



Department of Employee Relations

May 31, 2005

Tom Barrett
Mayor

Maria Monteagudo
Director

David Heard
Fire and Police Commission
Executive Director

Michael Brady
Employee Benefits Director

David Kwiatkowski
Labor Negotiator

To The Honorable
The Committee on Public Safety
Common Council
City Of Milwaukee

Dear Committee Members:

Re: Common Council File No. 041614

Attached please find two reports relative to an analysis of occupational injuries and illness in the Fire and Police departments pursuant to the Committee's request of February 10, 2005.

The reports present data on occupational injuries for a five year period from 2000 to 2004 and summarize the types of injuries found as well as the type of duty performed when injuries occurred. Department specific recommendations are also being presented for the Committee's review.

Respectfully submitted,

Maria Monteagudo
Employee Relations Director

C: Chief Wentlandt
Chief Hegerty
Burma Hudson

**Analysis of Milwaukee Fire Department Injuries
For the Period 2000 – 2004
Prepared By: Department of Employee Relations**

Overall Injury Analysis

The total number of injury claims (total number of nonfatal firefighter injuries, excluding occupational exposures) during all types of duty in the Milwaukee Fire Department has decreased from 776 in 2000 to 734 in 2004 (5.4% decrease) with an average of 735 claims during the five year period. Table 1 reflects the actual number of claims per year.

The average number of injuries resulting in lost work days during this five year period has remained relatively stable at 329 in 2000 and 326 in 2004 with an average of 327. Fire Department injuries have accounted for approximately 30% of the total number of injuries in the City throughout this five year period.

The incidence rate, an indicator of the rate at which workplace accidents are occurring within the department, has shown a slight increase of 10% from 23.74 in 2000 to 26.30 in 2004. The size of the increase however, is below the incidence rate increase for the entire City at approximately 15% during the same period.

Worker Compensation claims paid on behalf of the Fire Department have increased by approximately 18%, from \$1.6 million in 2000 to \$1.9 million in 2004. This significantly higher increase in worker compensation expenditures as compared to a moderate decrease in the total number of injury claims and a slight decrease in the number of injuries resulting in lost work days may stem from:

- more serious claims resulting in greater need for medical intervention and services; or
- increases in indemnity costs (lost wages, disability payments, and litigation) or increases in medical costs (treatment and hospitalization expenses).

Category	2000	2001	2002	2003	2004
Total Injury Claims	776	740	713	713	734
Injuries resulting in lost work days	329	327	340	312	326
Incidence Rate	23.74	22.73	25.09	26.47	26.30
Exposure to Infec Diseases*	77	57	45	63	53
Exposure to Hazardous Conditions*	n/a	115	17	9	11

Table 1

Source: National Fire Incidence Reporting System (NFIRS) as reported by the Milwaukee Fire Department for 2000 – 2004).

* Exposure related injuries are not included in the total number of claims per NFIRS guidelines.

Type of Duty when Injury Occurs

The type of duty when injury occurs is an important factor to consider in determining the appropriate interventions needed to reduce workplace injuries in this dangerous occupation. The NFIRS uses the following "type of duty" categories:

- Injuries that occur while responding to or returning from emergency incidents
- Injuries at the Fire Ground (at the fire scene)
- Injuries at non-fire Emergencies (emergency incident that is not a "fire scene")
- Training
- Other on duty injuries (at the fire houses)

Table 2 documents that over the last five years approximately 39% of all MFD injuries have occurred at the Fire Ground, 22% at non-fire emergencies, and 27% performing other on duty activities.

Type of Duty	2000 # of injuries % of total	2001 # of injuries % of total	2002 # of injuries % of total	2003 # of injuries % of total	2004 # of injuries % of total
At the Fire Ground	311 40%	286 39%	288 40%	272 38%	284 39%
At Non-Fire Emergency	154 20%	174 23%	146 20%	178 25%	165 22%
Other on Duty	207 27%	206 28%	183 26%	191 27%	185 25%

Table 2

It is important to note that variations in the number of injuries at the Fire Ground may be a factor of the actual number of fires in the City, the location of fires and the type of structure (commercial vs residential or single vs multi-level). According to the US Fire Administration, injuries per fire are greater at apartment fires than at one-and two-family dwelling fires. Injuries per fire are also higher at non-residential structures and vacant and under construction properties

Over the last five years injuries at the Fire Ground have decreased from 311 in 2000 to 284 in 2004, or a 9% decrease. While the number and type of fires in the City over this review period may be a factor in this decrease, changes in equipment and safety practices pursued and implemented by the Fire Department may have also contributed to the decrease.

Non fire emergency injuries include EMS calls and HAZMAT responses. Approximately 22% of all the injuries in the last five years have occurred at non-fire emergencies. Over the last five years non-fire emergencies have increased from 154 in 2000 to 165 in 2004, or a 7% increase.

Other on duty injuries have represented approximately 27% of MFD's total injuries. These injuries have decreased over the five year review period by approximately 11% from 207 in 2000 to 185 in 2004.

Data from the National Fire Data Center, US Fire Administration, indicates that the proportion of injuries at the fire ground in Milwaukee is significantly less than the industry at 39% for the five year period in review compared to 51% reported in 1999 for the entire nation. The proportion of injuries occurring at non-fire emergencies and other on duty injuries at the Milwaukee Fire Department is greater than in the industry in general as presented below.

Type of Duty when Injured	Industry	MFD
Responding to/ returning from incident	7%	3.3%
At the Fireground	51%	39.2%
Non Fire Emergency	15%	22.2%
Training	9%	8.8%
Other on Duty	18%	26.5%

Table 3

Nature of Injuries

Table 4 reflects the categories of the most significant injuries in terms of volume within the Fire Department during the five year review period. Overexertion and strains occurring within all types of duty have accounted for approximately 66% of the total injuries. Wounds, Cuts and Bruises have accounted for 10.4% of the total injuries, and smoke or gas inhalations represent less than 2% of the total injuries.

Nature of Injury	2000	2001	2002	2003	2004
Overexertion and Strains	486 63%	491 66%	516 72%	466 65%	452 62%
Wounds, Cuts, Bruises	100 13%	33 4%	85 12%	93 13%	77 10%
Other	79 10%	104 14%	56 8%	102 14%	146 20%
Smoke or Gas Inhalation	35 4.5%	6 .8%	11 1.5%	9 1.3%	11 1.5%

Table 4

Injuries classified as "other" include eye injuries, food poisoning, exposures to blood and saliva, animal bites, hearing loss, rashes, dehydration, and allergic reactions. These types of injuries have accounted for approximately 13% of all the injuries within the Fire Department during the five year review period.

Preventable Injuries

Other on Duty Injuries include inspection and maintenance duties performed at the fire houses. From a worker's compensation perspective these are the injuries that may be considered to be more preventable than those occurring at fire scenes.

Table 5 indicates that approximately 63% of Other on Duty Injuries include overexertion and strains and approximately 17% stem from wounds, cuts, bleeding or bruises.

Other on Duty Injuries	2000	2001	2002	2003	2004
Overexertion and Strains	66%	64%	66%	63%	54%
Wounds, Cuts, Bruises	16%	16%	21%	16%	17%

Table 5

A more detailed analysis of other “on duty” injuries within the Milwaukee Fire Department within the last two years is presented below.

Activity when Injured	2003	2004
At the Fire House (burns, slips, cuts, falls)	4 injuries 2 weeks lost time \$1,788 in medical costs	11 injuries 12 weeks lost time \$4,634 in medical costs
Outside Activities (shoveling/removing snow/lawn maintenance)	2 injuries no lost time \$711 in medical costs	4 injuries 60 weeks lost time \$60,122 in medical costs
Exercising (Sports and work outs)	10 injuries 81 weeks lost time \$87,448 in medical costs	10 injuries 79 weeks lost time \$114,686 in medical costs
Step Injuries * (Mounting and dismounting)	20 injuries 207 weeks of lost time \$203,050 in medical costs	26 injuries 178 weeks of lost time \$134,425 in medical costs
Miscellaneous	12 injuries 12 weeks of lost time \$12,372 in medical costs	6 injuries 10 weeks of lost time \$10,418 in medical costs
Total Injuries	48	57
Total weeks of lost time	302	339
WC Costs	\$305,369	\$324,285
% of total WC exp	28%	17%

Table 6

* Some step injuries have occurred responding to fire emergencies or at the fire ground.

In 2003 there were a total of 48 *preventable injuries* that resulted in worker’s compensation expenditures of \$305,369. This amount represents 28% of the total worker’s compensation expenditures associated with injuries in the Fire Department for that year.

In 2004 there were a total of 57 *preventable injuries* that resulted in worker’s compensation expenditures of \$324,285. This amount represents 17% of the total worker’s compensation expenditures associated with injuries in the Fire Department for that year.

It is important to note that the total expenses paid for these preventable injuries include indemnity costs (lost wages, disability payments, and litigation expenses), medical costs (medical treatment, equipment and drugs) and adjustment costs (investigations, medical records, and independent medical evaluations). They however do not include costs associated with "injury pay" benefits granted to injured employees.

A total of 48 preventable injuries in 2003 represent 15.3% of MFD injuries resulting in lost workdays. A total of 57 preventable injuries in 2004 represent 17.5% of MFD injuries resulting in lost workdays.

Findings and Recommendations

A review of the number and type of injuries within the Milwaukee Fire Department over a five year period (2000-2004) revealed the following:

- The total number of injury claims has decreased by 5.4%.
- The average number of injuries resulting in lost work days during this five year period has remained relatively stable.
- The incidence rate has increased by 10%.
- The Fire Department's proportion of the City's overall worker's compensation expenditures has decreased by 6%.
- Worker Compensation claims paid on behalf of the Fire Department have increased by approximately 18%.
- Approximately 39% of all MFD injuries have occurred at the Fire Ground, 22% at non-fire emergencies, and 27% performing other on duty activities.
- Injuries at the Fire Ground have decreased by 9%.
- Injuries at non-fire emergencies account for 22% of all the injuries. These injuries have increased by 7%.
- Other "on duty injuries" have accounted for 27% of MFD's total injuries. These injuries have decreased by approximately 11%.
- Overexertion and strains injuries have accounted for approximately 66% of the total injuries.
- Wounds, Cuts and Bruises have accounted for 10.4% of the total injuries.
- Smoke or gas inhalations account for less than 2% of the total injuries.
- Worker's Compensation expenditures for "preventable injuries" have totaled over \$600,000 in 2003-2004. These types of injuries should be tracked and actively monitored by the Fire Department and the Worker's Compensation Division on a quarterly basis. It The Fire Department should also identify methods, procedures, or training interventions to effectively eliminate or minimize these injuries.

Audit recommendations issued by the City of Milwaukee Comptroller's Office in 1993 and 1999 and an evaluation of Light Duty Programs for the Fire Department conducted by students from LaFollete School of Public Affairs in 2002 clearly identified the need for the assignment of safety promotion and injury monitoring activities to an existing position in the Office of the Chief and strongly encouraged the Fire Department to pursue the implementation of a light/restricted duty program with the Milwaukee Firefighters Union.

While some injury monitoring and safety oversight initiatives have been assigned to the Assistant Fire Chief, it is important to recognize that the scope of those responsibilities has been limited to tracking and monitoring data and the status of injured employees after the injuries have occurred. The Department has developed a strong training and development program that has included mandatory training sessions in such areas as: firefighter safety, personal protective equipment & repair procedures, annual fit testing and medical evaluations for respirator use, apparatus safety, and EMS scene safety.

The Fire Department and the Department of Employee Relations agree that a more aggressive injury prevention program is needed to effectively reduce the overall number of injuries, worker's compensation expenditures and lost work days. Responsibility for such a program should be centralized and designated to a position with enough authority to be able to effectively:

- develop and implement safety measures and programs, including adequate data collection, tracking, and monitoring tools and methods;
- monitor the effectiveness of such initiatives;
- analyze injury trends, identify appropriate interventions, and work with Worker's Compensation staff to minimize preventable injuries and reduce the number of lost work days;
- identify industry specific best practices and develop recommendations for implementation;
- study the feasibility of implementing a fitness/wellness program to establish medical evaluation, fitness, rehabilitation and behavioral health protocols as developed by the Fire Service Joint Labor Management Wellness-Fitness Initiative and supported by the International Association of Firefighter Organization and the International Association of Fire Chiefs;
- pursue the implementation of a formal light/restricted duty program for injured employees aimed at expediting injured workers return to productive work and reducing lost workdays and lost work benefits.

The Fire Department has expressed a strong commitment to allocating the necessary resources to pursue and implement these recommendations and other health and safety initiatives. They have started work on identifying and developing recommendations for a light/restricted duty program and through the work of the Joint Labor Management Health and Safety Committee, goals and objectives are being established for a Fitness/Wellness Program. The attached communication from Deputy Chief Gary Miller outlines the work of the Committee.



Fire Department
Bureau of Instruction and Training

William Wentlandt
Chief
Mark A. Sain
Assistant Chief
Gary R. Miller
Deputy Chief

May 27, 2005

TO: Maria Monteagudo
Employee Relations Director
Department of Employee Relations

RE: MILWAUKEE FIRE DEPARTMENT HEALTH AND SAFETY COMMITTEE

The Milwaukee Fire Department has a joint labor management health and safety committee that meets on a regular basis to discuss safety related issues currently facing the department and its members. We also work towards creating a safer, healthier workplace and to minimize potential health related problems for our employees.

Our committee has most recently been working on developing a wellness program that models the IAFF / IAFC Fire Service Joint Labor Management Wellness - Fitness Initiative. We have just begun the research and are in the process of defining the goals and objectives our program should include.

With the cooperation of the H & S committee, the department has been able to implement a respiratory protection program that meets the criteria set forth by such regulatory agencies as OSHA, NIOSH and the NFPA. This program includes annual individual Fit Testing for our breathing apparatus as well as a confidential medical questionnaire that every member is required to complete and forward to our department doctor.

Department wide we have presented training on Health Awareness and Cancer Prevention during the months of March and April and are currently delivering a Nutritional Awareness training program to our members. Both programs are endorsed by the committee.

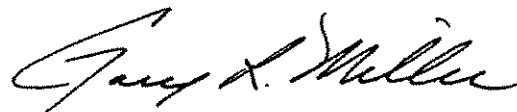
We meet on a monthly basis at various fire houses in order to more visible to the members and address immediate needs of particular companies. We ensure compliance with safety measures from both sides of the table. We hold the members accountable as well as the department to make sure safety issues are handled efficiently and effectively.

The committee is made up of ten members. Four management members with direct responsibility for training (me), equipment (DC Peter Putchinski), Emergency Medical Services (BC Pepie DuDeVoire) and the firefighting division (BC Brian Glassel) are standing members of the committee. Local 215 assigns four to six members of its executive board to the committee. These members may change depending on the results of the board elections. Currently, Captain Dan Berendt, Lt. James Nelson, Lt. Al Jansen, HEO Kevin Seymour, HEO Dean Gonzalez and FF Mike Torpy represent the union on the committee.

Health and Safety Committee's responsibilities are to review current health and safety issues relative to the Milwaukee Fire Department, its firefighters and paramedics and to make recommendation to the department regarding issues of concern. The Committee also evaluates injuries in the workplace, coordinate safety programs, make recommendations relative to safety equipment, works with Local 215 for information disbursement and work on special assignments for the Chief.

Thank you for asking about our committee. It is something we are all very passionate about. If you are interested in whom we are or what we do or why we do it, please consider this an invitation to attend our next meeting. It will be held at Engine 4 by Timmermann Field (9511 W. Appleton Ave.) at 0900 hours on June 20th.

Respectfully Submitted;



Gary R. Miller
Deputy Chief - Training Academy
Health and Safety Committee - Chair

**Analysis of Milwaukee Police Department Injuries
For the Period 2000-2004
Prepared By: Department of Employee Relations**

Injury Claims

The number of injury claims in the Milwaukee Police Department (MPD) has decreased over the last five years by approximately 21% from 970 in 2000 to 768 in 2004. The average number of claims during this period is 912 with the greatest number of claims reported in 2001 and 2003.

Category	2000	2001	2002	2003	2004
Total Claims	970	1039	864	917	768

OSHA Recordable Cases

Recordable cases are claims that result in lost workdays, industrial illnesses, fatalities, or incidents that require treatment by a health care provider. A review of the number of OSHA recordable cases during the five year review period, reveals that there were significant increases in cases in 2001 and again in 2003. In 2003, there was an increase of 27 additional injuries and 55 additional illnesses reported by the department as compared to 2002. The high increase in the number of illnesses represented multiple TB exposures by more than one police officer.

MPD's recordable cases account for approximately 25% of the total number of recordable cases in the City during this five year period. While City-wide recordable cases have increased by approximately 4.4% from 1,089 in 2000 to 1,137 in 2004, the number of recordable cases within the Police Department in 2000 and 2004 is almost identical.

Category	2000	2001	2002	2003	2004
# of Recordable Cases	259	298	250	332	258

Incidence Rate

The incidence rate is an indicator of the rate at which workplace accidents are occurring within a department. While the City's incidence rate has increased by approximately 11% during the review period, MPD's rate has remained relatively stable at 11.53 in 2000 and 11.43 in 2004. The incidence rate for the Police Department is significantly below the Fire Department's rate as presented below.

Incidence Rate	2000	2001	2002	2003	2004
Police	11.53	13.54	10.96	14.30	11.43
Fire	23.74	22.73	25.09	26.47	26.30
City	15.13	15.16	15.13	16.52	16.80

Lost Workdays

Lost workdays represent days away from work that an injured employee could have worked but was not able to because of a work related injury or illness. In January of 2002 there was a change in the recording guidelines for counting days that shifted the requirement to counting "calendar days" instead of "workdays". For purposes of this analysis it is therefore necessary to compare the number of lost workdays in 2004 to 2002 instead of 2000.

The number of lost workdays since 2002 has increase by 9.2% from 3,599 in 2002 to 3,931 in 2004. This increase in lost work days given the relative stability in the number of recordable cases and the incidence rate within the Police Department may be an indication that the injuries that are occurring are more serious delaying employee's return to light duty or full duty assignments.

Category	2000	2001	2002	2003	2004
Lost Workdays	2,087	3,247	3,599	4,474	3,931

Type of Duty/Nature of Injury

The Milwaukee Police Department tracks workplace injury claims using the following categories:

- Duty Hazard: strains, sprains, fractures, hearing loss, lacerations, contusions, stress, scrapes, cuts, etc.
- Accident: auto, squad, and pedestrian accidents.
- Exposure: contacts with blood, saliva, drugs and communicable diseases.
- Assaults: intentional injuries to officer with or without instruments, dog bites, spitting, and others.

The following table summarizes the number of injury claims by category.

Type of Duty when Injury Occurred	2000	2001	2002	2003	2004
Duty Hazard	626 64%	758 73%	583 67%	571 62%	546 71%
Accident	75 7.7%	85 8%	76 8.7%	68 7.4%	60 7.8%
Exposure	97 10%	87 8%	69 7.9%	108 11.7%	44 5.7%
Assaults	172 17.7%	109 10.4%	136 15.7%	170 18.5%	118 15.3%

Over the five year review period “duty hazard” injuries have accounted for approximately 67% of the total claims. However, it is important to note that since 2000 these of injuries have decreased significantly by 13% from 626 to 546 in 2004.

The second highest category of injuries stem from “assaults”. These injuries have accounted for approximately 15.5% of the total injuries. These injuries have also decreased significantly (31%) over the review period from 172 in 2000 to 118 in 2004.

The majority of injuries to MPD personnel involve injuries to upper and lower extremities. In 2003 these injuries accounted for 45% of the total claims and in 2004 they represented 49% of the total claims. Back and shoulder type of injuries represent between 11% and 14% of the total injuries.

Nature of Injury	2003	2004
Legs, Knees, Ankle, Foot	256 (28%)	195 (25%)
Arms, Wrists, Hands, Elbows	156 (17%)	181 (24%)
Back/Shoulder	130 (14%)	86 (11%)

MPD’s Limited Duty Program

MPD’s Limited Duty Program was implemented in 1987 with the objective to provide officers incapable of unrestricted duty an opportunity to continue making a positive contribution to departmental operations.

MPD’s Policy states: “the department recognizes that some officers due to illness, injury, pregnancy, or other health related problems might be either temporarily or permanently rendered incapable of performing the full spectrum of law enforcement activities. A major consideration of the Program is the officer’s welfare. All limited duty assignments are structured to be consistent with the officer’s medical restrictions”.

Limited Duty assignments are found throughout the entire Police Department. Administrative and support positions in such areas as the Communications, Identification, and Central Records Divisions are designated as limited duty assignments. The Program is administered by an Administrative Lieutenant of Police and office support personnel.

There are 147 members of the Police Department on limited duty status for various medical conditions occurring on and off the job. 93% of those on limited duty status are sworn and 47% have permanent restrictions.

The following table summarizes the total number of limited duty days used by members for on duty injuries during the five year review period.

Job Transfer/Restricted Days	2000	2001	2002	2003	2004
Total Days	795	751	1728	1967	1822

Without the availability of limited duty assignments within the Police, restricted days would have become lost workdays. This would have resulted in higher lost time benefits.

MPD indicates that the limited duty program has been beneficial to members in allowing a faster return to work. The program provides an opportunity to members to return to work assignments that are consistent with their restrictions while recuperating from their injuries.

Limited Duty Program participants are required to provide medical updates to the Medical Section staff every six months. This section is responsible for maintaining medical information, monitoring return to duty information, and providing and coordinating limited duty status when applicable.

Findings and Recommendations

An injury analysis review of the Milwaukee Police Department over a five year period (2000 – 2004) reveals the following:

- The number of injury claims in the Police Department have decreased over the last five years by approximately 21%.
- The number of recordable cases in 2000 and 2004 is almost identical while the number of recordable cases City-wide has increased by approximately 4.4%.
- MPD's incidence rate has remained relatively stable at 11.53 in 2000 and 11.43 in 2004. The incidence rate for the Police Department is significantly below the Fire Department's rate.
- "Duty hazard" injuries have accounted for approximately 67% of the total claims. Since 2000 these injuries have decreased by 13%.
- The second highest category of injuries stem from "assaults". These injuries have accounted for approximately 15.5% of the total injuries. These injuries have decreased significantly (31%).
- The majority of injuries to MPD personnel involve injuries to upper and lower extremities. In 2003 these injuries accounted for 45% of the total claims and in 2004 they represented 49% of the total claims.
- Back and shoulder type of injuries represent between 11% and 14% of the total injuries.

While MPD's Limited Duty Program has provided early return to work options for injured employees, it is important to recognize that there are some challenges associated with the current set up as described below:

1. Employees, assigned to limited duty, based on permanent restrictions may remain in the program indefinitely. Critical protective services positions may be tied up by individuals capable of performing restricted duty only on an indefinitely or permanent basis. A project oriented light duty program should be explored as it would clearly establish a set duration and objectives.
2. A formal light duty program should establish clear eligibility requirements and reaffirm the temporary nature and duration of assignments within such a program. Its primary purpose must be to help expedite and foster recovery of employees who suffer work related injuries and reduce lost time benefits.
3. Participation in a light duty program should be directly tied to the employee's "healing period". Once the employee reaches an end of healing a decision must be made as to whether the employee is able to perform his/her job within restrictions, whether there are any reasonable accommodations available, or whether there are any other positions that the employee can perform.
4. Employees who are permanently displaced as a result of a work injury should be able to secure additional job placement opportunities within the City of Milwaukee or through a vocational rehabilitation services agency. The availability of such services is critical in order to reduce financial liability associated with not being able to re-employ such individuals.

These challenges must be reviewed in relation to requirements under the American Disabilities Act, the Worker's Compensation Act, the Family and Medical Leave Act and the Wisconsin Fair Employment Act. Preliminary discussions associated with these challenges have been held with Police Department representatives. We look forward to working with MPD in addressing these challenges and fulfill our obligations under state and federal laws.