

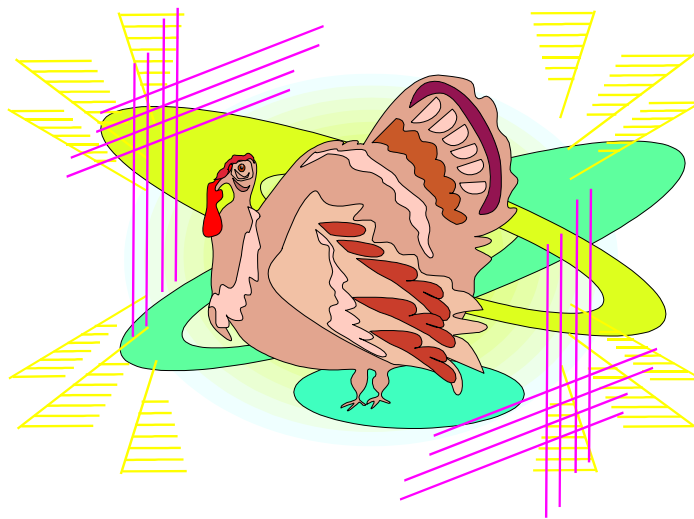
SAFETY ZONE

Volume 2, Issue 11

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TOMS CORNER: A MESSAGE FROM THE COUNTY SAFETY OFFICER



Tom Sproal
 County Safety Officer

The “Holiday Season” is once again upon us and we need to increase our awareness, at and away work.

It just seems people are more in a

rush to get somewhere fast during this time—to an after work social gathering—dinner—shopping—family get together—sport events and on top of that the situation may be compounded with bad weather and alcohol.

Defensive driving is a must during this time in order to avoid that unnecessary vehicle accident.

Assaults, theft and vandalism also escalate during this time by those who try to take advantage of the extra money we carry. We also make purchases and carry large bulky bags from the store to our vehicles, making us a prime target for assault and/or theft—Personal security becomes a main priority.

Darkness settles upon us by 4:30 P.M. and we find ourselves walking in parking lots or streets where lighting leaves a lot to be desired. Do you make it a practice to park close to your office? Do you make it a point to walk with someone to your car? Do you have keys in hand and look into the shadows for any suspicious persons.

Your car becomes your sanctuary once you get in and lock your doors—Let’s hope you have maintained your vehicle such as fuel, tires, spare tire, windshield wipers, battery, fan belt and other general maintenance so you can drive safely away.

This applies to men, too. Men will have the tendency to take more risks and end up getting themselves in a worse situation than women.

Bottom line, “street safety” is just plain common sense and it applies to all of us.

Plan ahead—err on the side of caution—don’t create a problem by taking those unnecessary chances—”Think!”

DRIVING BELOW THE ROAD RAGE RADAR

The line between aggressive driving and road rage is a fine line, and experts argue over how often drivers cross it. Nonetheless, mild-mannered motorists have no way of knowing which pushy drivers have a propensity for violence.

The best way to avoid becoming a road rage victim is to not provoke potential hot heads by acknowledging or responding to their rude actions. Here are some tips from the American Automobile Association and Sam Houston State University:

- Avoid eye contact. This can be seen as confrontation.
- Don't reciprocate. Tailgating or honking back intentionally can escalate emotions. Try to ignore perceived slights.
- When stopped in traffic, leave enough space to pull out from behind the car in front of you should it become necessary.
- Be a courteous driver. Don't do things that others might view as aggressive or annoying, like blocking the left lane, flashing your headlights, honking your horn or tapping your brakes, ostensibly to warn other drivers of their unsafe actions. Merge and let merge. On city streets, stay out of the right-hand lane unless you're planning to turn right. Don't straddle parking space lines or pull in to handicapped spaces if you're not disabled.
- Be careful about the message your car sends. For example, Confederate flags aren't a good idea, and even fish symbols that may express opinions on science and religion have been known to provoke those who disagree. Vanity plate messages that might seem arrogant don't engender sympathy either.
- Keep your hands—and your fingers—to yourself. Any sign language communicated between drivers should be friendly or conciliatory.
- If a fellow driver hassles you relentlessly or a confrontation escalates, drive to the nearest police station or busy location for help.

TOP 10 REASONS FOR NOT BUCKLING-UP

#10. "I'm so muscular that it doesn't fit." - **Seat belts are made to accommodate just about everybody, including body builders, professional athletes and the "pleasantly plump".**

#9. "It will wrinkle my clothes" - **If you don't buckle-up, a lot more than just your clothes will be wrinkled.**

#8. "It's too tight" - **If your seat belt doesn't fit properly, see your car dealer or Fleet Services for a custom seat belt or extension.**

#7. "I'm in a hurry" - **It takes less than three seconds to buckle-up. No matter how late you are, you can always take a few extra seconds to ensure your safety.—If you have time to light a cigarette, use your cell phone or turn on the radio—you have time to buckle up.**

#6. "It's only a short drive" - **Most accidents happen just a few miles away from home. Even if you're driving around the block, you should always buckle-up!**

#5. "It's broken" - **If this is true, you'd better take care of it as soon as possible. Remember, 49 states have seat belt laws, and if you're caught without one, not only are you endangering your life but you could also face a hefty fine, in addition to disciplinary action while driving on County business.**

#4. "No one else wears them" - **Actually, most of your friends do wear seat belts. Recent surveys indicate that more than half of all drivers buckle up at all times. This is one time that you definitely want to be like everybody else!**

#3. "I'm too busy talking on the cell

phone" - **In some cases, it's against the law to talk on the cell phone while driving. Even if it's not against the law where you live, talking on the cell phone shouldn't stop you from fastening your seat belt.**

#2. "My car didn't come with seat belts" - **Nice try. Every car comes equipped with seat belts.**

And the number 1 excuse for not using a

seat belt while driving a vehicle is:

"I won't get into a crash. It won't happen to me." - Most of these drivers who were hurt or killed said the same thing.



LATEX SENSITIVITIES & ALLERGIES



Rebecca Perkins
Occupational
Health Nurse

Natural Rubber Latex (NRL) glove use for barrier protection in health care and other settings has risen dramatically since about 1987, due to the increased threat of contracting HIV, Hepatitis B, Hepatitis C and other infectious agents.

With the increased use of gloves, there has been an increase in reported NRL allergies and sensitivities, among patients as well as among workers, notably health care workers.

In addition to those with increased exposure to NRL products, other individuals at risk of developing a latex allergy also include people with a tendency to have multiple allergic conditions, as well as those who have undergone multiple operations.

Latex allergy is also associated with allergies to certain foods, especially avocado, potato, banana, tomato, chestnuts, kiwi fruit and papaya.

While the general population exhibits a lower rate of NRL sensitization (approximately 1% to 6%), prevalence studies indicate that from around 6% to 17% of the exposed health care workforce is allergic to NRL.

The use of NRL products may result in several varieties of reactions, ranging from mild to severe and sometimes may even be life-threatening. These reactions include irritant and several types of allergic reactions. They can vary from localized redness and rash to nasal, sinus and eye symptoms to asthmatic manifestations including cough, wheeze, shortness of breath, and chest tightness; and rarely, systemic reactions with swelling of the face, lips, and airways that may progress rapidly to shock and, potentially, death.

These reactions can begin within minutes of exposure to 48 hours after exposure, depending on type of reaction (e.g., chemical sensitivity, allergy to latex proteins, irritant dermatitis)

Workers should take the following steps to protect themselves from latex exposure and allergy in the workplace:

1. Use non-latex gloves for activities that are not likely to involve contact with infectious materials.
2. If latex gloves are worn, use powder-free gloves with reduced protein content (Note: Use of powder-free gloves has been shown to reduce the dissemination of NRL proteins into the environment and decrease the likelihood of reactions by both the inhalation and dermal routes)
3. When wearing latex gloves, do not use oil-based hand creams or lotions—which may cause glove deterioration.
4. After removing latex gloves, wash hands with a mild soap & dry thoroughly.
5. Use good housekeeping practices to remove latex-containing dust from the workplace.
6. Learn to recognize the symptoms of latex allergy: skin rashes, hives, flushing, itching, nasal, eye, or sinus symptoms, asthma and shock.
7. If you develop symptoms of latex allergy, avoid direct contact with latex gloves and other latex-containing products until you can see a physician experienced in treating latex allergy.
8. If you have a latex allergy, avoid contact with latex gloves and other latex-containing products, avoid areas where you might inhale the powder from latex gloves worn by other workers, tell your employer & your health care provider that you have latex allergy, wear a medical alert bracelet & carefully follow your physician's instructions for dealing with allergic reactions to latex.

Are You a Dangerous Driver? 10 Ways To Tell!

By Pat English, Safety Coordinator

Bad habits range from road rage to eating while driving. Compare yourself with these accident magnets from Boston. Do you see yourself here?

Surely you've seen them on the road: They're swerving in and out of lanes, ignoring rules of the road, and engaging in other rude -- and dangerous -- behavior. Or maybe you are that bad driver?

Compare yourself with a focus group of 30 drivers from Boston who have collectively been involved in 84 accidents over the past three years and received 49 speeding tickets, 39 moving violations and 92 parking tickets. Take a look at these questions to find out if you fit the profile.

1. When you reach a stop sign and no one is coming from another direction, do you roll through instead of stopping? An overwhelming majority (87%) of the bad drivers say they should be able to speed, go through stop signs, and break other driving rules and regulations as long as no one gets hurt.

2. Do you talk on the cell phone while driving instead of pulling off and stopping to talk? A total of 77% of bad drivers say they do this either frequently or occasionally. Only 13% say they never talk on a cell phone while driving.

3. Do you take your coffee and muffin or other food and drink on the road with you, driving with one hand while using the other to eat? Some 60% of those in the study say they either frequently or occasionally eat while they're driving. In fact, several of the participants say they have spilled drinks and attempted to clean up the spill while driving.

4. If you're out shopping in a crowded area and are looking for a parking space, do you become so focused on your search that you lose sight of the cars and pedestrians around you? More than half of the participants say that when they're trying to find a parking space in a crowded area, they can become so focused that they become oblivious to other drivers and pedestrians and

often get into accidents, whether on the street or in a parking lot.

5. Do you hate driving behind SUVs or other large vehicles that obstruct your view? More than 60% of bad drivers say they are frustrated driving behind SUVs because they are wide and tall and block their vision. In fact, more than 70% believe SUVs should be required to drive in a separate lane on the highway.

6. Does your driving change when you go into areas with higher police presence? Nearly all of the participants strongly agree with the statement that they drive more carefully when they know police are in the area. In addition, most participants say they check their rearview mirrors regularly for police cars.

7. Does listening to music while you drive sometimes leave you oblivious to all but the music? Some 93% of participants say they listen to the radio while driving, and 73% of them listen to music. Most say listening to the radio has often caused them to become distracted and in some cases they say listening to loud music has caused them to be more aggressive on the highway.

8. Do you find yourself in confrontations on the road, either through verbal arguments or hand gestures, because of either your own driving habits or the habits of others? While 87% of the bad drivers consider themselves at least somewhat courteous drivers if not very courteous, at least half also admit making obscene or rude gestures or comments to other drivers, particularly those who cut in front of them on the highway. Participants also say, however, that they appreciate a thank-you gesture for letting another driver into their lane, and often give a wave of thanks themselves when they cut into traffic.

9. Does your "work hard, play hard" lifestyle leave you sleepy behind the wheel at times? About 50% of those in the study say they have almost fallen asleep while driving and an additional 10% say they have wanted to shut their eyes while driving and almost did. The

study found that most participants lead a busy lifestyle that sometimes leaves them sleep-deprived.

10. When you're driving with passengers, do you turn around to talk, taking your eyes and mind off the road? Nearly all group members acknowledged that they are distracted when they have passengers in their vehicles, and most say during conversations they'll turn their heads and stop paying attention to the road. This held true especially for drivers with small children.

If your answers agree with the answers from the focus group, it's likely you tend to be a more aggressive driver than average. Like members of the study, you may also pay more for your auto insurance. Within the study group, 53% pay a surcharge on their auto insurance because of their driving records.

Outgoing, Confident, and a Menace

These bad drivers have other characteristics that you may recognize in your own life. Most say they lead very stressful lives without enough time to accomplish all their activities in a day. They all consider themselves either somewhat or very outgoing, and all have a fair to great amount of confidence in the way they behave. And 90% say they've told a "little white lie" to protect someone's feelings.

The group was broken down into three age groups, from 18 to 25 years old, 26 to 45 years old, and 46 to 59 years old. There were 19 men and 11 women in the study, commissioned by RightFind Technology, a company developing new products to help insurers make better decisions on auto insurance rates for specific drivers.

While the study is based on a small group and should be considered a hypothesis rather than a conclusion, "our study identified several personality attributes that seem clearly linked to accident involvement," says Donald Bashline, one of the owners of RightFind. "Witnessing these focus groups was a revelation."

Foodborne Illness and Holiday Foods

Foodborne illness often presents itself as flu-like symptoms such as nausea, vomiting, diarrhea, or fever, so many people may not recognize the illness is caused by bacteria or other pathogens in food.

Thousands of types of bacteria are naturally present in our environment. Not all bacteria cause disease in humans. For example, some bacteria are used beneficially in making cheese and yogurt.

Bacteria that cause disease are called pathogens. When certain pathogens enter the food supply, they can cause foodborne illness. Millions of cases of foodborne illness occur each year. Most cases of foodborne illness can be prevented. Proper cooking or processing of food destroys bacteria.

Age and physical condition place some persons at higher risk than others, no matter what type of bacteria is implicated. Very young children, pregnant women, the elderly, and people with compromised immune systems are at greatest risk from any pathogen. Some persons may become ill after ingesting only a few harmful bacteria; others may remain symptom free after ingesting thousands.



How Bacteria Get in Food



Bacteria may be present on products when you purchase them. Plastic-wrapped boneless chicken breasts and ground meat, for example, were once part of live chickens or cattle. Raw meat, poultry, seafood, and eggs are not sterile. Neither is fresh produce such as lettuce, tomatoes, sprouts, and melons.

Foods, including safely cooked, ready-to-eat foods, can become cross-contaminated with bacteria transferred from raw products, meat juices or other contaminated products, or from food handlers with poor personal hygiene.

The "Danger Zone"

Bacteria multiply rapidly between 40 °F and 140 °F. To keep food out of this "danger zone," keep cold food cold and hot food hot.

Store food in the refrigerator (40 °F or below) or freezer (0 °F or below).

Cook food to 160 °F (145 °F for roasts, steaks and chops of beef, veal, and lamb).

Maintain hot cooked food at 140 °F or above.

When reheating cooked food, reheat to 165 °F.

Visit the USDA Meat and Poultry website for more information:

www.usda.gov

1. Preserve the evidence. If a portion of the suspect food is available, wrap it securely, mark "DANGER," and freeze it. Save all the packaging materials, such as cans or cartons. Write down the food type, the date, other identifying marks on the package, the time consumed, and when the onset of symptoms occurred. Save any identical unopened products.
2. Seek treatment as necessary. If the victim is in an "at risk" group, seek medical care immediately. Likewise, if symptoms persist or are severe (such as bloody diarrhea, excessive nausea and vomiting, or high temperature), call your doctor.
3. Call the local health department if the suspect food was served at a large gathering from a restaurant or other foodservice facility, or if it is a commercial product.

There is no such thing as “earthquake weather”. Earthquakes occur in all weather conditions. Furthermore, there is no way that the weather could affect the forces several miles beneath the surface of the earth.



Each year the southern California area has about 10,000 earthquakes. Most of them are so small that they are not felt. Only several hundred are greater than magnitude 3.0, and only about 15-20 are greater than magnitude 4.0. If there is a large earthquake, however, the aftershock sequence will produce many more earthquakes of all magnitudes for many months.

The largest recorded earthquake in the United States was a magnitude 9.2 that struck Prince William Sound, Alaska on Good Friday, March 28, 1964.

Cool Earthquake Facts

The earliest reported earthquake in California was felt in 1769 by the exploring expedition of Gaspar de Portola while the group was camping about 30 miles southeast of Los Angeles.

The average rate of motion across the San Andreas Fault Zone during the past 3 million years is 2” per year. This is about the same rate at which your fingernails grow. Assuming this rate continues, scientists project that Los Angeles and San Francisco will be adjacent to one another in approximately 15 million years.

Moonquakes—“earthquakes” on the moon—do occur, but they happen less frequently and have smaller magnitudes than earthquakes on the earth. It appears they are related to the tidal stresses associated with the varying distances between the Earth and the Moon. They also occur at great depth, about halfway between the surface and the center of the moon.



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Safety Coordinator
(909) 955-5883

A seiche (pronounced SAYSH) is what happens in the swimming pools of California during and after an earthquake. It is “an internal wave oscillating in a body of water” or, in other words, it is the sloshing of water in your swimming pool, or any body of water, caused by the ground shaking in an earthquake. It may continue for a few moments or hours. Long after the generating force is gone. A seiche can also be caused by wind or tides.

It is estimated that there are 500,000 detectable earthquakes in the world each year. 100,000 of those can be felt, and 100 of them cause damage.

SLIPS AND FALLS



Joe Salinas
Safety Coordinator
955-6788

Slips and falls in the workplace present more than a trivial problem. Same - level slips and falls represent nearly 11 percent of all worker's compensation claims and more than 13 percent of all claims costs.

This is second only to manual

material handling, which represents 37 percent and 40 percent, respectfully.

In addition, 11 percent of low back pain - related claims and 12 percent of low back pain - related claims costs are attributed to slips and falls.

CAUSES of SLIPS and FALLS

Causes of slips and falls are complicated.

Ergonomics is involved in slips and falls in several ways. Tasks that are being performed have a direct effect upon the characteristics associated with a persons behavior. Slips and falls occur most frequently in the elderly. Two reasons explain this. First, as one ages, reaction time slows. When younger people sense or perceive a heel slip, they recover much more quickly. Older people recover much more slowly, and that split-second delay is the difference between recovery and a fall. The second factor is muscular strength. Several different muscle groups are employed to recover from a slip, and we take for granted how strong these muscles must be to recover.

The elderly have less strength in these

muscles and, are less physically able to recover from a slip.

Biomechanics involves the study of the mechanics of the body and how we walk and interface with surfaces as we walk.

Psychology is how we perceive and respond to slippery conditions. For example, when a person perceives a slippery condition (e.g. walking on ice), he or she will adjust his or her gait to prevent a slip or fall. A problem often occurs when a person does not perceive a slippery condition and does not adjust ones gait, slips unexpectedly, fails to recover, and falls.

Tribology is commonly associated with friction between the shoe sole and the floor surface, lubrication at the interface or a contaminate on the floor surface such as water, grease or oil and wear of floor surface and shoe sole material over time.

PREVENTING SLIPS and FALLS:

- Use the following guidelines when developing a slip and fall prevention program:
- Develop written floor cleaning protocols that address specific floor contaminants.
- Identify the contaminate and select cleaners that will break it down.
- Identify the concentration of cleaner desired to remove the contaminate, including the tools you need to clean it.
- Determine an appropriate floor cleaning schedule and stick to it.
- Perform occasional testing of floor surfaces to monitor slip resistance levels and determine the effective-

ness of your floor cleaning protocol.

- Train housekeeping staff or persons responsible for inspections, maintenance, and cleaning requirements and procedures, safe handling and disposal of chemicals and solutions, emergency conditions and operations, and record keeping or reporting related to housekeeping and maintenance.
- Ensure adequate lighting is available to see floor hazards and defects.
- Identify and report potential hazards to appropriate supervision.
- Provide warning signs whenever a slip and fall hazard has been identified.
- Secure floor mats against movement.

FOUR RULES for HAZARD IDENTIFICATION:

1. Investigate all slip/fall accidents, incidents, and near incidents thoroughly from a cause and prevention standpoint.
2. Look for the root cause of slips and fall accidents.
3. Do periodic accident reviews to determine trends in the causes of slips, trips, or fall accidents.
4. Do periodic self-inspections to look for slip/trip/fall hazards or risk factors. Make a checklist listing your cause factors based on your accidents. Eliminate exposures before they cause an accident.

October Puzzle Winners

Answer: The lines were the same length (Note: Lines were distorted when transferred to the web and were not equal).

First: Judith Schilreff, ET II/District 18, Blythe

Second: Teresa "Terri" Acosta, ESC II, Moreno Valley GAIN

Third: Troi Andreola, Volunteer Services Coordinator, RCRMC

"Special Prize": Patty Pantoja, Supervising OA, DPSS/Kidd St—Patty was **first** to discover lines were not equal!!

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Web site:
<http://intranet.co.riverside.ca.us/>

SOMETHING TO STIMULATE YOUR MIND WHILE ON BREAK

QUESTION

**WHAT COMES ONCE IN A MINUTE, TWICE IN A
MOMENT BUT NEVER IN A HUNDRED YEARS???**

Submit your answer via GroupWise to:

Safety Office Publications

In fairness to all, answers to puzzles will not be accepted prior to mass distribution of the Safety Newsletter via GroupWise.

“Thank you” - Safety Office Publications

County Safety Office Staff are available to assist you at all times. Our office is in the (909) area code, on MICRO and all have Email.

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Tawni Grubbs, OA III

Lydia Temmen, OA III

Jan Zimmermann, OA II

“SAFETY SHORTS”

Cell Phones

Americans will discard 130 million cellular phones annually and within three years result in 65,000 tons of trash, including toxic metals and other health hazards. This does not include the 220 million tons of computer and other electronic products tossed in the trash annually, in the U.S. alone.

The environmental and public health impact of the waste created are a significant concern. Many cell phone companies offer trade-in programs and electronic appliances can also be turned in to charitable organizations. For more information, visit:

www.nsc.org



National Family Week is November 24-30, 2002. Organized by the Alliance for Children and Families, the annual events celebrate the family and it's value to society. This years theme—Connections Count—recognizes that strong families are at the center of strong communities. More info? Visit:

www.nationalfamilyweek.org.

Don't Put Babies on Adult Beds is a national safety campaign by industry and Consumer Product Safety Commission aimed at reducing deaths associated with placing babies on adult beds. 180 children ages 2 or younger died between 1999-2000 after being placed on adult beds. Babies deaths were due to being:

- Trapped between the bed and the wall, headboards, footboards, bed frames, or other furniture.
- Suffocation due to bedding or pillows.
- Squashed by another child or adult.

For additional information, visit the following website:

www.CPSC.org