

Community Safety Leadership

Is this on your agenda?



A toolbox for public officials
to organize a successful
safety program

NEW JERSEY
SAFETY INSTITUTE 



www.njsafetyinstitute.org



The authors do not represent that the safety standards referenced in this material are a complete discussion of these issues and recommend that public officials seek the advice of safety professionals in designing their safety programs.

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Community Safety Leadership

A toolbox for public officials to organize a successful safety program

Introduction:

Almost every decision a public leader decides touches on safety. In this publication, we will discuss where you can get information to address the many safety related issues on your agenda.

Recently, various governmental entities at all levels came together to create the New Jersey Safety Institute, a new non-profit organization.

New Jersey Safety Institute Mission Statement

- Build a safety culture in New Jersey through increasing public awareness of safety issues by providing information and safety education to both citizens and governmental officials.
- Encourage a dialogue between all levels of government on safety issues and implement safety campaigns requiring coordination between government and the public.

The Institute operates a website to continually update officials on the latest information pertaining to safety issues. See <http://www.njsafetyinstitute.org/>

Charter Institute members include:

- State of New Jersey Risk Management Division
- New Jersey Association of Counties
- New Jersey State League of Municipalities
- Municipal Excess Liability Joint Insurance Fund
- School Boards Association Insurance Group
- School Pool for Excess Liability Limits
- Munich Re America
- Safety National Insurance Company
- Genesis Insurance Company

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Community Safety Advisory Committee



Impact of Accidents on our Communities:

Every year, the National Safety Council releases comprehensive data on the impact of accidents. According to the latest statistics, almost 123,000 Americans suffer accidental deaths annually. In purely economic terms, accidents cost over \$750 billion per year, or 5.7% of the gross national product (almost \$2,500 for every man, woman and child).

This is divided into three categories:

- **Work:** 3,900 fatalities/year
(\$189 billion)
- **Auto:** 33,000 fatalities/year
(\$241 billion)
- **Home and Community:** 86,000 fatalities/year
(\$323 billion)

While we have made tremendous strides reducing some types of accidents in the past four decades, the overall rate of accidental fatalities in the United States has actually increased since 2000.

Employee Accidents

One of the success stories has been the long term reduction of employee accidents. This reflects the great emphasis that has been placed on job safety programs over the last 50 years. However, governmental work is still dangerous. In every state including New

Jersey, government has the highest accident rate of any employer classification. It is sobering to realize that the typical law enforcement officer, fire fighter or DPW worker has a higher accident frequency than either construction or underground mining.

Auto Accidents

Another success story is the continuing reduction in fatal auto accidents. In the past 40 years, the per capita death rate has dropped over 50%. This is a direct result of improvements in vehicle design and better enforcement of DWI laws.

The improvement would have been even more significant had it not been for the increase in distracted driving. At any given time, 11% of drivers are on the phone. We now know that the use of a phone, even a hands free phone, quadruples the risk of a crash. Further, here in New Jersey we have a particularly serious problem with pedestrian accidents. The state's pedestrian fatality rate is 15% higher than the national average and is the 12th highest in the country.

New Jersey Employee Accidents

Lost Time Cases Per 100 Full Time Employees by Industry Group

Finance & Insurance	0.3	Transportation	4.0
Wholesale, Retail Trade	2.3	State Government	4.3
Manufacturing	2.6	Local Government	4.3
Mining	2.8	All NJ Employees	2.3
Construction	3.1		

Pedestrian Accidents by State

Fatalities Per 100,000 Population

1. Florida	2.58	8. Georgia	1.73
2. Delaware	2.45	9. Oklahoma	1.65
3. Arizona	2.28	10. Louisiana	1.63
4. Washington D.C.	2.15	11. California	1.60
5. South Carolina	1.94	11. New York	1.60
6. Hawaii	1.91	12. New Jersey	1.58
7. North Carolina	1.77	National Average	1.38

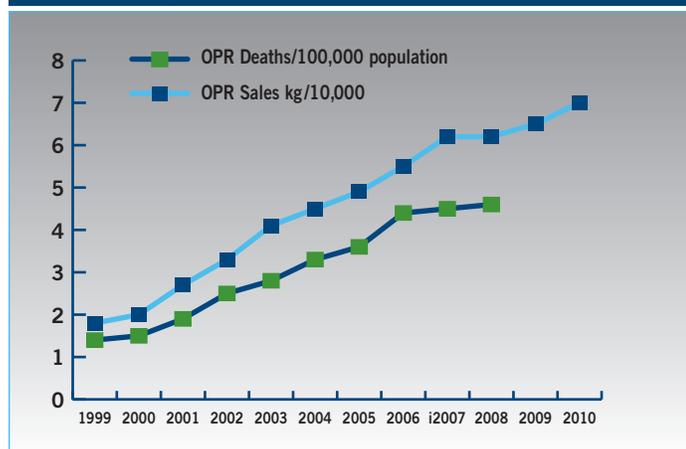


Home and Community Accidents

Unfortunately, the overall accident rate has increased because of the dramatic jump in accidents at home and in the community. In fact, over the last 20 years the home and community fatality rate has increased 77%. This explains the significant increase in calls to emergency responders.

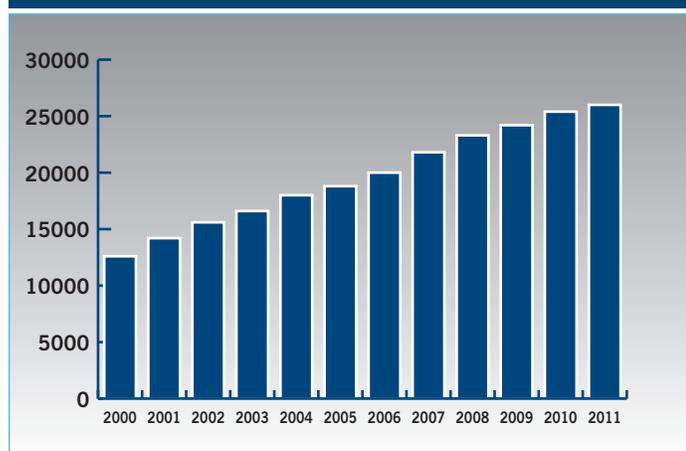
- 41% of the home and community fatalities are poisonings mostly related to the abuse of alcohol and prescription medications as well as illegal drugs.
- 31% are slips and falls.
- All other categories account for the remaining 28%.

Opioid Pain Reliever Overdose Death OPR Treatment Admissions, and Kilograms of OPR Sold. (Per 100,000 Population)



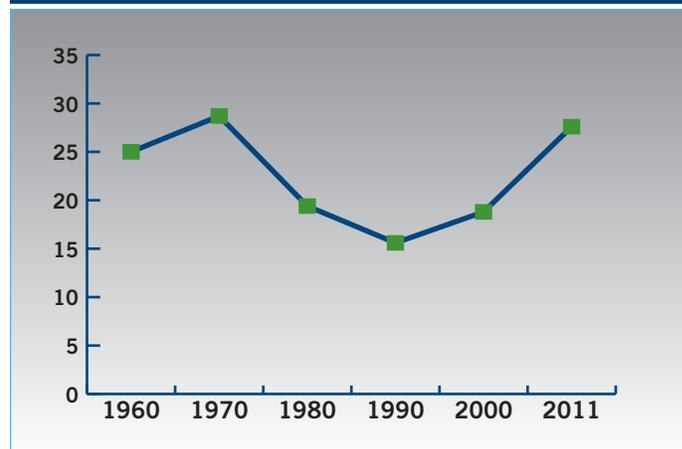
Source: CDC, November 1, 2011v

Fall Down Fatalities



Source: National Safety Council Injury Facts, 2013 Edition

Home and Community (Deaths Per 100,000 Population)



Source: National Safety Council Injury Facts, 2013 Edition

Since the year 2000, poisonings have increased 174%. Almost 30% of all accidental deaths are now poisonings. The Center for Disease Control (CDC) reports that overdose deaths involving opioid pain relievers have increased proportional to sales and now exceed deaths involving heroin and cocaine combined. In 1998, 11.5 tons of oxycodone were manufactured worldwide. By 2007, this figure had grown to 75.2 tons with the United States accounting for 82% of consumption.

During the same period, fatalities due to falls more than doubled, due in part to the increase in number of senior citizens, but also because of their increased use of prescription medication.

The solutions to these problems must involve cooperation between all levels of government. In particular, support of local municipal and board of education officials is critical because they are often in the best position to implement real change. They need the consistent support of officials at the county and state level who must adopt legislation and provide resources.



Employee Safety

It is the responsibility of every employer to provide a safe and healthy workplace. In a governmental entity, this responsibility rests on the shoulders of elected officials and the senior managers they appoint. You are not expected to be a safety engineer. However, you are accountable to make sure that an effective safety program is being implemented.

Eight Steps to an Effective Employee Safety Program:

Periodically take risk management and safety training. Some joint insurance funds offer annual risk management training specifically for elected officials and even offer a discount for each official that completes the program. There are also on-line webinars for elected officials. The Safety Institute's website has links to this training.

Monitor results:

Management establishes its priorities by what it chooses to monitor. The status of the safety program should be a regular topic item on your workshop agenda. How does your public entity's safety record compare with similar entities? Many joint insurance funds compute relative injury rates each month. Also, require that the minutes of the safety committee be distributed to elected officials and senior management.

Adopt a safety policy:

Chances are that your entity already has a policy. Make sure it is current, change it as appropriate and adopt a new resolution. See next page for a model safety policy.

Empower the workforce so that everyone feels free to question something that appears unsafe, and everyone looks out for each other.

A safety program must come from the grass roots and can not be solely top down. Meet with the safety committee and representatives of the bargaining units and commit to an accident-free and harassment-free workplace. This dialogue must be ongoing. Work with your employees to develop a joint health and safety commitment and post a signed copy in each facility. A model joint policy is on page 6 of this booklet.

Require that employee safety training be kept up to date.

On average, departments that are current on their training have 46% fewer accidents. Each year, training records should be audited to make sure all employees are up to date. To facilitate this, some insurers and joint insurance funds have online learning management systems that record each employee's compliance with safety training requirements.

Insist that managers talk to their employees daily about the hazards of that day's operations.

Departments where supervisors and crew leaders discuss safety with their associates each morning have 54% fewer accidents. The Safety Institute's website has links to sample "toolbox" talks.

Require senior management participation in accident investigations.

When we say "participate," we don't mean simply read the reports. Management must go to the scene if necessary and drill down until the real causes are identified.

Adopt and implement an effective anti-harassment program.

Employment practices violations create an unsafe workplace environment because people no longer look out for each other. The old fashioned "give and take" that characterizes too many locker rooms, garages and offices is no longer acceptable, and in fact is illegal. Periodically schedule all supervisory personnel for employment practices risk management training.

MODEL SAFETY POLICY

The (government name) will provide a safe and healthy work environment and shall comply with the Public Employees Occupational Safety and Health Act (PEOSHA). The (type of governmental entity) is equally concerned about the safety of the public. Consistent with this policy, employees will receive periodic safety training and will be provided with appropriate safety equipment. Employees are responsible for observing safety rules and using available safety devices including personal protective equipment. Failure to do so constitutes grounds for disciplinary action. Any occupational or public

unsafe condition, practice, procedure or act must be immediately reported to the supervisor or department head. Any on-the-job accident or accident involving (government name) facilities, equipment or motor vehicles must also be immediately reported to the supervisor or Department Head. The (government name) has appointed a Safety Committee that meets on a regular basis to discuss and recommend solutions to safety problems. Employees are encouraged to discuss safety concerns with their Safety Committee representative.

New Jersey Government Accident Facts

Employee Accident Rates

Law Enforcement Accidents by Type

Lifting	25%
Motor Vehicle	17%
Slips and Falls	15%
Assaults	12%
All Other	31%

Employee Accident Rates

Public Works Accidents by Type

Lifting	49%
Slips and Falls	19%
Struck By	10%
All Other	23%

Firefighter Fatalities

Heart Attack	43%
Trauma	32%
Asphyxiation	10%
Burns	7%
All Other	8%

Employee Accident Rates

Education Accidents by Type

Slips and Falls	37%
Struck by	20%
Lifting	11%
Cut or Puncture	8%
Motor Vehicle	2%
All Other	22%

Sample Joint Management/Employee Statement

OUR COMMITMENT TO HEALTH & SAFETY

Health and Safety must never be compromised. Your health and safety along with the health and safety of the public is the number one priority. We will achieve an accident-free environment through a health and safety culture built on:

TRUST: We respect each other's opinions and decisions and will follow through on all health and safety concerns.

CARE: We approach each day with the determination to care for ourselves, co-workers and the community we serve.

KNOWLEDGE: We seek the education and skills to properly fulfill our responsibilities.

COMMUNICATION: We communicate with each other in a clear, open and honest manner.

Because mutual respect is so important, we cannot tolerate harassment or other forms of discrimination.

SAFETY IS A WAY OF LIFE BOTH ON AND OFF THE JOB!



Lifting and related shoulder injuries are the most frequent type of injury in public employment. The Safety Institute's web site has an extensive section addressing this issue.

Slips and falls are the second most common accident in public employment, and the most frequent in schools. The New Jersey Safety Institute produced and distributes at no cost a training video, "Smart Moves" to address the problem of slips and falls.



Heart attacks are the most frequent cause of firefighter fatalities. Departments should require an annual reexamination consistent with NFPA Standard 1582, Chapter 7.4-7.7. Specifically, any firefighter with a cardiac risk score above 10% should pass a stress test at 12 METS to establish that signs of the lack of oxygen to the heart do not occur at the work level common to firefighting.

Firefighters should also be encouraged to monitor and control their blood pressure, cholesterol and weight, and stop smoking to ensure that their risk of heart attack is within reasonable limits. A complete discussion of this recommendation is on the Safety Institute's website.



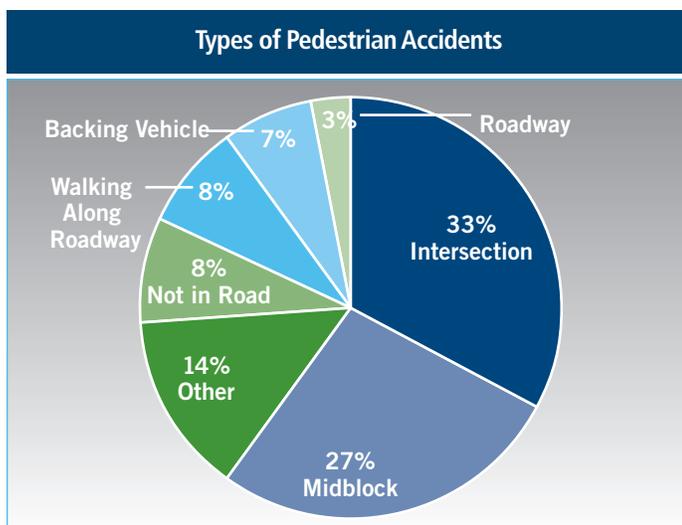
Pedestrian Safety

A successful pedestrian safety program requires constant effort and cooperation between all levels of government. Each year, approximately 70,000 people are injured and 4,650 are killed in pedestrian accidents. Children and senior citizens are involved in a disproportional number of these cases. Pedestrian accidents are more frequent in urban areas but are more likely to be fatal in rural areas.

The New Jersey Safety Institute distributes at no charge a video, “Walk the Walk” that details the causes of pedestrian accidents and the strategies local and school officials can utilize to address these issues. The Institute’s web site also has extensive material and links to help officials and citizens.

Intersection mishaps are the most common pedestrian accident. Senior citizens are especially vulnerable because they may not cross the street as quickly and often fail to notice vehicles in turning lanes. Children are more prone to midblock accidents, especially where parked cars are present. Alcohol is a frequent factor in accidents where the pedestrian was struck while walking along a roadway.

Increased speeds put pedestrians at higher risk. If a car traveling 20 mph hits a pedestrian, there is a 95% chance that the pedestrian will survive. However, the survival rate decreases to 45% at 30 mph and less than 10% at 40 mph. Reducing speeds, especially where pedestrians concentrate in residential and business districts must have a high priority in any pedestrian safety campaign.



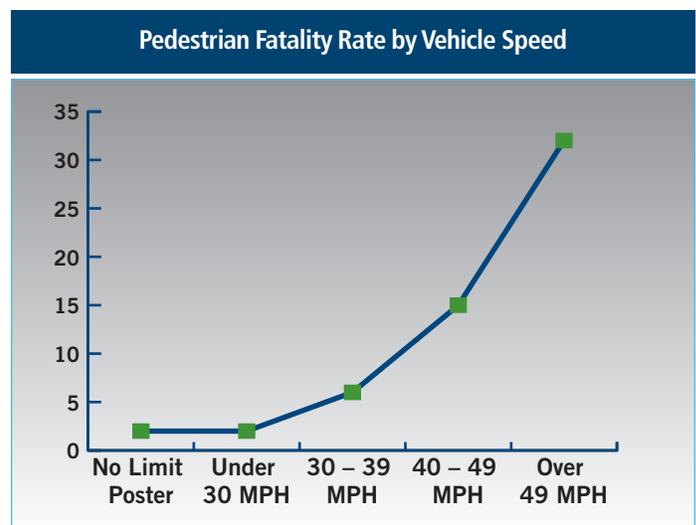
Source: US Department of Transportation, National Highway Safety Administration (NHTSA) – National Pedestrian Crash Report, June 2008

To be successful, a safety program must include four basic elements, known as the four E’s: Evaluation, Engineering, Education and Enforcement.

Evaluation:

Start by reviewing pedestrian accident reports and marking their location on a map. This exercise will help you identify accident “hot spots” in your community. Visit these locations to get a better understanding of how the accidents occurred.

Research has identified reoccurring accident factors. For example, intersections with two or more lanes in each direction have significantly more pedestrian accidents than intersections where there is only one lane in each direction. Left turning vehicles are involved in more pedestrian accidents at T intersections than standard X intersections. Two-way streets have significantly more pedestrian accidents than one-way streets and sun glare is a contributing factor at intersections facing in certain directions and particularly at certain times of the year. Intersections on downhill grades are prone to speeding while intersections on uphill grades are especially prone to sun glare.



Source: US Department of Transportation, Federal Highway Administration – Pedestrian and Bicycle Crash Types of the Early 1990’s, June 1996

¹ Traffic Safety Facts 2008 Data, National Highway Safety Administration (NHTSA)

² Copyright © 1998 – 2010, Dr. Jean-Paul Rodrigue, Dept. of Global Studies & Geography, Hofstra University.



Next, mark speed limits on the map noting where speed limits change. Motorists are less likely to obey lower residential and school zone speed limits on roads where the speed limit was higher just before these “slow” zones. Now locate major walking routes. It is a good idea to walk these routes and identify issues such as missing or damaged sidewalks, overhanging shrubbery and other hazards that should be corrected. Look for places where pedestrians have worn a path by the side of the roadway – a telltale sign that sidewalks are needed.

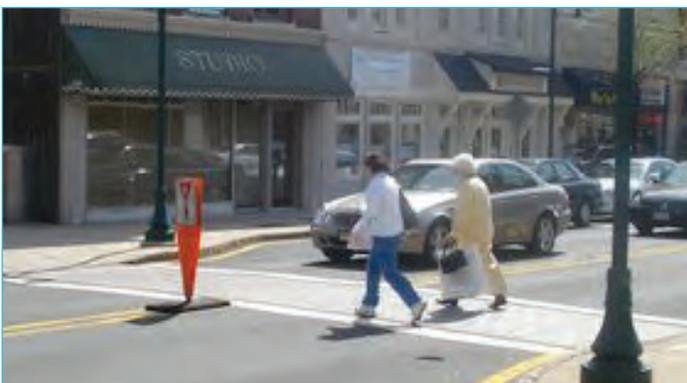
Now place the location of schools on the map and trace the walking routes to schools. Also locate crossing guard stations. School zones have emerged as a significant pedestrian safety problem. Forty years ago, 50% of children walked to school. Today, 46% are driven by parents, 40% ride the school bus and only 14% walk. School zones are clogged with far more traffic than they were designed to handle. This is why school officials and parents must be included in the planning of the community’s safety program. Finally, ask for public input from senior citizens and youth organizations. Where do they congregate and what problems do they experience when walking in the community.

Engineering:

Armed with this information, study possible engineering solutions. However, remember that traffic engineering is complex and the solutions that are appropriate in one situation may not work in another. Seek professional assistance when designing a pedestrian engineering program.

Pedestrian accidents at intersections can be substantially reduced by the installation of proper signals, signs and street markings. Standard signals are installed primarily for traffic control. When new signals are being proposed, insist that adequate consideration be given to the pedestrian safety problems in the area. Each type of signal has its advantages and a professional traffic engineer should evaluate their use.

Consideration should also be given to installing center islands in the middle of busy streets so that pedestrians, especially senior citizens, may take two light cycles to finish crossing.



Installing a midblock sidewalk bulb-out on both sides slows traffic and reduces pedestrian crossing distances.



This pedestrian crossing has a center island, also known as a refuge that gives pedestrians a protected place to stand half way across the street.



Traffic calming involves physical measures to reduce traffic speed to improve safety and livability. In the U.S., traffic calming was practiced as early as the late 1960s and early 70s in such places as Berkeley, California, Seattle, Washington and Eugene, Oregon. Properly designed speed tables can reduce accidents by over 40%. A complete discussion of traffic calming can be found on the NJ Safety Institute's website or at www.TrafficCalming.org.

The classic transit bus related accident involves a pedestrian who crosses the street in front of a stopped bus into the path of a passing car coming from the rear. Too often neither the motorist nor the pedestrian sees each other until it is too late. The NJ Transportation Planning Authority recently published an excellent study addressing bus stop design that can be downloaded from the New Jersey Safety Institute's web site.

Because the size of a new building is often limited by the number of parking spaces, developers try to squeeze in as many parking spaces as possible with little thought given to pedestrian circulation. Planning and Zoning Boards must be the first line of defense against this practice. All parking lots should have clearly marked pedestrian routes. Consideration should be given to the use of diagonal parking wherever possible.

Education

Education must start with parents and schools. The National Highway Traffic Safety Administration developed and distributes "Willie Whistle," an engaging 7 minute educational program for children.



Reflective jackets and vests significantly improve visibility during inclement weather

Police Departments often have a community resource officer who conducts educational programs for children. Training programs should also be offered to senior citizens – both as drivers and as pedestrians.

Another problem is the high frequency of accidents where school crossing guards are the victim. The position of school crossing guard has become one of the most dangerous occupations in local government. Many school crossing guards are senior citizens who are reaching the high risk age because of losses in hearing, eyesight and general mobility. Many of these accidents also occur at times when visibility for both motorists and crossing guards is restricted due to inclement weather.

Each crossing station should also be periodically inspected by the municipal engineer and police department to determine what can be done to improve visibility and slow traffic. It is also critical to consider visibility issues caused by sun glare at different times of the year.

Crossing guard candidates should complete the same medical history and physical examination required for pre-placement examinations of full-time municipal employees. Particular attention should be given to hearing and eyesight. The examination should be repeated every five years up to age 39, every two years up to age 49, and annually after 50. Medical standards for crossing guards can be downloaded from the Safety Institute's web site.



A raised crossing station was installed to slow traffic and to discourage children from crossing away from the guard.



Materials are available to help police departments train crossing guards. For example, the NJ Safety Institute distributes at no charge the video, “Street Smart is Street Safe” that discusses the unique hazards crossing guards face in local communities and what they should do to address them.

It is also important to educate the public about pedestrian accidents around schools, libraries, playgrounds and other facilities frequented by children. Another video distributed by the NJ Safety Institute at no charge, “School Zone, Danger Zone” speaks directly to school administrators and parents about the problems caused by increased traffic around schools.

Enforcement is the final “E”

Consistent enforcement of traffic and pedestrian safety laws significantly reduces accidents. Your community should have a reputation for strictly enforcing traffic laws such as speeding as well as distracted and impaired driving. Pedestrian decoy programs where police officers dressed as civilians enter crosswalks are also successful.

Stop arms are now nearly universal on school buses and have been highly effective in reducing the number of motorists that fail to stop. However, strict enforcement is essential because children assume motorists will stop. This is why ignoring a stopped school bus must be treated as a very serious traffic offence.



A radar sign was installed at this crossing station after an especially serious accident involving sun glare.

Towns that ban overnight on-street parking in residential zones report substantially fewer mid-block pedestrian accidents. A nighttime ban also results in less daytime parking, reducing the risk that a motorist’s vision will be blocked by parked vehicles. To be effective, these ordinances must be consistently enforced.

Unfortunately, some communities are unable to prohibit overnight parking on municipal streets because many older residential zones were built without adequate off street parking. Obviously, traffic calming and educational programs are more important where on-street parking is permitted.

Vendor-related pedestrian accidents are similar to the mid-block dart out accidents. Since the early 1980s, these accidents have been reduced in New Jersey because trucks are required to have stop arms with flashing lights originally developed for school buses. Under state law vendors must activate the arm when making sales. Motorists are required to stop, but unlike school buses, motorists can then proceed. Each community should adopt an ordinance prohibiting vending on any street with a speed limit over 25 miles per hour as well as arterial roads (specifically named in the ordinance). A model ordinance is on the NJ Safety Institute’s web site.



Speed Tables reduce pedestrian accidents by an average of 45%. Portable speed cushions are especially easy to install.



Traffic Safety

According to Federal Department of Transportation research, traffic accidents occur more frequently in urban areas but are more likely to be fatal in rural communities because of higher vehicle speeds. There is a direct relationship between accident frequency and population density. New Jersey has the highest population density in the United States and the second highest injury rate on the highways.



A stop sign hidden by a tree.

Every town has hidden traffic hazards. However, many of these conditions can be identified by local governmental employees, citizens and accident reports. Armed with this information, the governing body and the safety committee should work with the engineer to plan an ongoing program to remove these hazards. Many hazards involve simple solutions – for example replacing worn or nonstandard signs and street markings. Others require enforcement such as removing shrubbery from intersection sight triangles.

Major projects such as rebuilding obsolete intersections and installing traffic signals usually require approval and funding from county and state agencies – a long drawn out process at best. Because approvals can take years, these projects are often forgotten and new projects are not started because of the frustration. Periodically request a report detailing the status of these projects. At times, local officials can also help speed the required approvals by lobbying their elected counterparts at the county and state level.



A confusing intersection without signals



Traffic safety also requires strong enforcement with strong emphasis on laws pertaining to impaired driving, distracted driving, speeding, seat belt usage and pedestrian issues.



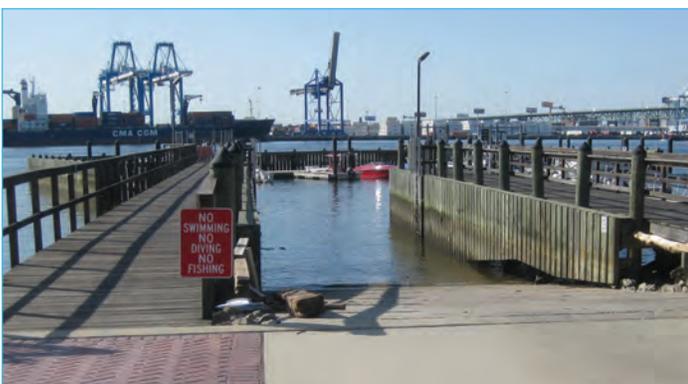
A classic traffic hazard – a dead-end street without a barrier where the road ends at a stream.



Curves need to be adequately marked.



Pot holes and broken drainage grates present significant hazards to bicyclists, motorists and pedestrians.



Boat launches at the end of a roadway should have prominent warning signs.

Distracted Driving



Distracted driving has become a frequent contributing factor in motor vehicle accidents. In 80% of all crashes, the driver was looking away from the road or doing something else at least three seconds prior to the accident. Research has determined that at any time, 11% of all motorists are talking on cell phones. The use of a cell phone, even a hands free phone, quadruples the risk of an accident.

The mind is similar to a computer and can process only so much data at one time. Even if you are not distracted, your mind cannot process all of the information it receives while driving. Talking on a cell phone puts the brain into information overload making it impossible to safely operate a vehicle. For example, research shows that a motorist on a cell phone tends to look only straight ahead and stops scanning the road. This results in the loss of peripheral vision, and the driver often fails to see things coming in from the side such as a pedestrian or another car.

Texting is even more dangerous because motorists literally take their eyes off the road and their hands off of the steering wheel while cognitively distracted.

Cell phones and other electronic devices are also a problem for pedestrians. A Los Angeles study found that pedestrians talking on cell phones are less likely to look for traffic and take longer to get to the opposite side when crossing the street.

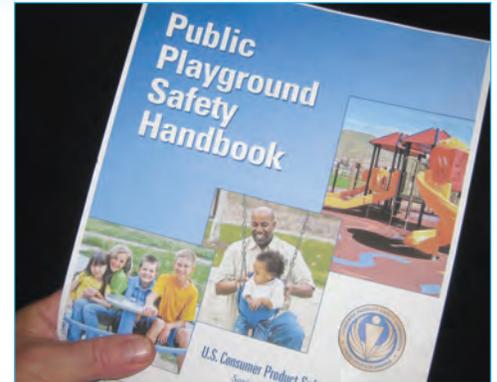
New Jersey Manufacturers has an excellent web site addressing this issue.

[\(http://www.distraction.gov/\)](http://www.distraction.gov/)



Playground Safety

Over 200,000 injuries are reported each year on playgrounds in the United States. The Consumer Product Safety Commission (CPSC) developed the playground safety standards (Publication 325) adopted by New Jersey. A copy can be downloaded from the NJ Safety Institute's website.



Initial Inventory

Retain a professional to inventory existing playgrounds and evaluate compliance. The inventory should be updated whenever there are major changes. Specifically identify the different pieces of apparatus, manufacturer, date of manufacture, location, age appropriateness and details on the protective surface. A separate file should be established for each playground.

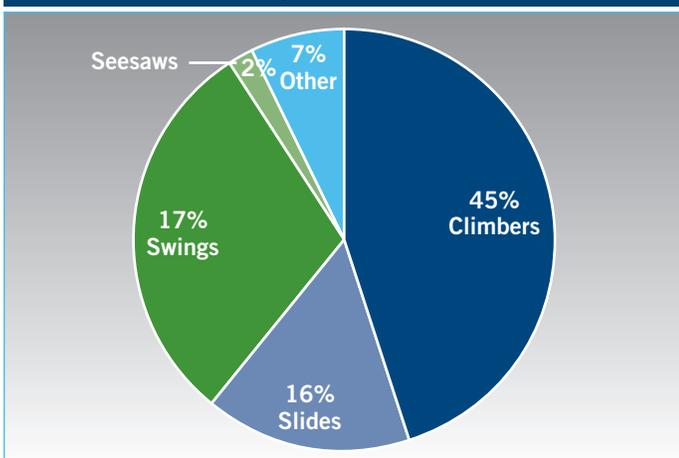
Annual Audits

At the beginning of the year, review the file and perform a detailed physical examination of each playground. The audit should be the responsibility of someone who has received the necessary training. All repairs should be made before opening for the season. A similar audit should occur at the end of the season to begin planning for the following year.

Periodic Inspection

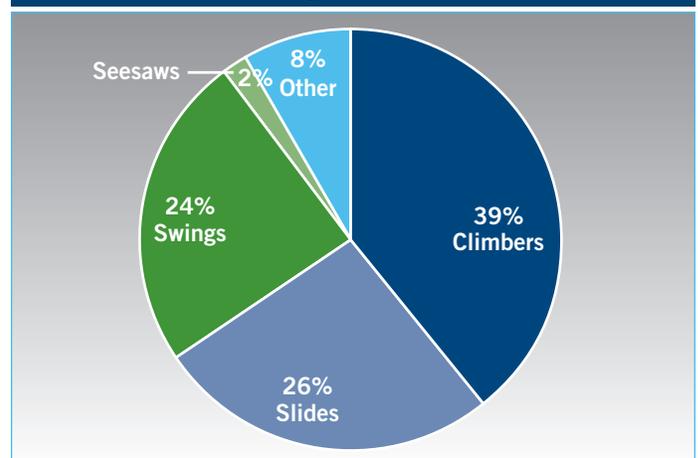
Inspections should be conducted at least monthly (or more frequently depending on usage) by maintenance personnel specifically trained to identify hazards and initiate repair procedures. If the repair cannot be performed on site, the apparatus should be taken out of service so that it cannot be used until it is satisfactory. All inspections should be documented along with corrective actions.

Play Equipment-Related Injuries Sustained by Children Six and Older



Source: National Electronic Injury Surveillance System, February 2010, <https://www.cpsc.gov/cgibin/NEISSQuery/home.aspx>

Play Equipment-Related Injuries Sustained by Children Under Six



Source: National Electronic Injury Surveillance System, February 2010, <https://www.cpsc.gov/cgibin/NEISSQuery/home.aspx>



Equipment designed for preschoolers should have platforms and rungs no higher than four feet and should be placed away from equipment used by older children.

75% of all playground injuries involve falls. The surface below equipment must have an adequate protective surface. In general, the fall zone is at least six feet in all directions from any piece of equipment. These surfaces must be periodically inspected and maintained.



Many pieces of older equipment should be replaced.





Organized Sports

Each year more than 750,000 Americans are injured during recreational sports. Brain injuries cause more deaths than any other sports injury. Too often, concussions are untreated because few symptoms are visible to casual observers. In addition, an athlete may experience considerable pressure from spectators, teammates and coaches to resume playing. Multiple concussions over time may result in cumulative damage while repeated concussions over a short period may lead to Second Impact Syndrome.

Signs of Brain Injury

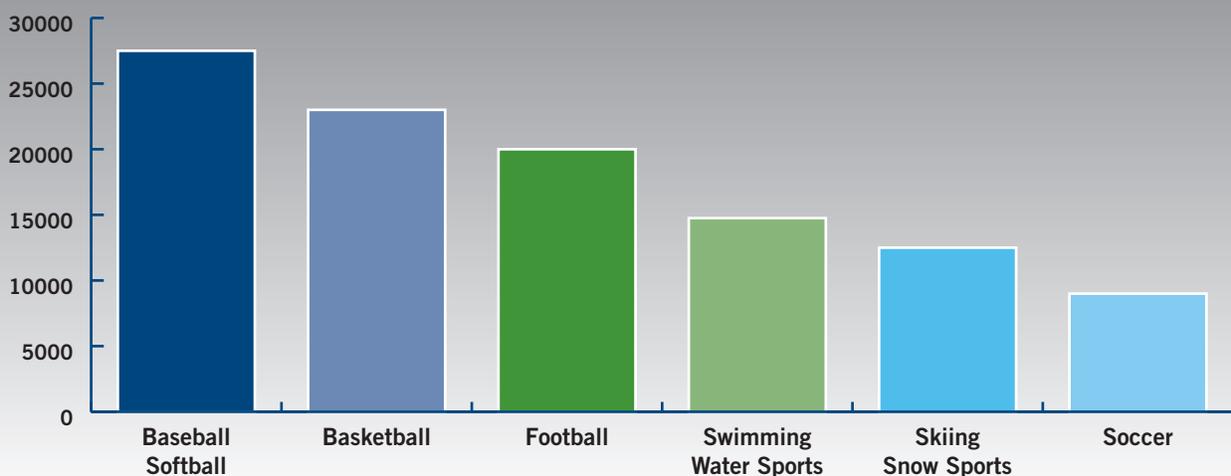
Whenever an individual loses consciousness, the brain has suffered an injury. However, most brain injuries do not involve loss of consciousness. Therefore, it is essential for a coach to keep a player out of a game where there are any signs or symptoms of a concussion.

The term “concussion” is often used in the medical literature as a synonym for a mild traumatic brain injury. If a concussion is managed appropriately, the prognosis for complete recovery is good. The hallmarks of concussion are confusion and amnesia, often without preceding loss of consciousness. The amnesia generally involves loss of memory for the traumatic event but frequently includes loss of recall for events immediately before or after the head trauma. An athlete with amnesia may be unable to

recall details about recent plays in the game or details of well-known current events in the news. Amnesia also may be evidenced by an athlete repeatedly asking a question that has already been answered.

The Rutgers SAFETY Clinic course was upgraded in July 2011 to include training on sports concussions. The CDC (Center for Disease Control) prepared a free online training program that produces a certificate upon successful completion of the course. All coaches, referees and other officials involved in sports activities should be required to complete at least one of these or a similar course and submit the documentation for the town’s records. Parents should also be encouraged to take a course. The CDC on-line training program for coaches is at: http://www.cdc.gov/concussion/HeadsUp/online_training.html

Leading Causes of Concussion in Sports





Baseball

- The head is involved in more baseball injuries than any other body part. Almost half of the injuries involve a child's head, face, mouth or eyes.
- The leading cause of injury and death is being hit by the ball; second leading cause is collision.

Football

- In any given season 10 percent of all college players and 20 percent of high school players sustain brain injuries.
- Football players with brain injuries are six times as likely to sustain new injuries.
- Match players (size, weight, and training) in contact drills.
- Limit tackling and blocking routines during practice.
- Emphasize "keeping the head out of football." No butt-blocking using your head
- Teach proper techniques and rules for safety: Never face/head tackle!
- Train consistently and properly. This includes doing exercise recommended for strengthening the neck and shoulder muscles



Soccer

- About five percent of soccer players sustain brain injuries. This may occur from head to head contact, falls or being struck by the ball on the head
- Heading or hitting the ball with the head is the riskiest activity when done repeatedly. The risk is greater if a small child uses too large a ball. Heading the ball, especially by younger players should be discouraged.
- Girls are injured playing soccer more often than boys.
- Collision with other players should be discouraged and avoided.
- Younger teams should use the appropriate size and weight ball during practice and play.
- Goal posts should be padded and properly anchored to the ground.



Bicycle Safety

- Bicycle helmets are 88% effective in preventing brain injuries.
- Universal use of helmets could prevent one death every day and one brain injury every four minutes.
- Half of all bike riders do not regularly wear a helmet. New Jersey requires that children under 17 to wear helmets while bicycling, in-line skating and other wheeled activities.
- More kids, ages 5-14 are injured in biking accidents than in any other sport.
- Each year, 550,000 people are injured in bicycle accidents, including 350,000 children under 15.
- Each year, bicycle crashes kill about 900 people, including 200 children under 15.
- Bicycle incidents are most likely to occur within five blocks of home, almost half in driveways and on sidewalks.



Public officials, even the President, can set a good example and use helmets while participating in recreational sports such as bicycling.

THINK POSITIVE

A Helmet Safety Reward Program

Think Positive uses reinforcement to enforce New Jersey's helmet law. The approach involves police officers handing out positive tickets to reward children and adolescents "caught" wearing their helmets. Each ticket includes information on brain injury and helmet safety as well as a reward, such as a coupon for a free slice of pizza, ice cream, discount on a movie, or similar incentive. The Safety Institute's website has a sample "ticket" you can download. The incentives are provided by local businesses. The program fosters safe and responsible behavior and builds positive relationships between youth and police officers.

The Brain Injury Alliance offers a complete tool kit including a step-by-step manual to assist community groups develop these incentive programs. Go to www.bianj.org



To the extent possible, bicycle routes should be established and properly lined.



Abuse of Prescription Medications

The death rate from the abuse of prescription medications has reached epidemic proportions. The Division of Community Affairs within the New Jersey State Attorney General's Office has taken the leadership in combating this issue by developing the prescription monitoring program.

Information about the Division of Community Affairs programs to combat the abuse of prescription medication is available online at <http://www.state.nj.us/lps/ca/pmp/NJMPbrochuredoctor.pdf>



More complete information is also available on line about pharmacy reporting requirements. The public needs to be better educated about the seriousness of the problem and specifically about this program. The State Division of Consumer Affairs is also concerned about the proper disposal of prescription medications and has considerable material about this issue on its web site as well.

There are also a number of sources discussing the problems with senior citizens caused by prescription drugs. For example, this is an excellent article on the AARP web site concerning the relationship between fall down accidents and the use of antidepressant medications.





Safety for Seniors

To be effective, a community safety program must also include outreach to senior adults.

Physical changes in older individuals make them more vulnerable to injury and reduce their chances to recover.

Slips and Falls

More than one third of adults 65 or older fall each year, and falls are the leading cause of injury deaths among seniors. Falls are also a major cause of disabling injuries that permanently restrict the mobility of seniors. Each year, almost 2 million seniors are treated in emergency departments for nonfatal injuries from falls, and more than 400,000 are hospitalized. Rates of fall related deaths have increased significantly over the past decade.

Motor Vehicles

Today's seniors are mobility-minded and elect to drive longer. However, some older drivers are unable or unwilling to correctly assess their driving capabilities.

Pedestrians

Seniors account for 18% of pedestrian fatalities, and have the highest rate of any age group. Seniors often have difficulty hearing or seeing cars, and are especially vulnerable at intersections because they need more time to cross the street.

Suicide

Suicide among the elderly is becoming an increasing problem and high rates of alcohol and prescription drug involvement have been found among individuals who commit suicide.

Fire

Older adults suffer twice as many fire deaths as the general population. People 85+ are four times as likely to die in a fire as other groups. When a fire starts, the elderly are likely to need more time to escape from a fire area, and may need the assistance of others to do so.

Addressing the Issue

Begin by compiling the accident rates for your community and talk to the police, fire, ambulance and health departments about the issue. Reach out to senior groups and seek their views on these questions. For example, are there particular intersections that need safety improvements to accommodate the needs of senior adults? Where should sidewalks be improved? What other services can the community provide seniors?

Establish an outreach program to inform senior citizens and their care givers about these safety issues. The NJ Safety Institute's video, "Smart Moves" is designed to be used at these sessions. The Institute distributes this video at no charge.

There are numerous organizations that also provide educational material including the Brain Injury Alliance, the Center for Disease Control (CDC), the National Highway Traffic Safety Administration and many others. Material can also be downloaded from the NJ Safety Institute's website.



Preventing Slips and Falls

Exercise

Regular exercise significantly reduces an older adult's chances of falling. Strength training exercises that improve balance and coordination, like Tai Chi, are most helpful. As a precaution, check with a doctor to determine the most appropriate exercise for each person.

Home Safety Check

- Remove things that might be tripped over (such as magazines, clothing and shoes) from stairs and walking areas.
- Store often used items in cabinets that can be reached easily without using a step stool.
- Install grab bars in the tub or shower and next to the toilet. Use non-slip mats on the bathtub and shower floors.
- Improve lighting in the home. Brighter lights may be needed to see well. Lamp shades or frosted bulbs can reduce glare.
- Install handrails and lights on all stairs in the home and outside.

Review all medicines with a health care provider

Ask a doctor or local pharmacist to look at all the medicines, including non-prescription medications. As people age, the way some medicines work in the body can change. Sometimes those changes can make an older person drowsy or light-headed, which could lead to a fall.

Check Vision

Make sure an eye doctor checks to be sure eyeglasses are correct and that there are no conditions that limit vision, like glaucoma or cataracts. Poor vision can increase the chance of falling.

Wear Safe Shoes

- Wear sturdy shoes with thin, non-slip soles instead of running shoes with thick soles.
- Wear shoes at all times – especially around the house. Floppy slippers and stockings can increase the risk of falling in the home.
- Shoes should be firmly fastened. Cotton lace or Velcro closings are good choices.
- Shoes should have non-skid soles with less than a 1 1/2 inch heel, containing enough space for the toes to lay flat and straight, be lightweight and supportive. The shoes fabric or leather should surround the entire foot.



Changing Weather Patterns: The Impact on New Jersey Government

On August 28, 2011, Tropical Storm Irene made landfall in New Jersey followed just fourteen months later by Super Storm Sandy. Over 40 Americans died in Irene and twice as many in Sandy. While both storms resulted in more devastation than anything in recent memory, a storm of the magnitude of the 1938 “Long Island Express” Hurricane would have been even more destructive.

Weather patterns are changing. The number of major weather-related natural catastrophes worldwide has almost tripled since 1980. Flood loss events have increased threefold, and the number of windstorm natural catastrophes more than doubled.

Nowhere is the rising number of natural catastrophes more evident than in North America, where these events have seen a roughly fourfold increase over the past three decades. The increase is entirely weather-related. In fact, the number of geophysical loss events such as earthquakes has slightly decreased over this period.

Since 1900 sea levels have increased an average of eight inches and temperatures increased an average of one degree Fahrenheit. This change is expected to accelerate over the remainder of this century and sea levels could possibly rise by as much as another three feet by 2100. Over the last 30 years precipitation has also increased 30% in the Northeast. Of special concern is the fact that precipitation has been coming in heavier downpours.

Recent publications are available from the NJ Safety Institute to help public officials better understand these issues. In particular, officials should study the August 2013 report of the “Federal Hurricane Sandy Rebuilding Task Force,” and the 2012 publication “Severe Weather in North America,” from Munich Re, the parent of New Jersey-based Munich Re America.

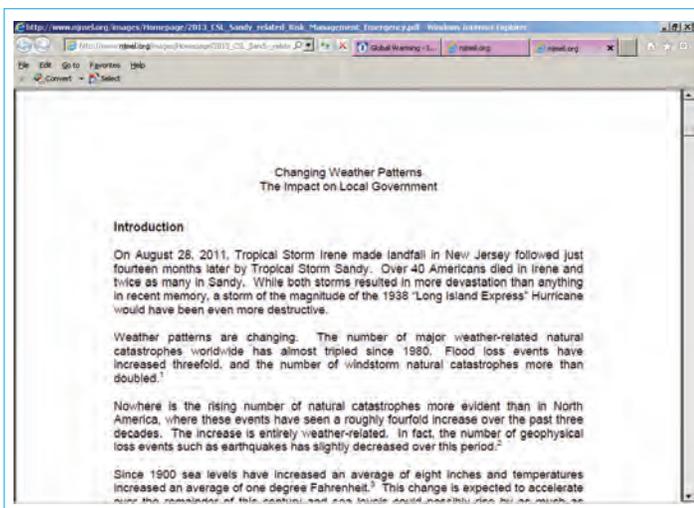
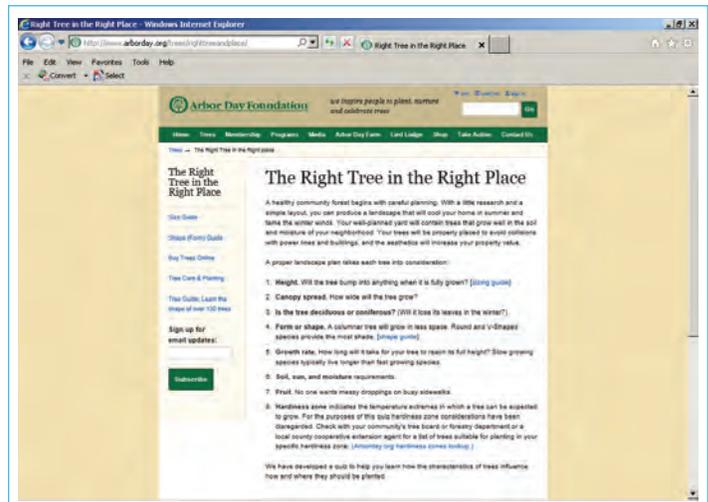


These publications detail the need for enhanced coordination between all levels of government, homeowners, businesses and the insurance industry to mitigate the results of these extraordinary events. The role of government is to provide up-to-date information, a strong, well-maintained infrastructure, enforcement of building codes and sound land use planning. The insurance industry must continue to advocate for loss prevention and the mitigation of hazards while providing sound financing of insurable risks and fair claims handling procedures.



Every elected official should become familiar with emergency management and their responsibilities during an emergency. FEMA has an excellent 45 minute on line webinar addressing these issues. Go to FEMA's training web site at <http://training.fema.gov/IS/crslst.aspx> and enter course IS 908.

One of the problems faced by many communities during Sandy was long periods of electrical outages caused by downed trees. The Arbor Day Foundation has a web site on the standards to minimize this risk in the future. See <http://www.arborday.org/trees/rightTreeAndPlace>



The New Jersey Safety Institute released a joint white paper with Munich Re America about the impact on New Jersey government of changing weather patterns. This white paper is available on the Safety Institute's website.

Model Resolution Establishing Citizens Public Safety Advisory Committee

W H E R E A S, Each year, residents in our (community or county) are needlessly injured in pedestrian accidents, biking accidents, sports injuries, slips and falls, playground accidents, motor vehicle accidents, and others; and

W H E R E A S, many departments within the (community or county) touch on public safety issues; and

W H E R E A S, there is a need to coordinate these efforts and encourage the involvement of educators, community groups as well as citizen volunteers.

N O W, T H E R E F O R E, B E I T R E S O L V E D

by the (governing body type) of the (local unit name) as follows:

1. A Citizens Advisory Committee for Public Safety is hereby established to coordinate the programs to address such issues as pedestrian accidents, biking accidents, sports injuries, slips and falls, playground accidents, motor vehicle accidents, and others.
2. The Committee's membership shall consist of (list appropriate departments) and citizen volunteers appointed by (appointing authority).
3. The Committee's membership shall also include a member of the (governing body type) and a member of the Board of Education.
4. The Committee shall periodically report its progress to the (governing body type) and the Board of Education

20 Links to Begin a Safety Program

Brain Injury Alliance of New Jersey – <http://www.bianj.org/>

Center for Disease Control and Prevention – <http://www.cdc.gov/>

Consumer Products Safety Commission - <http://www.cpsc.gov/>

Distraction .Gov. – <http://www.distraction.gov/>

GENESIS Reinsurance – <http://www.genesisinsurance.com/>

Munich Re – <http://www.munichreamerica.com/>

Municipal Excess Liability Joint Insurance Fund - <http://www.njmel.org/>

National Safety Council – <http://www.nsc.org/>

New Jersey Association of Counties – <http://www.njac.org/>

New Jersey State League of Municipalities – <http://www.njslom.org/>

New Jersey Bicycle and Pedestrian Resource Center – <http://njbikeped.org/complete-streets-2/>

New Jersey Department of Safety and Workforce Development – <http://lwd.dol.state.nj.us/>

New Jersey DOT Safe Routes to School – <http://www.state.nj.us/transportation/community/srts/>

New Jersey Safety Institute – <http://www.njsafetyinstitute.org/>

New Jersey Schools Insurance Group – <http://www.njsig.org/index.php>

New Jersey State Association of Chiefs of Police – <http://www.njsacop.org/>

North Jersey Transportation Planning Authority – <http://www.njtpa.org/>

Safety National Insurance Company – <http://www.safetynational.com/>

School Pool for Excess Liability – <http://www.spelljif.com/>

Nine Easy Ways To Make Safety a Priority

Your organization can reduce its accident rate by:

- Requiring that a formal safety program be in place and that its status be a recurring item on the governing body's regular workshop agenda;
- Committing to making safety a priority;
- Determining how your safety program is structured and how it can be improved;
- Comparing your safety record to other similar organizations;
- Tracking your safety record to see if it's improving;
- Requiring monthly meetings of your safety committee, focusing on public safety as well as employee safety;
- Publishing the safety committee's minutes and distributing them to the governing body;
- Communicating potential hazards with your work force and encouraging them to share this information with you as well;
- Having a mechanism in place for employees and the public to report unsafe conditions and establishing a procedure for remedying hazards on a priority basis.

If you want to volunteer to become a member of the Safety Institute or have questions regarding the CSL Program or suggestions for improving it, please contact us.

