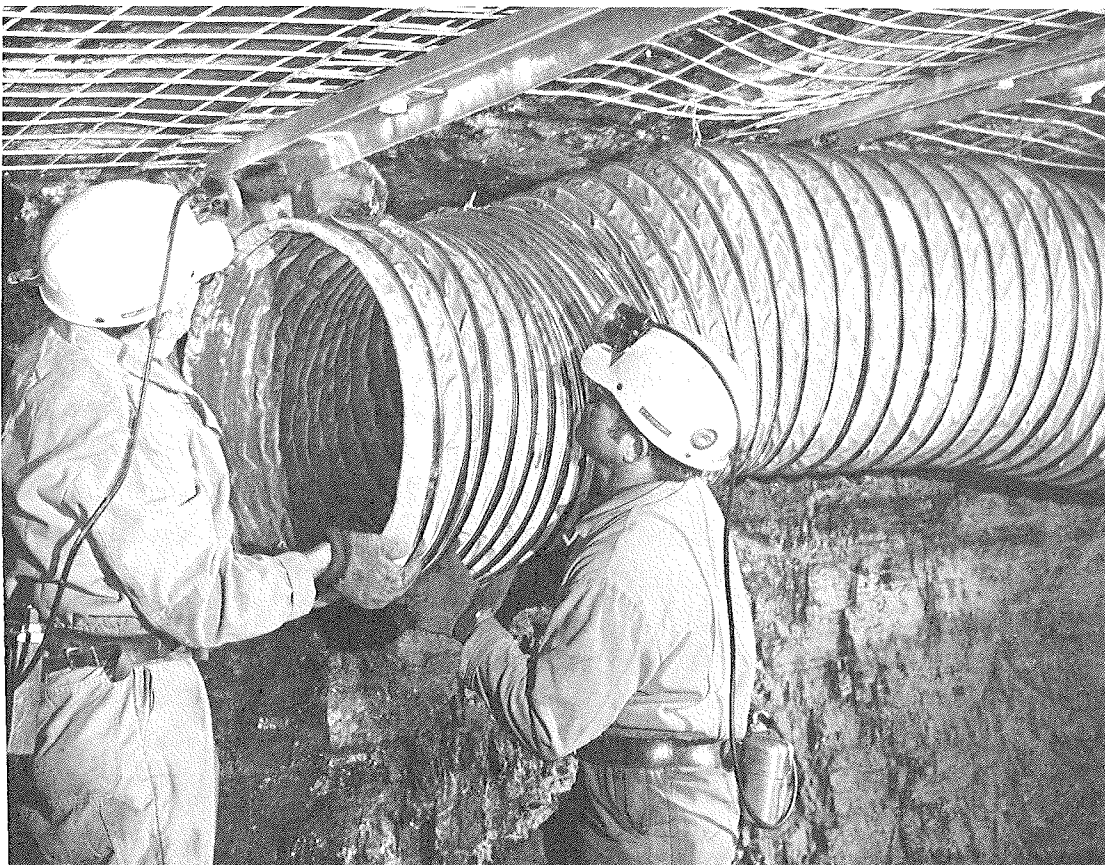
When people are off work for a long time, note rehabilitation experts, they no longer think of themselves as workers, but as patients or as disabled people. They learn to compensate for the inconvenience of their injury. Spouses may get jobs or second jobs, lifestyles change, and returning to work is no longer as important as it was when the injury first occurred.

Only injured workers are treated at The Workplace, and that makes a difference, according to director Jeanne Cobb. "We want to try to eliminate the disability/ill-

ness mindset that goes along with being injured and then being treated like you were ill. There's no one here who's being treated for a cold or

automobile accident or stroke. They're all workers and they're treated like workers."

Both Shaver-Mills and Welsh suggest that all employees be made aware of modi-



fied-duty and light-duty programs their company offers. That way, if they do get injured, they know that they have a job when they return and that, in fact, they are expected to return. Said Shafer-Mills, "It's important that employees know the company wants to bring them back as soon as possible and for them to know that they are part of the workforce. Obviously, there's another motive for that, to contain costs."

Lowering comp costs

The sooner employees are off workers' comp and back on the job, the better the financial picture for the company. Shafer-Mills said there is nothing wrong with telling employees the truth: that indemnity costs and medical costs come right out of the bottom line of a company's budget.

"I worked with one employer who implemented an injury management program, the bulk of which is return to work. They reduced their workers' comp incurred losses by 84 percent the first year. The year before they implemented the program, they spent as much on workers' comp as they did on raw materials for their facilities. Obviously, you can't run a business like that for very long," Shafer-Mills observed.

Standex, which employs approximately 3,500 workers at 40 facilities, instituted an injury management program in its 1989-90 fiscal year. The firm managed to cut workers' comp costs by 40 percent. The per claim cost, for medical and lost time, is down 15 percent.

Standex also made an important accounting change, said Donlon. It began charging back workers' comp costs to the individual divisions. "It educated them as to what they were paying for and why they were paying for it. What that did is

make them more safety conscious. As a result, we've had fewer losses," he said.

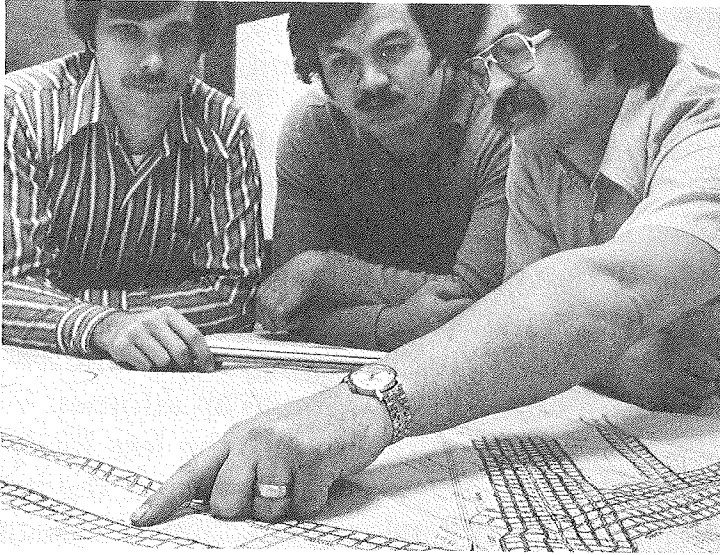
The company also tries to educate employees about the benefits available to them. "If they don't understand the benefits, the first person they're going to contact is an attorney," said Donlon. "If we educate them on the available benefits right away, hopefully we'll keep them from going to an attorney. We feel the more we tell them, the less likely they are to do that."

As part of the injury management program, Standex began a light- and modified-duty program. Standex also screens new employees, to ensure they can meet all the physical and mental requirements of a job. Donlon said the company is reviewing its screening process to make sure it is in compliance with the Americans with Disabilities Act.

R. Gary Gray, P.T., president of Midland Physical Therapy P.C., Midland, Texas, said employers often ask him to give employees complete physical screenings, including cardiovascular assessments, musculoskeletal evaluations, static and dynamic lifting evaluations, and job-specific testing. That way, the employer has a database available if an employee is ever injured and tries to claim preexisting conditions are a result of the injury. "We had a guy, for instance, who had a 20 percent quadricipital strength deficit [found during a pre-injury examination]. He jumped off a truck and tore up his knee and had to have surgery. It was a legitimate injury," remembered Gray.

The man underwent rehabilitation after surgery, and returned to his former physical condition. He later found a doctor who performed three cosmetic surgeries on the knee. An attorney, acting on the man's

behalf, sued the employer for \$1.2 million. But using the database established for the worker before the injury, the employer fought the case and the worker settled for \$24,000, the cost of the first surgery and rehabilitation.



Returning employees to work promptly, said Gray, "doesn't allow them to become a statistic." He added, "The longer they stay out of work, the more likely they are to be caught up in a game of physicians, chiropractors, physical therapists, or attorneys out to abuse the system."

The game

Wood said that once a person is completely enmeshed in the workers' comp system, and attorneys become involved on both sides, the longer the recovery process and the time spent away from the job. He added that he has been in some extreme situations where an attorney had to be present every time a therapist worked with the patient. "If litigation results from an accident, the subsequent costs can be enormous," O'Shea of BENESYS pointed out. "Just imagine your recovering employees sitting at home, watching soaps which are continuously interrupted by commercials from law firms offering their services to accident victims."

Many people say the battle for workers' comp dollars resembles some kind of perverse game more than a process designed to achieve an optimum medical result. Wood

said he sometimes feels like a referee between an employer and an employee, with both sides believing he should stick up for their interests. "You have to ask yourself sometimes, 'Who are we working to benefit here?' Are we all working to get this person back to work,

or are we all just stuck playing some game?" Wood questioned.

What benefits both the employer and the employee the most, agree experts, is for the employee to continue to feel and act like a worker and return to the job as quickly as medically possible. The bond between the worker and the company, even if it's strong, weakens if someone is away from work for an extended period.

Quick intervention and open communication among the employee, employer, and health care providers can speed a recovery along tremendously. Knowing that coworkers and supervisors are concerned about their health and recovery, and are willing to offer whatever support is needed, can contribute greatly to the bonding process for injured workers.

Said Sue Carlisle, who is now working to get off modified duty and back into her regular routine, "Your mental attitude makes all the difference in the world. As a nurse, I know that's true. Having a positive attitude and people who support you is half the battle of recovery."

Reprinted from the April 1992 issue of Occupational Hazards magazine.

Good leadership = positive supervision

All the following are interrelated: leadership, attitude, team work, safety, and quality production. Those organizations and companies that will survive through the '90's and beyond will be those that have, and practice, positive supervision.

Books have been written on leadership and that alone tells one that leadership is not a quality that comes naturally just because you have people working for you. It still has to be developed by using a positive attitude toward people and situations. Good leadership depends on your ability to make people want to follow voluntarily. Rest assured that we all want to feel good about ourselves and what we do for a living. Supervisors can help employees develop that feeling with a positive attitude that inspires them to do a good job.

Supervisors that push rather than lead rarely get the best out of the employees working for them. Pushing employees normally will only give them enough incentive to do as little as it takes to get by so you the supervisor will stop pushing. Effective supervisors know that in order to get the best efforts out of people you have to work with them. You must help by training them how to be more productive. Most employees want to do a good job as long as they feel that we appreciate what they're doing and encourage them. We must demonstrate to our employees that we think their work is valuable and appreciated.

There will always be a few employees that have to be reminded to keep busy but when you follow good supervisory practices those will become the exception, not

the rule. However, if you find yourself having to do too much pushing it indicates too little leadership on your part. As a supervisor you should consider yourself as the crew's team leader and, as on any team, there are strengths and weaknesses so it becomes very important that a supervisor gets to know his/her team so he or she can use their strengths to their best advantage and work on improving the weaknesses in those that need it. Anyone can be a follower but it takes a special person to blend patience, understanding, persistence, and a positive attitude toward people. Keep in mind that as you develop a positive attitude in your people they will try to please those who are encouraging.

As a supervisor you have the ability to inspire your team to develop a positive attitude toward the job, company and its supervision. Because you care they will respect you. In the future when you ask the team for safe production they will give you safe production because they know you care and are concerned about them. The best way good supervision can be described is it's the art of getting average people to excel in their jobs. It produces team work, team spirit and a positive attitude toward people that will always give a company the edge over their competition by experiencing zero accidents and high productivity.

Good leadership can and will make a difference.

*H.L. Boling, Safety and Hygiene Supervisor,
Phelps Dodge Morenci, Inc., Morenci, AZ.*

Incomplete lockout results in hand injury

A recent accident at a Canadian mining firm illustrates the importance of bringing all machinery and equipment to a **zero energy state** before working on it.

A 28-year-old mill operator was attempting to check the belts on a 15 horsepower SRL pump. The pump was connected to a tank containing water that had been pumped from underground. It was used to draw water from the tank for use in the mill.

The victim turned the pump off and locked out the electrical power to it. He then entered the pump area which was dimly lit. He neglected to bring a flashlight with him; but since he had shut off the power, he assumed that there was no energy to the pump. When he attempted to check the first belt, his glove and the first finger of his right hand were pinched between the still-moving pulley and the belt. The tip of his first finger was amputated mid-nail and his second and third fingers were badly crushed.

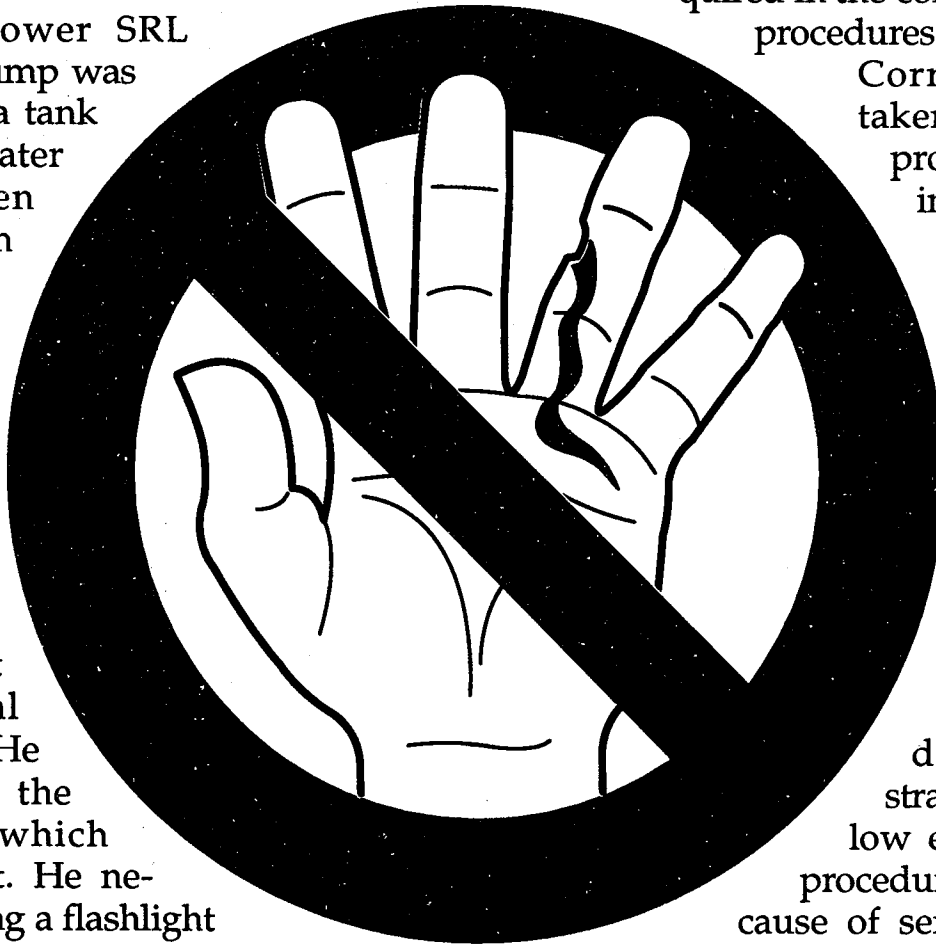
The pulley and the belt were still moving because gravity was forcing water from the tank through the impeller of the pump. The victim had neglected to close the valve between the pump and the tank, as is required in the company's written procedures for this job.

Corrective actions taken included improving the lighting in the pump area and safety talks with all plant employees on the necessity of following written procedures and, in particular, proper lockout procedures.

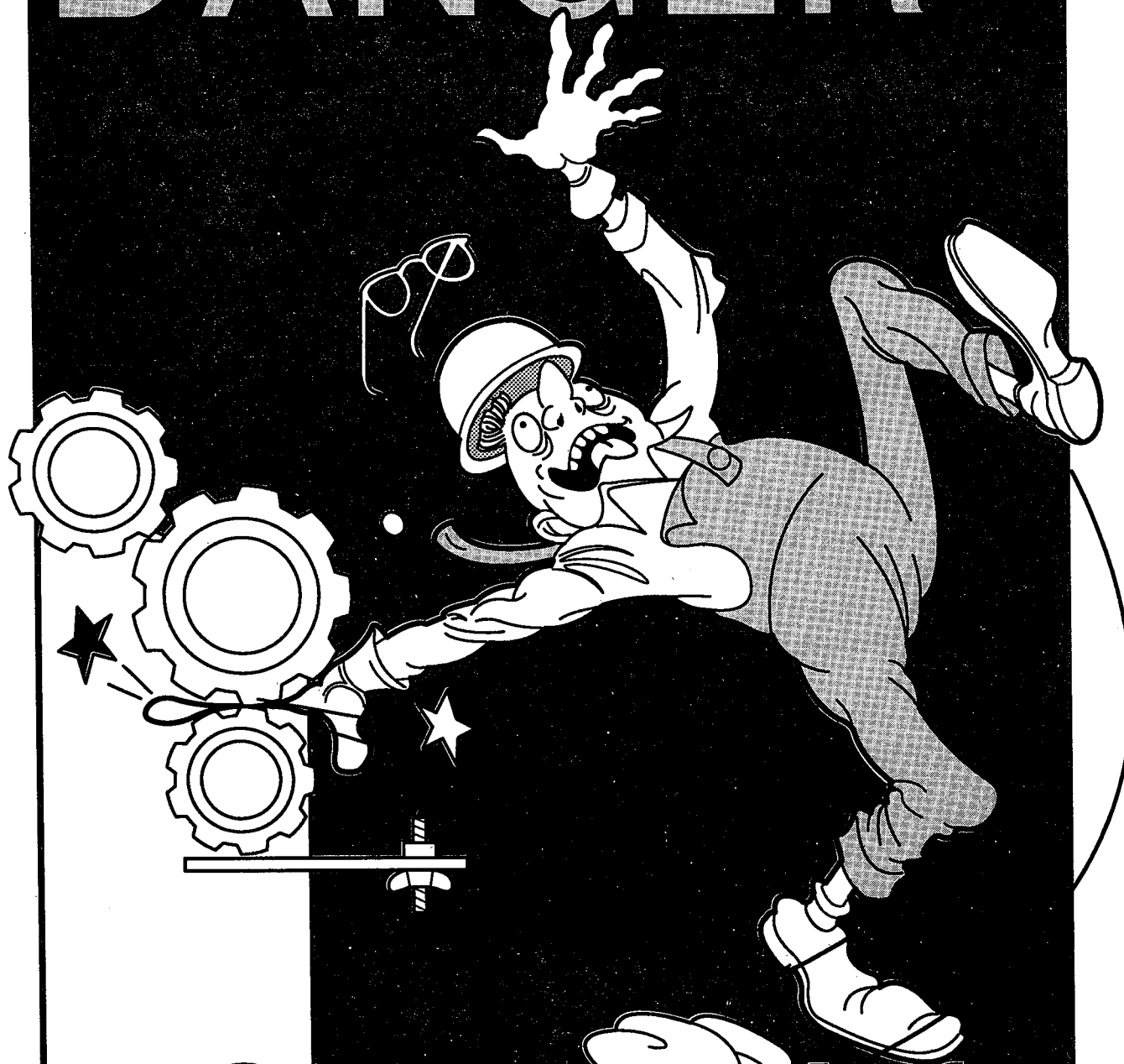
As this accident demonstrates, failure to follow effective lockout procedures is a frequent cause of serious hand and other injuries, including fatalities.

Effective lockout involves identifying and eliminating or controlling all potential energy sources, including non-electrical forms such as hydraulic/pneumatic, mechanical, chemical, thermal, or nuclear energy.

Reprinted from the January 1993 issue of the Canadian Mines Accident Prevention Association's Incident Report.



DANGER



**Lock out power *before*
attempting repairs**

Courtesy of the Mines Accident Prevention Association, Ontario, Canada

MAPA to hold 61st Health and Safety Conference

The Mines Accident Prevention Association of Ontario will hold its 61st Mining Health and Safety Conference in Toronto,

Canada, at the Sheraton Centre on May 27th and 28th, 1993.

1993 Mine rescue contest schedule *As of January 15, 1993*

Date	Contest	Location	Date	Contest	Location
05/07-08/93	Southwestern Regional	Carlsbad, NM	06/11-12/93	Northeast Regional	Alexandria Bay, NY
05/12-13/93	Kansas Shootout	Hutchinson, KS	07/16-17/93	Northwest Regional	Wenatchee, WA

Arch of West Virginia promotes employee wellness

Our wellness program at AOWV has suffered a setback due to the departure of our medical coordinator who only stayed with us for a short time. However, we are still committed to employee health and wellness and a replacement will soon be hired.

As you know, we are committed to a "smoke-free" workplace by the end of the first quarter of 1993. We know, of course, that the idea of a "smoke-free" workplace will not be popular among the smokers at Arch of West Virginia but numerous studies have proven that second-hand smoke can be dangerous to the nonsmoker.

We will soon be offering smoking cessation classes to the smoking population. We encourage you to take advantage of these classes. It is disheartening to see our employees and retirees take the risk of dying an agonizing death due to lung cancer caused by years of smoking cigarettes.

Even if you have smoked for years, it's still not too late to quit. Here's what happens when you quit smoking:

1. Within 20 minutes—your blood pressure and pulse rate drop to the levels they were before you smoked.
2. Within 8 hours—your blood levels of carbon monoxide and oxygen return to normal.
3. After 72 hours—your lung capacity is already increasing.
4. Within 3 to 5 years—your risk of heart attack drops to that of a nonsmoker.
5. Within 10 years—your risk of dying from lung cancer drops to the level of a nonsmoker.

We know that smoking is a very difficult habit to break. We want to work with our employees to help them kick the smoking habit so that they can lead long and productive lives both at work and with their families. We believe you owe it to your family, your friends, your coworkers, and especially to yourself to kick this habit and lead a long and happy life!

Reprinted from the September 1992 issue of the Arch of WV News, an employee newsletter from Yohln, West Virginia.

Up in smoke

Smoking is becoming socially unacceptable behavior for professional and managerial workers, and white-collar workers are more likely to have never smoked than their blue-collar counterparts, according to a recent study. White-collar workers also had the highest quit rates among all workers.

A study on cigarette smoking and occupational status published in the September issue of the *American Journal of Public Health* followed smoking behavior in both men and women from 1977 to 1990. The authors of the study, Lirio S. Covey, Ph.D., Edith A. Zang, M.D., and Ernst L. Wynder, M.D., found that, over time, the quit rates increased for all categories in the study except for laborers, whose rates remained relatively constant.

Nicotine dependence was less prevalent among professionals and most common among blue-collar workers. There was no clear relationship between occupation and nicotine dependence among women in the study, except that nicotine-dependent professional women increased in numbers, while the number decreased for blue-collar female workers.

The authors concluded that a strong association between occupation and smoking

continued, although smoking behavior was much less related to occupation among women. The authors also noted: "Among men, higher status occupations were generally associated with lesser smoking exposure as estimated by quit rate, current smoking prevalence, average tar yield per cigarette, and nicotine dependence."

Although women in higher level positions were more likely to have smoked at some point than the men in similar positions, they also had higher quit rates and smoked lower tar cigarettes. The authors noted that the smoking rates among laborers was significant, since they were more likely to be exposed to hazardous substances at work. While estimates

of rates of occupational risk of lung cancer vary widely, from 4 percent to 36 percent, the risk of lung cancer from smoking is 85 percent.

"Consequently, increased efforts at reducing smoking exposure would contribute substantially to the overall reduction in the risk of lung cancer and other diseases related to both smoking and occupational exposures," concluded the study.

Reprinted from the October 1992 issue of Occupational Hazards magazine.



Holmes Safety Association

Monthly safety topic



Fatal powered haulage accident

GENERAL INFORMATION: A 61-year-old plant operator and truckdriver was fatally injured when the truck he was driving overturned while he was attempting to dump a load of material near the edge of a stockpile. He died the following day. The victim had a total of 10 years mining experience, the last 4 years and 2 months at this operation as a plant and equipment operator.

The operation was a surface sand and gravel operation. The plant was normally operated one 8-hour shift a day, 5 days a week. A total of two persons was employed full time. The victim was a part-time employee.

Bank-run sand and gravel was hauled by truck from the pit to the plant. Occasionally, raw material was purchased from outside sources and transported to the mill by contractors. The material was crushed, screened, sized, washed, and conveyed to bins. The finished product was stockpiled for sale to customers.

DESCRIPTION OF ACCIDENT: On the day of the accident the victim reported for work at 8:40 a.m. As a part-time employee, he worked on request by the two owner/operators—a father and son team. They serviced and started the plant that morning.

At about 9:45 a.m., the victim hauled a load of material from the storage bin. He

drove onto the stockpile and then backed toward the edge preparatory to dumping. The owner, who was operating a front-end loader nearby, saw the victim backing the truck toward the edge and saw the stockpile face begin to crumble. He tried to warn the victim by sounding the loader horn. The truck stopped briefly and moved forward slightly. Then the victim began to back toward the edge again. The undercut pile failed and the truck overturned. The victim was thrown from the truck and pinned between the cab and the embankment.

The rescue squad was summoned and a front-end loader was used to lift the truck off the victim. He was transported to a local hospital where he died the following day.

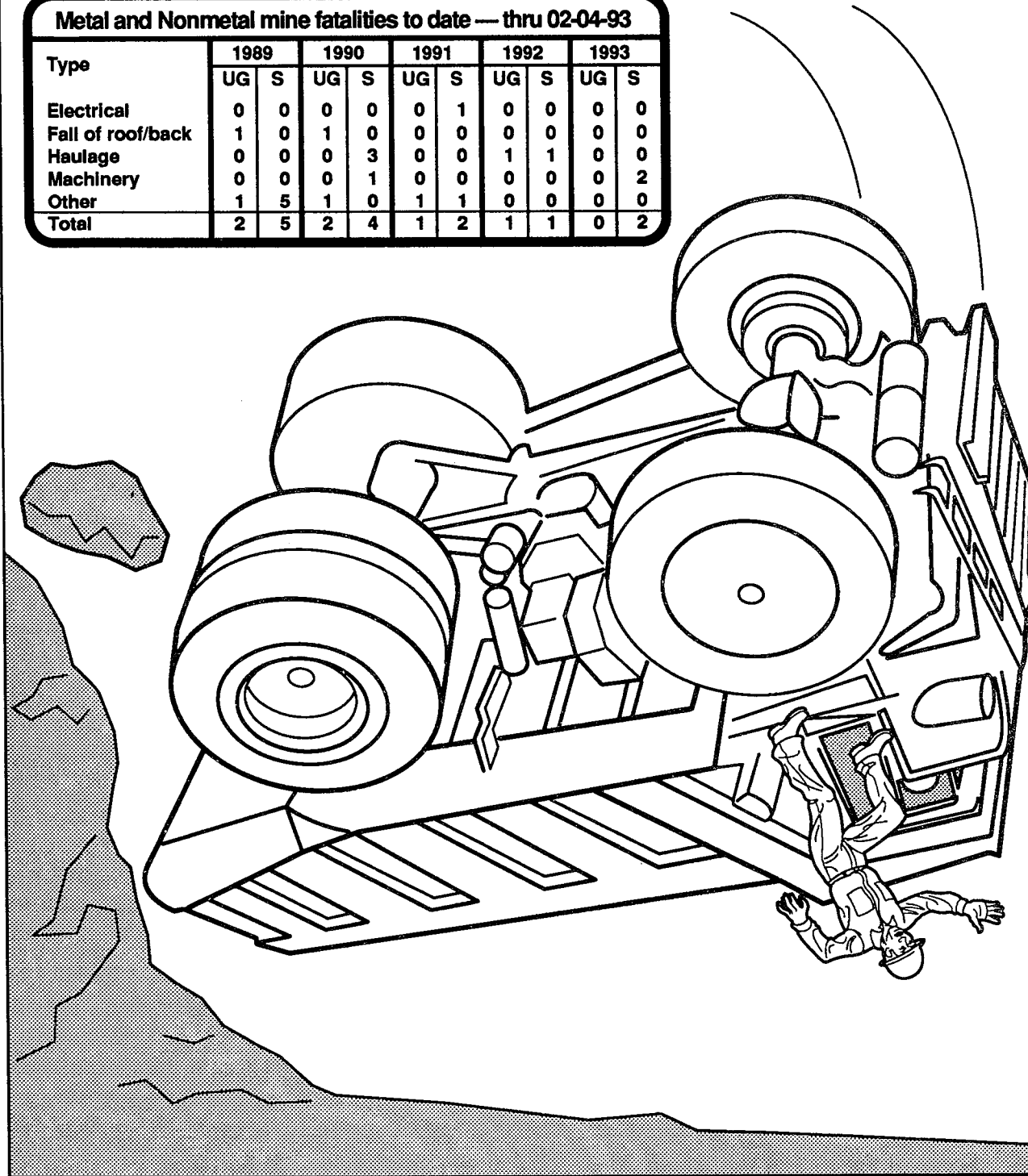
CONCLUSION: The accident was caused by undercutting the stockpile. Factors contributing to the severity of the accident were the removal of the door from the cab of the truck and the victim not wearing the seat belt provided.

Reportedly, the door was removed due to lack of side-to-side clearance under the materials storage bin which prevented opening the door when the vehicle was in position for loading. It was necessary for the driver to leave the cab in order to pull the bin.

A berm about 3 feet high extended along the outer edge of the dump area and access to the stockpile was via a ramp. The mate-

Metal and Nonmetal mine fatalities to date — thru 02-04-93

Type	1989		1990		1991		1992		1993	
	UG	S	UG	S	UG	S	UG	S	UG	S
Electrical	0	0	0	0	0	1	0	0	0	0
Fall of roof/back	1	0	1	0	0	0	0	0	0	0
Haulage	0	0	0	3	0	0	1	1	0	0
Machinery	0	0	0	1	0	0	0	0	0	2
Other	1	5	1	0	1	1	0	0	0	0
Total	2	5	2	4	1	2	1	1	0	2



rial was damp and did not readily flow to the angle of repose. The stockpile had become undercut in some places and was vertical in others. The truck was equipped with a seat belt which was found to be in

working order and showed signs of past use.

The presence of the door and wearing the seat belt would have contained the victim inside the cab—which sustained relatively little damage in the accident.

Positive attitude = positive behavior

Webster's Dictionary defines attitude as: (1) Manner, disposition, feeling, position, etc., toward a person or thing. (2) Position or posture of the body appropriate to, or expressive of, an action, emotion, etc.

As you can tell it takes in many emotions and feelings including body language, to develop attitude. Attitude adjusts everything we do daily and can, if we allow it, range from the positive to the negative. Since we are only interested in developing positive attitude in our supervision and employees we will pursue that direction.

In order to change behavior we must first ensure that our supervision has a positive attitude toward the company, its leadership, the job and the employee. He or she must promote and accent the positive and handle the negative.

Start the shift: The most positive way to start out a new day with an employee is a warm smile, a good morning, and a hand shake, when it's reciprocated by the employee it will enhance a positive attitude. In addition, taking a few moments of idle chat also helps promote good communication, but most of all it puts both people in a positive and receptive mood to start the shift.

Issue the job assignment: When we issue the day's job assignments to the employee our communication must be positive, thorough, fair, consistent and caring. Example: "Joe, you and Frank will be working on the #18 ball mill. It's been experiencing a gear problem. If you need more help when you check it out, let me know and I will get it for you. Also, let the shift supervisor know you will be working in the area of the #18 ball mill. Both of you guys be careful, check the area over before you start and don't forget to tag and lock it out. You're both important and we would like to keep you around."

NOTE: *It's important that your people are*

cross-trained and that you rotate them through the different jobs so that they don't feel you are unfair in assigning jobs.

Check on the people and the job: At the same time you are going through the area checking on the job and your people, inspect as you walk, write down any defects for corrections (ask your people to do the same, then ask for a list when you talk to them). This will effectively demonstrate to the employee that you care. Make it a point to ask them how they are doing (with a smile) and if there is anything you can do to help. If you feel they are doing a good job, tell them, they will appreciate it.

Follow-up at end of shift: This is a very important part of the day that most of us tend to leave out.

It is a golden opportunity to leave a last positive impression for the employee to take home plus a positive preparation for the next day.

The supervisor should fill in his crew on the area defects found that day and what corrective action and follow-up is being pursued. In addition, it is an opportune time to go over the day's work activity and pat them on the back for a good job (where applicable) and express his or her gratitude for following the safe procedures and for not experiencing an accident, then ask them to be careful on the way home.

In summary: When one analyzes the method that is presented above it becomes readily apparent that developing a positive attitude that shapes safe production behavior does not entail extra work for the supervisor, in reality it should be the easiest and most pleasant, but essential, part of his or her duties. When we develop positive attitude it promotes good behavior that, in turn, ensures safety and productivity that is caused simply by positive supervision.

Nevada limestone quarry goes 27 years without an injury

It has to be some kind of a record: 10,000 hours—more than 27 YEARS—without a single lost-time accident!

That's the mark recently set by employees at the Sloan, Nevada, quarry of Chemstar Lime Company.

An achievement that brought a special recognition award from the Mine Safety and Health Administration, presented to employees during a recent visit by Vern Gomez, MSHA regional director [and now the new Metal and Nonmetal Administrator].

In making the presentation, Gomez recounted that in recent years there has been great emphasis on "safety first." The results of safety awareness programs within the mining industry has been remarkable, he said.

"We tend to talk about the fact that over the years we've gone from triple-digit fatal accidents to double-digit and how we are going to try to get it down to zero," Gomez said. "In the midst of all this, we sometimes forget the individual efforts that people are making in the plants and quarries."

But not at Chemstar Lime, he said, for the employees "at Sloan have set a standard for the mining industry to follow."

The key to Sloan's safety record is the individual worker, says Bryan Nielson, plant manager for Chemstar's Henderson and Sloan operations.

"It's an attitude," Nielson says. "They take a proactive approach to safety out there—they don't take any chances for the sake of getting the job done faster.

"In an operation that produces very large tonnages, this kind of safety record is really unparalleled," Nielson noted.

"These guys have worked 27-plus years without a serious injury. For the last 7, they haven't even sent anyone to a doctor. With the type of equipment being used here, rarely do you see a quarry of this size go 2 or 3 years without a major incident of some sort," Nielsen said.

Earl Gillian, quarry supervisor at Sloan, says he has seen many changes in mining operations and associated safety practices over the years.

"Safety-wise, pretty much everything has changed in the 27 years this quarry has been operating safely," Gillian noted. "Industry-wide, there's much more talk now about safety, more written about safety, and many more required safety measures.

"The awards are great, but really the actions of the employees speak for themselves—that's what's important," Gillian said. "We all take great pride in the record, of course, but the idea of working safe is simply to keep everyone healthy by preventing accidents for as long as we can."

Reprinted from the July 1992 issue of the Rocky Mountain Pay Dirt.

Stockpiling materials: hazards and safety

The Pennsylvania Bureau of Deep Mine Safety is charged with the responsibility for the health and safety of all the Commonwealth's underground miners. The Bureau carries out its responsibilities through compliance inspections, certification of miners and mine officials, equipment approvals and training. In 1989, the Bureau formed an advisory committee to assist the agency in solving mining problems and issues. The Advisory Committee is made up of representatives of the United Mine Workers of America, Pennsylvania Coal Association, U. S. Bureau of Mines, Mine Safety and Health Administration, and The Pennsylvania State University.

The Bureau was advised by UMWA committee members of existing hazards associated with stockpiling operations. Several miners had been trapped and asphyxiated when their equipment went into a draw off point. A subcommittee was created to address these concerns. The initial mission of



the Stockpile Safety Subcommittee was to research and make recommendations on working safely around surgepiles and draw off points of stockpiling operations. The committee looked at extensive information and consulted with various experts. They established a set of procedures and made recommendations. In November 1991, these were distributed to the Pennsylvania mining industry. These recommendations, which are available upon request, include innovative techniques to ensure the safety of individuals working on surgepiles and other draw off points.

Subsequent to their initial report, the Subcommittee was requested to expand its

research into other areas and activities around stockpiles. It became obvious that there were many areas and many activities involved in stockpiling which created hazards. These include:

- draw off points
- how the stockpile was designed
- loading out at the toe of the stockpile
- slope instability problems
- use of trucks around stockpiles
- lack of berms
- operating at the base and the top of the pile
- operation of dozers when pushing material



The committee conducted research into the number of fatalities that occurred around stockpiling operations. The committee's research, although incomplete at this point, indicates that there is a history of problems associated with stockpiling of materials. When attempting to evaluate the number of fatalities associated with stockpiling, it became apparent that a rapid look at the data was not an easy task. Data collected by MSHA's 7001 reports, in many cases, classify these accidents as powered haulage, asphyxiation, and other.

The committee also feels that the problem of stockpiling hazards exists today and could be increasing due to several situations occurring in the mineral industry. These include:

1. the change in mining methods resulting in more productivity;
2. changing market conditions and requirements which require blending of materials;
3. the higher demand for certain raw materials; and
4. environmental factors including changing weather conditions.

The intention of the Bureau of Deep Mine Safety and the Advisory Committee is to promote hazard avoidance and hazard recognition around stockpiles. The Committee also has serious concerns about the problems associated with rescue and recovery operations at stockpiles. History has indicated that once a piece of equipment is covered by material in a stockpile, problems with stockpile instability and the need

for special heavy equipment compound recovery efforts. Statistics show that miners are not uncovered in a timely manner and rescue efforts yield a low survival rate.

Future plans of the Committee include the development of training programs for the industry. This involves working with the individual operators and the Mine Safety and Health Academy in Beckley, West Virginia. In addition, upcoming health and safety conferences will incorporate presentations on stockpile hazard awareness and proper design and safety techniques. The committee is pursuing the development of Mine Emergency Response Development (MERD) exercises to address scenarios concerning stockpiling rescue and recovery. The committee also recognizes that there may be existing information and programs that exist outside of Pennsylvania. The Committee is requesting that anyone having any training experience or materials on stockpiling hazards, please contact Thomas J. Ward, Jr., Director, Bureau of Deep Mine Safety, P O. Box 2357, Harrisburg, Pennsylvania, 17105-2357, Phone (717) 737-1376, or Matthew A. Bertovich, Division Chief, Program Development and Technical Services, Bureau of Deep Mine Safety, Fayette County Health Center, 100 New Salem Road, Room 167, Uniontown, Pennsylvania, 15401, Phone (412) 439-7469.

Reprinted with the approval of the Stockpile Safety Subcommittee of the Pennsylvania Bituminous Advisory Committee.

The Joseph A. Holmes and the Holmes Safety Associations are scheduled to meet

The Joseph A. Holmes Safety Association and the Holmes Safety Association will hold their annual business meeting at the Hyatt Regency on the Riverwalk in San Antonio, Texas, on June 1-3, 1993. Our agenda includes many timely safety topics which we feel will be of much interest and well worthwhile to participants. Mark your calendar and make your reservations today.

Lodging at Hyatt Regency

Non-Government rate:

\$75 single—\$95 double

Federal/State Government rate:

\$62 single—\$82 double

(Government identification required upon check-in)

Make your own lodging reservations directly with the Hyatt by calling 1-800-233-1234 or 210-222-1234. It is highly recommended that all reservations be guaranteed either by advance deposit or one night's lodging or by credit card. We have reserved a block of 150 rooms which will be held until May 11—be sure to indicate you are attending the Holmes Safety Association Meeting.

There is a \$35 registration fee per person. After April 30, 1993, the registration fee will be \$50. Guests and spouses not attending the conference meeting but who will attend the evening meals will be required to pay a \$35 fee to cover banquet costs. **REMEMBER: EARLY REGISTRATIONS ARE DUE BY APRIL 30, 1993.**

Arizona hosts successful safety workshop

Participants have rated highly the 2nd International Mine Safety Workshop, recently held in Rio Rico, Arizona. The theme for the workshop was "Safety Knows No Borders" and was conducted by the Arizona State Mine Inspector's office in mid-November. This year's event was attended by more than 80 mine safety professionals from the southwest, including Mexico.

Topics of discussion ranged from safety supervision and Job Safety Analysis to explosives awareness and ground control. Explanatory talks were also given about the latest gas detectors, dust detectors, and breathing devices.

Mr. Jesus Gomez Gonzales from Mexican de Cananea, a featured speaker, gave

an overview on the great progress made at his mine in just two years.

Arizona State Mine Inspector Douglas K. Martin, who recently won reelection for the next two years, has indicated he will continue to hold the yearly International Safety Workshop as long as he can secure dynamic speakers and keep the cost to the participants down. According to Mr. Martin, "Safety training, to be effective, requires a high enthusiasm level. If you can project that enthusiasm, you can't help but create it. These workshops help do this on a number of fronts and if this year is any indication, I'll keep putting them together."

Douglas K. Martin, Arizona State Mine Inspector

Back-injury prevention training

The University of Texas Industrial Education Department (IED) now has available three courses dealing with the prevention of back injury.

The two-hour module is designed to heighten awareness by providing participants with information about the anatomy of the back, types and causes of injuries, body mechanics and posture, and hazard identification. This course is recommended for all employees in an organization.

The four-hour course is provided not only to make participants aware of their role in maintaining a healthy back, but to stimulate them to adopt practices and postures to prevent back injury. This course can be given to all employees, but is especially targeted to those employees involved

in jobs and tasks which are most susceptible to back-injury hazards and those who have previously suffered a back injury.

The twenty-one hour "Train the Trainer" course is aimed at safety managers, training managers, and anyone in the organization who provides training to others.

IED has received certification as a Back Injury Program Provider from the Texas Workers' Compensation Commission (TWCC). IED's 4-hour course and 2-hour course meet the TWCC requirements.

If you would like more information about these back-injury prevention courses, please call (512) 471-4633.

Reprinted from the January-March 1993 issue of INFORMATION LETTER, a publication of the University of Texas Mine Safety and Health Program.

Joint training to resume

Tentative plans have been made to resume the joint mine safety and health training sessions using the MSHA Academy and Technical Support Center (TSC) instructors. The courses scheduled include:

Noise Qualification, April 20, 1993.....\$18.50

Dust Sampling, April 21, 1993..... 18.50

Certification for Respirable Dust Instrument

Calibration, April 22, 1993..... 18.50

In addition to these courses, the Texas Mine Safety and Health Program (TMSHP) staff is attempting to schedule courses in "Ergonomics: Human Factors Impacting on Safety" and "Electrical Training." It is important that there are enough people enrolled to warrant the cost of bringing the classes from the National Mine Academy or the TSC to the Central Texas area.

The fees charged for all joint training sessions are applied to expenses, which

include course announcements, refreshments, food, room charges, and, when applicable, travel expenses. Any money received in excess of expenses is used to provide more safety and health training through the TMSHP.

We ask for your assistance in planning and scheduling these joint training courses. First, we need your suggestions and recommendations for training topics. Second, we need early enrollments in these courses so we can confirm with the Academy or the TSC that there will be adequate participation to conduct the course. Help make these programs a success by enrolling early. Please call (512) 471-4633 to enroll in the joint training classes.

Reprinted from the January-March 1993 issue of INFORMATION LETTER a publication of the University of Texas Mine Safety and Health Program.

Secretary's message...

Our 1993 slogan contest received 135 entries and our winner was Ms. Diane Covell from Blue Circle Cement, Ravena, New York. The winning slogan is "Stay Injury Free in 1993."

The second winner of the Holmes Safety Calendar Contest for 1993 is Katie Peterson.

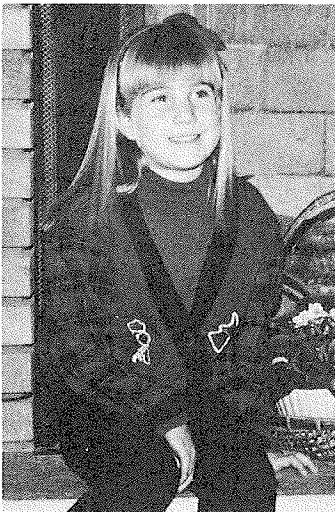
On December 28, 1992, the Holmes Safety Association lost Dave Hazlett, a member of the Executive Committee. Dave served on the National Holmes Safety Association's Executive Committee since 1958. Dave served as President of the Holmes Safety Association from June 1986 through May 1987. At the May 1990 Holmes Safety Meeting in Phoenix, Arizona, Dave

received the 30-year Holmes Safety Association Service Award.

Dave also served as Executive Committee member on the Pennsylvania State Council (PSC) and the Kiskee District Council. Dave served on the Planning Committee for the PSC for the Business and Awards Meeting.

He dedicated much of his free time to promoting health and safety in the mining industry through the various Holmes Safety Associations. His work in these groups will be greatly missed by the other Executive Committee Board Members.

Robert A. Glatter, Secretary-Treasurer



The last word...

"Honest criticism is hard to take, particularly from a relative, friend, an acquaintance, or a stranger."

"A kleptomaniac is a person who helps himself because he can't help himself."

"Nothing is illegal if a hundred businessmen decide to do it."

"Laugh and the world laughs with you, snore and you sleep alone."

"A man can't be too careful in the choice of his enemies."

"It takes a great man to make a good listener."

"Fred's Law: In any electrical circuit, appliances and wiring will burn out to protect fuses."

"The brain is a wonderful organ; it starts working the moment you get up in the morning and does not stop until you get to the office."

"Old people shouldn't eat health foods. They need all the preservatives they can get."

"If you drink don't drive. Don't even putt."

"It is better to be a coward for a minute than dead for the rest of your life."

NOTICE: We welcome any materials that you submit to the Holmes Safety Association Bulletin. We cannot guarantee that they will be published, but if they are, we will list the contributor(s). Please let us know what you would like to see more of, or less of, in the Bulletin.

REMINDER: The District Council Safety Competition for 1993 is underway – please remember that if you are participating this year, you need to mail your quarterly report to:

Mine Safety & Health Administration
Educational Policy and Development
Holmes Safety Association Bulletin
P.O. Box 4187
Falls Church, Virginia 22044-0187

Phone: (703) 235-1400

