



UMD INJURY AND ILLNESS EXPERIENCE SUMMARY

Injury Rates: This report discusses the injuries experienced by UMD employees that required medical attention or caused lost time or restricted duty from work, known as “recordable.” The Total Recordable Injury Rate (TRIR) for 2014 has been calculated to allow comparison of our injury rates with the rates experienced on campus over the past five years, regardless of fluctuations in population. It also permits comparison with the rates of other colleges and universities, as reported by the US Department of Labor, Bureau of Labor Statistics. The UMD TRIR has been on an overall downward trend since 2008, the first year calculated.

Injury Causes and Types: Workers’ compensation claim information is the data source for this report. An analysis of the year’s incidents allows DES and other campus groups to focus loss control efforts on the types and causes of injuries occurring and the populations experiencing them. Risk factors involved in employee injuries include many that can be controlled. Based on the review of our past injury causes, DES developed two new training programs which are being presented to target populations; Slip, Trip and Fall Prevention and Back Safety.

Safety Management: Current emphasis includes 1) using an Incident Investigation process to learn from incidents and prevent future occurrences and 2) training and engaging employees in Job Hazard Assessment (JHA) techniques to identify task specific hazards and controls. Facilities Management has expanded their safety committee structure, forming working groups to develop and implement these processes. Residential Facilities and Dining Services both initiated Safety Committees in the last half of 2014 and will be developing Incident Investigation and/or Job Hazard Analysis skills in their organizations. DES will continue to provide technical expertise and support for these committees and safety system improvements.

Costs: The premium paid by UMD to our third party administrator, IWIF, decreased approximately 14% from the previous year to \$3.28 M in FY 2015. There were 2,710 days when employees were unable to report to work due to their injuries (lost days) and 2,360 restricted duty days. Upcoming efforts include exploring more effective return to work programs across campus

INJURY RATES

Figure 1
OSHA Recordable Injuries/Illnesses
2010-2014

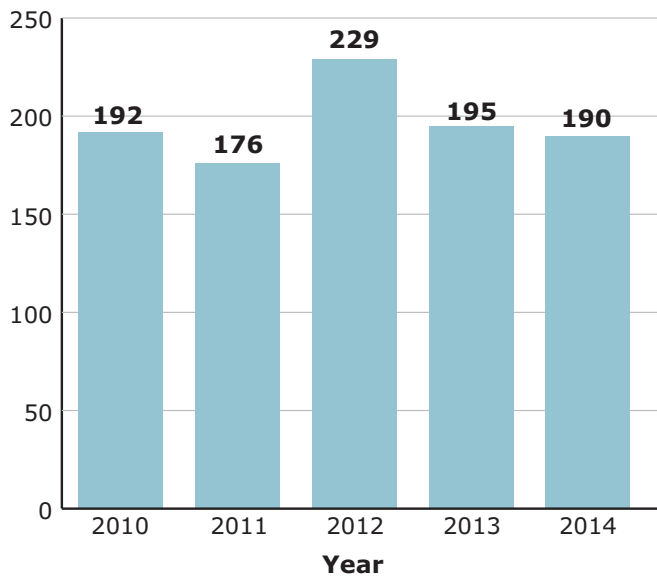


Figure 1: OSHA Recordable Injuries and Illnesses include death or those that cause loss of consciousness, days away from work, restricted work, job transfers, affects essential job functions, significant injury or illnesses diagnosed by physician and medical treatment beyond first aid.

Figure 2
Recordable Incident Rate (TRIR)
2010-2014

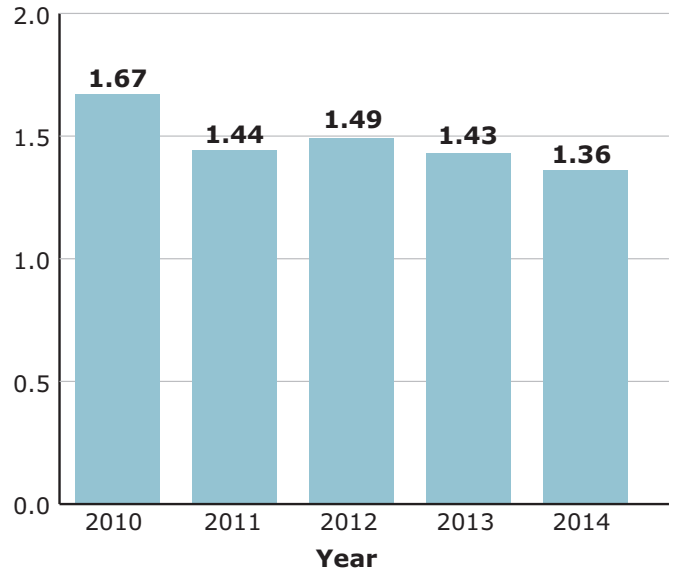


Figure 2: The Total Recordable Injury Rate (TRIR) is a function of the number of recordable injuries and the numbers of hours worked. $TRIR = \text{number of injuries} \times 200,000 \div \text{total hours worked}$.

The national average TRIR for colleges and universities in 2013 was 2.1, according to the US Department of Labor, Bureau of Labor Statistics.

Figure 3
2014 Number of Recordable Injuries and Illnesses by Campus Subgroups

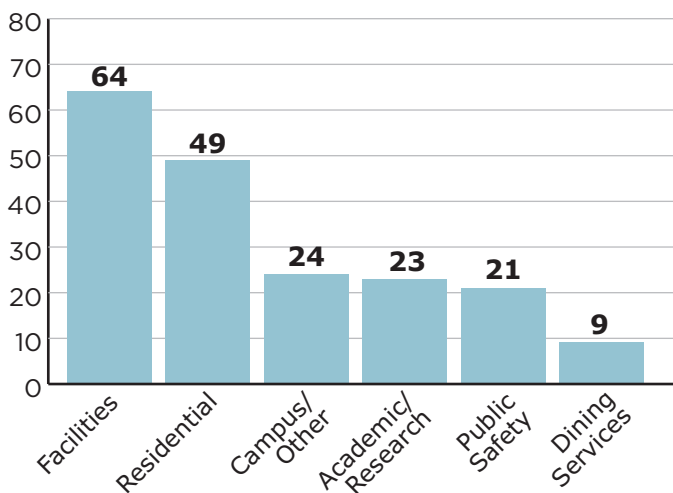
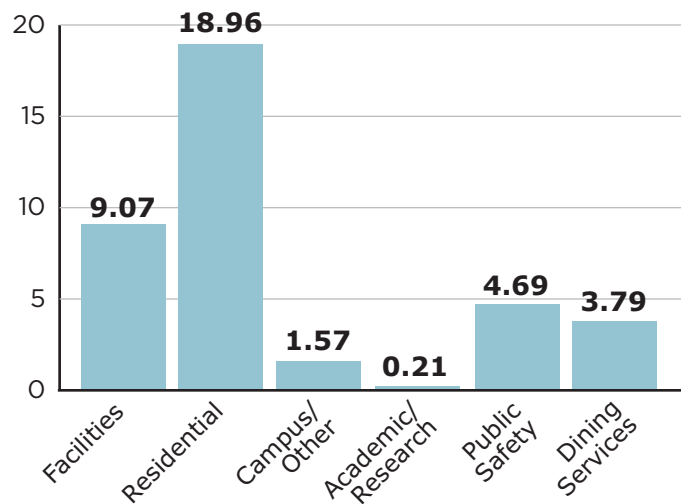


Figure 4
2014 OSHA TRIR by Campus Subgroups



Figures 3 and 4: Represent the 2014 Number of recordable injuries and TRIR for the major UMD subgroups experiencing the majority of the injuries.

INJURY CAUSES AND TYPES

Figure 5
OSHA Recordable Injuries and Illnesses by Event/ Incident
2014 Data

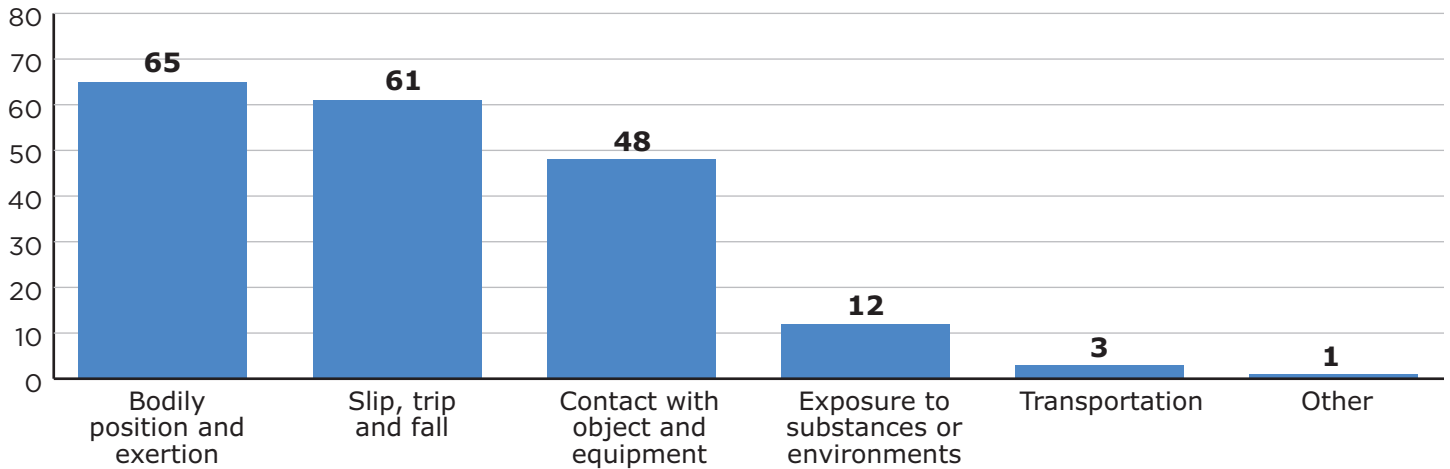
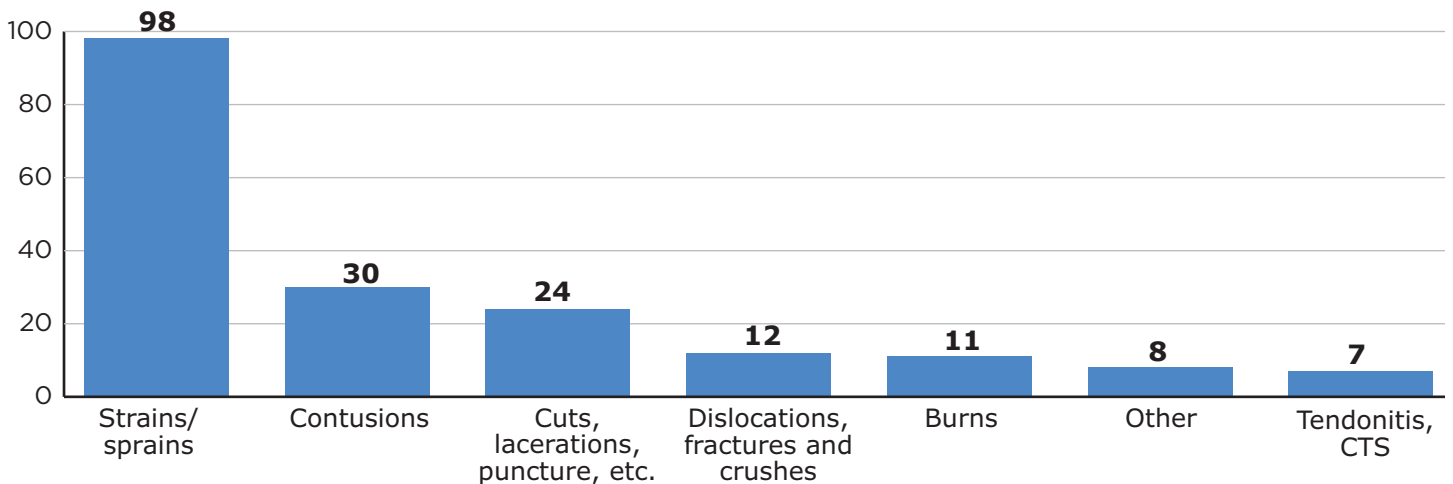


Figure 6
OSHA Recordable Injuries and Illnesses by Type
2014 Data



COSTS

Figure 7
Medical/Indemnity Payments and Accident Leave

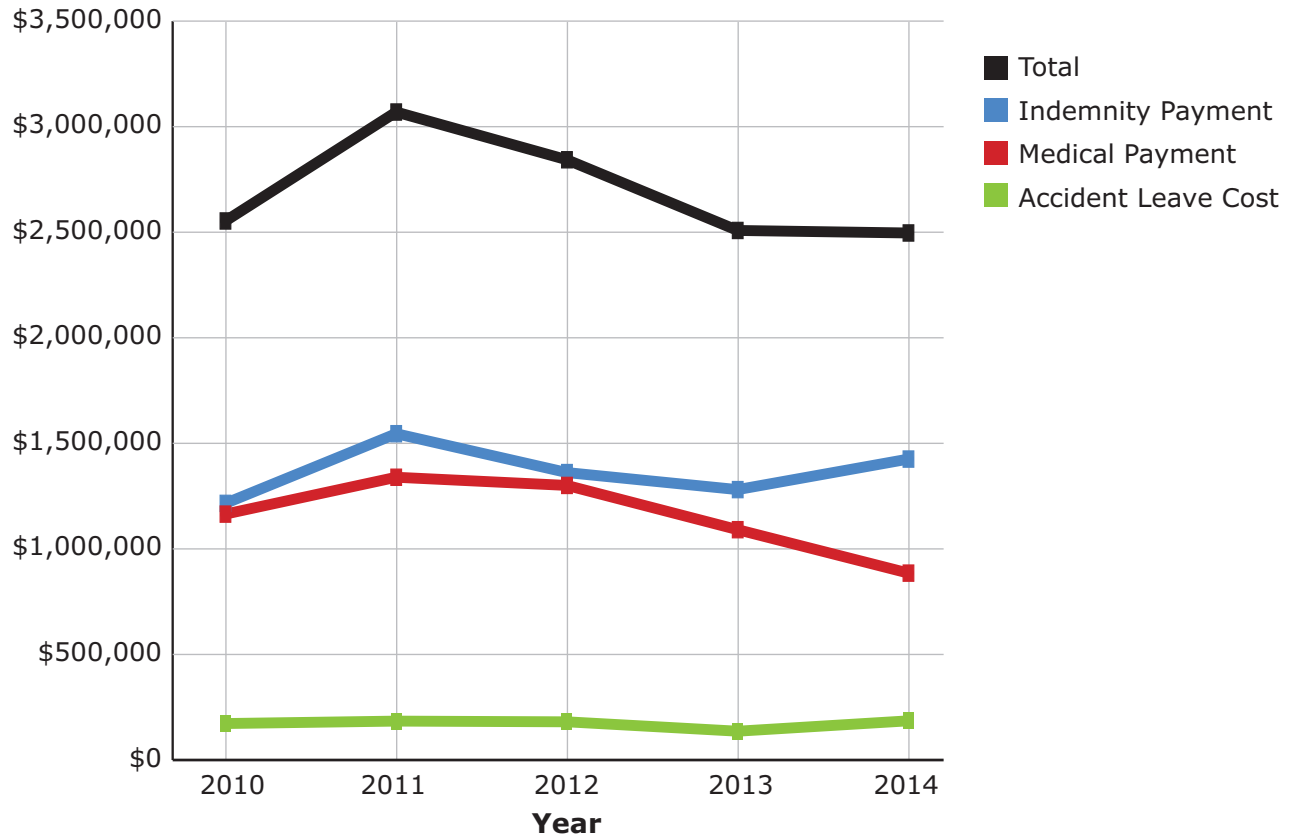


Figure 7: Shows the payments made by IWIF as well as the accident leave costs paid by the University for the past 5 years.

Costs: Medical and indemnity costs may continue to rise even as injuries are reduced because the costs associated with injuries sustained in previous years continue to accrue. The medical and indemnity paid by IWIF, shown above, does not include reserves set aside for future payments on open claims. Continuing medical costs or a disability settlement from a previous claim can add significantly to the amount paid in a single year. There were several six figure indemnity settlements in 2011 and one in 2014 that caused a peak in those years.

Labor costs also contribute to the total costs in the form of accident leave for permanent employees and temporary total disability payments to contract employees. The accident leave figure does not include the cost of productivity lost when employees are not available to complete the work regularly assigned to them. There were 2,710 lost days when employees were unable to report to work due to their injuries (corresponding to roughly 12 lost man-years). In addition, there were 2,360 restricted duty days where employees were assigned to do less strenuous tasks than those regularly assigned to them or temporarily transferred to other jobs (roughly 10 man-years).