



## HEALTH & SAFETY POLICY RECOMMENDATION

### Problem

Virginia Tech's total recordable illness and injury rate (TRIR) remains substantially above that of the academic peer group. Virginia Tech has instituted Health & Policy 1005, which applies to all members of the Virginia Tech community. Execution of this policy is primarily the responsibility of the Office of Environmental Health & Safety. The purpose of the policy is to "prevent accidents, illnesses and injuries; increase safety awareness; meet requirements of environmental, occupational health, and safety laws and regulations; reduce institutional liability; and establish safety responsibilities for members of the university community and visitors to university-owned or occupied property."

### Effects

- Virginia Tech's costs, in the form of direct medical expenses, medical indemnity payments, and workers compensation are increasing annually.
- Injury and illness place academic and research contributions, as well as institutional knowledge, at risk.
- There continue to be high-profile injuries and fatalities at the university, including the death of a contractor at Cassell Coliseum and a farm worker at a remote agricultural facility.

### Solutions

Criteria for determining whether the policy is effective were created after a review of the current policy. Specifically, the policy should be (1) raising awareness and creating a culture of safety, (2) enabling internal and external cooperative efforts in safety, (3) mitigating hazards and minimizing risks, and (4) developing personal and departmental responsibility for safety. From those criteria, four alternatives were developed:

- Continue the existing policy, which centralizes many (but not all) safety functions within VT EHS;
- Fully decentralize safety functions, placing them at the lowest possible levels of supervision (such as department heads);
- Limited decentralization, placing safety responsibilities at the major functional group level; and
- Fully centralize all safety functions within VT EHS.

***After analysis, we recommend that the policy and the means through which the policy is executed remain unchanged.***



Criteria	Plan 1 No Change	Plan 2 Fully Decentralized	Plan 3 Partly Decentralized	Plan 4 Fully Centralized
Awareness	6	10	10	4
Cooperation	5	10	10	5
Mitigation	7	12	7	4
Responsibility	10	12	4	4
<b>Total</b>	<b>28</b>	<b>44</b>	<b>31</b>	<b>17</b>

In addition to assessing the strengths and weaknesses of each alternative, a full cost-benefit analysis was performed. Even though the criteria-alternatives matrix shows that full centralization provides the best activation of the policy, that option is not feasible in the current budgetary climate.

**No Change:** Cost-benefit remains both known and stable. Less opportunity to see major increases in safety or reduction in costs. Less variability in outcomes.

**Fully Decentralized:** Decreased cost in the short term dramatically but the most opportunity for increased costs long-term. Safety culture would also be reliant on line supervisors, who are historically susceptible to management or budgetary pressures and may ignore safety in lieu of short-term objectives.

**Partial Decentralization:** Equivalent cost in the short-term with increased variability in costs over mid- and long-term. Although less susceptible to management or budgetary pressures than full decentralization, safety would be competing within the unit for resources.

**Full Centralization:** Highest footprint in short, mid- and long-term costs; significantly higher than current operating budget. There could be a reduction in cooperation as departments lose their current liaisons.

## Threats

- Increasing enrollment and staffing levels, as well as changes in the research profile, can have a dramatic impact on the university’s risk profile. A lack of illnesses or injuries is not evidence of safety / safe work practices.
- Regulatory compliance is not evidence of safety / safe work practices.
- Budgetary concerns may limit VT EHS’ resources; the group is currently at the organization’s carrying capacity. Increases in enrollment or research must be matched by equivalent increases to EHS to maintain current service levels.
- Federal and state inspection processes provide EHS with significant leverage to achieve compliance; changes in external organizations and their inspection processes may leave EHS with less ability to create change when necessary.