Benchmarking of Occupational Health Practices
Industrial Hygiene and Safety Group Meeting, October 24, 2017

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Additional Benchmarking Data Provided by
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UChicago Argonne, LLC
In the summer of 2017 a request was sent to the IH/Safety and Occupational Medical EFCOG Task Groups soliciting information on the occupational medicine services provided at DOE sites.

Results were distributed in September of 2017.
# Occupational Medicine Services Provided at DOE Sites (Sept/17)

## 20 sites responded

<table>
<thead>
<tr>
<th>Facility (Size of Facility, Approx.)</th>
<th>EMS/Ambulance Service</th>
<th>Urgent/Acute Care Capabilities for Employees</th>
<th>Wellness programs (e.g., fitness, behavioral/preventive health counseling and wellness, diabetes, obesity, cardiac, etc.)</th>
<th>Physical Therapy</th>
<th>Other (Type of staff performing work - contractor or employee)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Site</td>
<td>Fire Department provides services to the on-site medical clinic. Emergency services are overseen by a local Emergency Physician with regard to protocols, etc. (City) Fire Dept responds to in-town clinic emergencies.</td>
<td>Our services are limited to First Aid or stabilization for referral with regard to work-related injuries. Treatment for non-occupational illnesses are available but limited at both clinics.</td>
<td>All wellness programs and Behavioral Health Services are provided with some services provided onsite.</td>
<td>Not part of our services as this is considered treatment and outside our contract scope.</td>
<td>EMS and fire response are Contractors ~9 RN's, 3 MDs, 3 NPs, 1 PA Behavioral Health are subcontractors One IH Manager in the Clinic – Contractor Specific Occ Med Programs are managed by Subcontractors (HRP, beryllium) One Risk Communication Dr., employee One Epidemiologist, employee</td>
</tr>
<tr>
<td>Site</td>
<td>On-site EMTs and Paramedics. Provided by Alameda County.</td>
<td>On-site</td>
<td>Small, but growing program.</td>
<td>Limited on-site. One day per week for PT. One day per week for OT.</td>
<td>EMTs/Paramedics – Lab employees 1 MD, 1 PA, 2 RNs, 2 MAs – Lab employees Behavioral Health – Lab employees PT/OT – Contractors</td>
</tr>
<tr>
<td>Site</td>
<td>Off-site, 1/2 mile. Work with EMS in EMP plan.</td>
<td>Assist employees with counseling and referral but do not provide non-emergent care.</td>
<td>Provide those services and are especially comprehensive in counseling. One on-site exercise room, well equipped.</td>
<td>No. Too small to be feasible. 750 employees, 2k users.</td>
<td></td>
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# Occupational Medicine Services Provided at DOE Sites

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<td><strong>Summary of Services Overview</strong></td>
<td>Service provided at: 20/20 (100%) of Labs; this includes 6 (30%) via arrangement with local resources.</td>
<td>Service provided at: 19/20 (95%) of Labs; this includes 7 (35%) only limited services. One Lab does not perform.</td>
<td>Service provided at: 20/20 (100%) of Labs; this includes 2 (10%) limited services at two sites.</td>
<td>Service provided at: 10/20 (50%) of Labs; this includes 1 (10%) only provide work-related injury rehab.</td>
<td></td>
</tr>
<tr>
<td><strong>Summary of Staffing Overview</strong></td>
<td>Employee = 8 (67%); Contractor = 3 (25%); Mix of Both = 1 (8%)</td>
<td>Employee = 4 (33.3%); Contractor = 4 (33.3%); Mix of Both = 4 (33.3%)</td>
<td>Employee = 5 (45.5%); Contractor = 4 (36.5%); Mix of Both = 2 (18%)</td>
<td>Employee = 4 (50%); Contractor = 3 (37.5%); Mix of Both = 1 (12.5%)</td>
<td>EAP Services: Employee = 4 (40%); Contractor = 5 (50%); Mix of Both = 1 (10%)</td>
</tr>
</tbody>
</table>
Occupational Medicine Services Provided at DOE Sites by type of Service Provider
Occupational Medicine Services Provided at DOE Sites by type of Service Provider

Acute/Urgent Care

Type of Employee
- Both: 34%
- Contractor: 33%
- Employee: 33%
Occupational Medicine Services Provided at DOE Sites by type of Service Provider

Wellness Programs

- 46% of employees
- 36% of contractors
- 18% of both employees and contractors
Occupational Medicine Services Provided at DOE Sites by type of Service Provider

Physical Therapy

- 50% Employee
- 38% Contractor
- 12% Both

Type of Employee
- Both
- Contractor
- Employee
Occupational Medicine Services Provided at DOE Sites
by type of Service Provider

Other Services

- 40% Employee
- 50% Contractor
- 10% Both

Type of Employee
Occupational Medicine Services Provided at DOE Sites by type of Service Provider

- Employee: 50%
- Contractor: 40%
- Both: 10%
Benchmarking of Occupational Health Practices

October 4-6 Sandia Hosted the EFCOG Occupational Medicine Task Group

Attending were ~ 20 Medical Doctors, Nurses, PAs…and one IH

Dr. Jamie Stalker presented the following summation of previous benchmarking efforts
Previous Benchmarking

A REVIEW OF BENCHMARKING – EFCOG OCCUPATIONAL MEDICINE TECHNICAL TASK GROUP

JAMIE L STALKER, MD
Chief Medical Officer
UCHicago Argonne, LLC

October 4 and 5, 2017
Fall Meeting EFCOG Occupational Medicine Technical Task Group
HEARING CONSERVATION PROGRAMS (May/17)
Age correction and notification of enrollment – 16 sites responded

Do you use age correction in calculation of STS?
• 13 stated yes
• 1 site developing a program
• 1 site prohibited by contract
• 1 site having issues with dispersed work force and DOD applications which prohibit application

How is Occ Med informed who is in HCP?
• variety of procedures using a combination of IH and/or supervisors/managers and/or Health Services deciding enrollment
• Some facilities require specific forms and/or job analysis – almost all through safety organizations and entered via digital records
• Some sites employees are enrolled based on job title, classification or other subjective decision
• A couple sites have instituted new procedures with IH having the primary role of enrollment.
• Gaps in enrollment and disenrollment is recognized at most sites
AFTER HOURS RESPONSE (Dec/16)

Define hours of operation, how injuries or substance testing is addressed after hours – 9 sites responded

• All sites have 24/7 operations
• Typical clinic hours in range od 7 am to 5 pm, 2 sites with no Friday clinic have longer hours during the week
• ANL only site not providing care to subcontractors
• 3/9 sites no clinician on call
• Of the 6 sites with on-call clinicians
  ❖ 2/6 do not respond on site
  ❖ 1/6 specified for chelation only
• After hours substance testing – 6/9 No site coverage by organization. Of the 6…
  ❖ 3 send to local ER or Urgent care
  ❖ The other 3 use vendors or subcontractors
• After hours injuries – 8/9 send to ER via EMS -1 has Occ Med vendor
• After hours injuries with internal rad contamination – 3 sites have rad response team,1 working toward chelation “to go” bag and MOU with local ER, 2 sites NA and 2 sites local ER has chelators and can chelate
Do you have all Occ Med board certified docs? 18 sites responded

- How many SOMDs are board certified in Occ Med = 12/18?
- How many other docs do you have and how many are Occ Med certified?
  - 16 total other physicians other than SOMDs noted
  - Only 7 of these Occ Med certified
- How many site that responded have 1046 requirements?
  - 10/18
  - 1 site contracts out 1046 Occ Med at 3x the cost with new requirements
Who does your diagnostic testing and drug testing? (12 sites responded)

- 9/12 use Quest for some service
- 5 of the 9 used BOTH routine and drug testing services with Quest
- 3 of the 9 used for drug testing only
- 1 used for routine labs only
- Other diagnostic services
  - MEDTOX – 3 sites use for drug testing
  - ALERE – 1 site uses for routine labs
  - LABCORP -4 use for routine labs
- 3 sites noted Quest refusal or challenge concerning Business Associate Agreements and Service Agreements (some think it has to do with HIPAA status at sites) - ? New HHS rule language
How many strikes for an employee to be “out”? (6 sites responded)

- Affiliation: 2/6 Office of science, 2/6 NNSA, 2/6 – no response
- How many chances does an employee get for a positive drug or alcohol test
  - 1 site NO policy
  - 3 sites zero tolerance – 1 strike your out for drugs but
    - One of these allowed for a single positive alcohol
    - One allowed a one time positive for bargaining units (depends on situation)
  - 1 site indicated second chance for both drug and alcohol if rehab and 2 year rehab, random testing contract signed
  - Most sites indicated zero tolerance for pre-placements
ELECTRONIC MEDICAL RECORDS (Dec/16)

What are you using and what does it offer?: (7 responses)

- Too many details to go into on functionalities, configurations, and customer service, etc.
- Which system do you use?
  - 4 used OHM
  - 1 used CHESS
  - 1 used Axion Ready Set
  - 1 used Medgate
HEAVY LIFTING (Jun/17)
Trying to explore where requirements come from and site approaches – 6 responses

- The following queries were made: A location I work at has traditionally limited the maximum anticipated weight lifted to 50 pounds, without another person assisting.
  - Does anyone know if this is a DOE directive?
  - There used to be a NIOSH lifting equation where the max was around 50 pounds but I do not know if that was the origin. (I think commercial sites allow up to 70 pounds) (e.g., UPS)
  - Do other DOE sites limit lifting to a certain amount of weight?
- Summary of responses:
  - 4 sites use a 50 pound limit and source of this is either unknown or various tables are used
  - 1 site 60 pounds
  - 1 site follows a modified version of the TLV in alignment with the American Conference of Governmental Industrial Hygienists (ACGIH) Threshold Limit Values (TLVs) and Biological Exposure Indices (BEIs) 2005
LASER EYE EXAMS (Jun/16)

Exam performed and by whom – direction of procedures and skin exams (5 sites)

-  1 site discontinuing exam completely by end of 2016
-  2 sites trying to move from full OPTHY exam to new ANSI standard with limited exam based on EFCOG white paper proposal
-  2 sites continuing to do full exam
-  No sites clear on skin exam requirement except one that focuses on UV exposed areas and/or per worker concern.
ZIKA VIRUS APPROACHES (2/16)

How are sites dealing with this new virus with traveling workers? (10 sites)

• Each site provided insight into their approach to this evolving threat to worker health and their families – policies and procedures were provided

• Pretty much everyone was monitoring the situation and were providing worker and traveler education on the current knowledge
B READS AT DOE SITES (Aug/17)

What are sites doing B reads for? (16 sites)

- Asbestos
  - 9/16 YES
  - 2 NA
  - 5 NO
- Beryllium
  - 7/16 YES
  - 3 NA
  - 5 NO
  - 1 no response
- Nano
  - 1/16 YES
  - All the rest no response
- Silica
  - 13/16 YES
  - 3 NA
RECOMMENDATIONS FOR FUTURE BENCHMARKING REPORTS

How can we make this clear and temporally referenceable?

• Put in table format
• Provide a title
• Provide date of benchmarking exercise
• Provide a statement of reference if applicable
• Clearly indicate queries made
• Indicate who responded (site and person)
• Feel free to provide a summary at end of each area queried
Contact Information

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