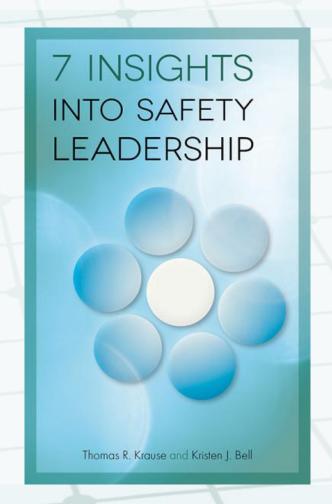
7 Insights into Safety Leadership

CWEA – November 5, 2020



7 Insights into Safety Leadership

- 1. Safety as a core value and strategy.
- 2. Start with attention to serious injuries and fatalities.
- 3. Leadership sets safety improvement in motion.
- 4. Culture sustains performance for better or for worse.
- 5. Understanding core safety concepts.
- 6. Understanding the role of behavior in safety.
- 7. Cognitive bias affects safety decisions.





Safety Leads Business Performance

"If you want to understand how Alcoa is doing, you need to look at our workplace safety figures."

- Paul O'Neill





Research Basis

Safety Leadership Engaging People in Improvement Mechanisms

Less Risk, Better Culture

Sustained Performance

Safety, Productivity, Quality

- Product Quality
- Service Quality
- Workgroup Efficiency
- Workgroup Performance
- Customer Satisfaction
- Safety Performance

Employee Engagement

- Turnover Intention
- Absenteeism
- Organizational Citizenship
- Individual Job Performance



Polling Question

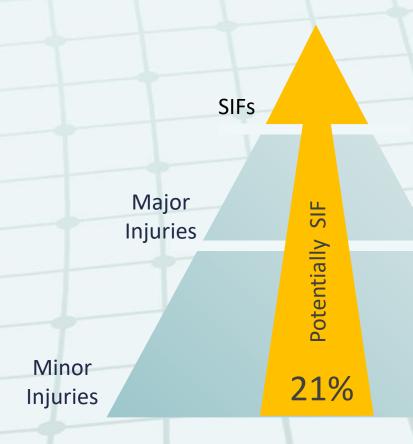
On a scale from 1 - 5 ...

To what extent would you say your organization currently has a "Leading with Safety" business strategy?



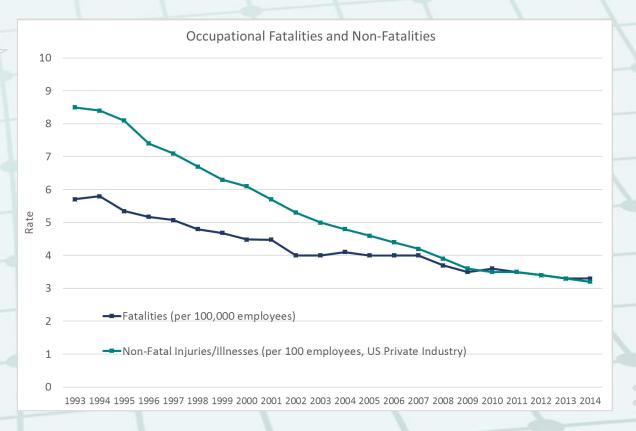


Focus on Serious Injuries and Fatalities (SIF)





Occupational Fatalities and Non-Fatalities from 1993 to 2014









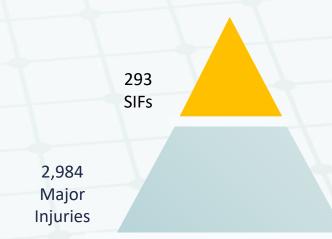
Question

1

Is the Heinrich triangle accurate descriptively?



The traditional
Heinrich triangle is
accurate descriptively.



12,791 Minor Injuries

> This triangle represents the data from six organizations between 2008-2009



Question 2

Is the Heinrich triangle accurate predictively?

 Do less serious injuries have similar or different potential to be SIF's?

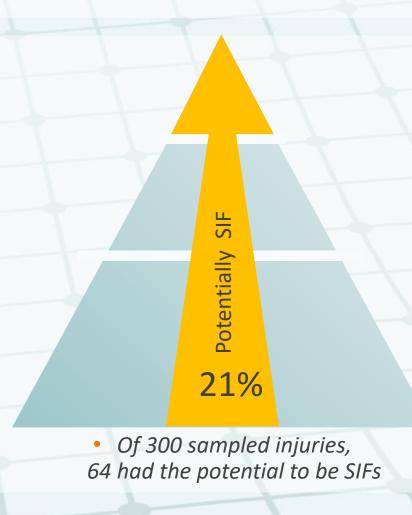
 Do SIF's have different kinds of characteristics and causes than less serious injuries?





The traditional Heinrich triangle is not accurate predictively:

- Not all injuries have SIF potential
- A reduction of injuries at the bottom of the triangle does not correspond to an equivalent reduction of SIFs





Illustration

A. Carpenter smashes his thumb with a hammer and sustains a deep cut requiring 8 stitches.

B. Carpenter's thumb contacts a hand grinder and sustains a deep cut requiring 8 stitches.

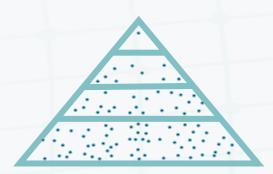


- "Potential" Which of these situations had greater potential to affect the carpenter for the rest of his life?
- "Different Causes" What is the difference in the situations?



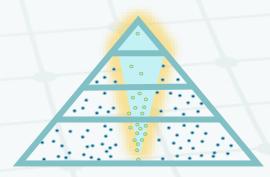
The New View

Traditional



- Works from the bottom-up
- Prioritizes based on recordability
- Misses valuable information about SIF exposure
- Allows SIF exposure to accumulate

New



- Works from the inside-out
- Utilizes SIF potential events to uncover valuable information
- Prioritizes based on risk
- Boosts leader credibility

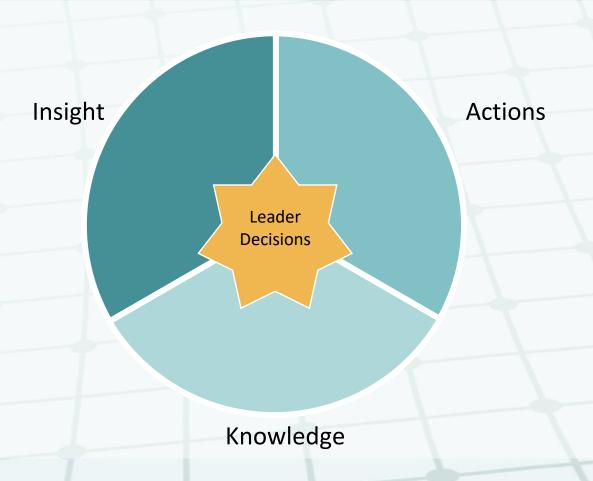


Top 5 Takeaways from our 2010 SIF Study

- Frequency and severity are inversely correlated
- Single events are meaningful and contain crucial information.
- Reducing recordable injuries does not assure reducing SIFs; and reducing SIFs does not assure reducing other injuries.
- SIFs have identifiable precursors.
- SIF reduction is likely to follow a systematic concerted effort by leadership to re-focus the organization's attention and systems and build capability to reduce SIF exposure.



Leadership Sets Improvement in Motion





Insights 1+2+3 Leading for SIF Prevention





SIF Maturity Model



Foundational Elements:

Core Understanding

- Core Understanding 2010 SIF Study; Why a special focus on SIF prevention is needed
- Measurement Establish SIF-A and SIF-P rates; establish leading
- Decision Making Strategically selecting a set of decisions
- Safety Leadership Elements:
 - s, establish defin tions Alignment – Calibrate foundational elements at all,
 - Leading the Paradigm Shift Communicating why prevention is needed and creating buy-in to the cleading SIF Prevention Integrating SIF concepts begial fogus
 - Decision leadership Making Helping all levels of leade hip identify how their changes
- Risk Reduction Elements
 - pensurate with SIF potential **Learning from Incidents** Improve learning process &
 - Responding to Precursors Proactively identifying 多何 ating precursors within each leader's sphere of influence and control
 - Systems Integration Integrating SIF concepts and approaches in mechanisms Measurement

SIF System Integration - SIF concepts are used in / applied to / reflected in:

- from Business planning Incidents improvement strategies
 - Incident investigations
 - Field visits
 - Safety observations
 - Rask case is sments
 - to acidicies arequipment design
 - Safety leadership fraining
 - **Metrics**
 - Leadership communications
 - Culture it's part of the common language

System Surchasing

Integrationsk management



Polling Question

On a scale from 1 - 5 ...

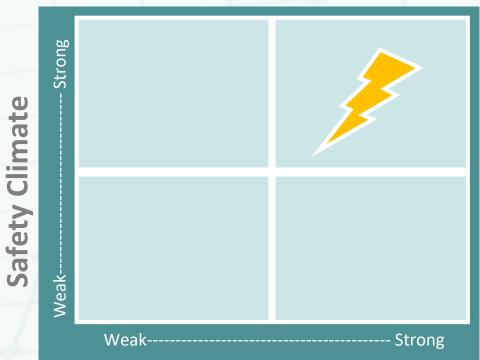
To what extent would you say your organization currently has the appropriate focus and resources on preventing serious & fatal injuries (SIF's)?





Culture Sustains Improvement

The culture you want is the one that unlocks discretionary energy



"Human beings have discretionary energy which they can give or not give. They give it to you if you treat them with dignity and respect."

— Paul O'Neill





What type of culture do we need?



Strong Safety Climate

- Healthy communication channels: up, down & across
- Senior leaders' value for safety "gets through" to people on the front lines
- Exposure to risk at the front lines is "visible" to senior leaders

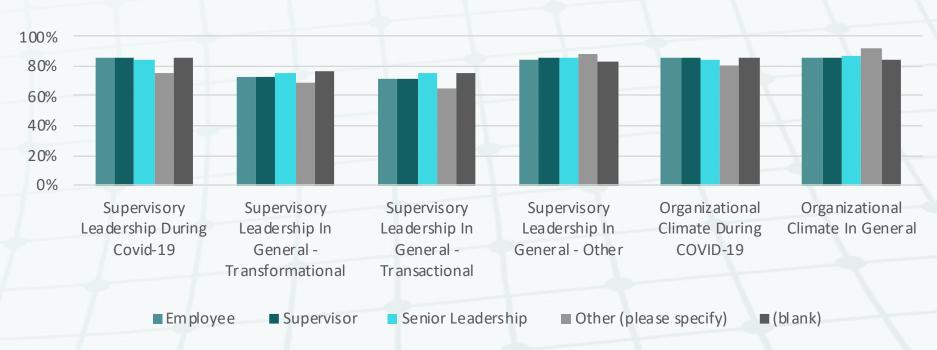
Strong Organizational Climate

- Co-workers trust and respect each other
- Workers and supervisors have mutual trust & respect
- There is trust in management



Assessing your Culture & Leadership



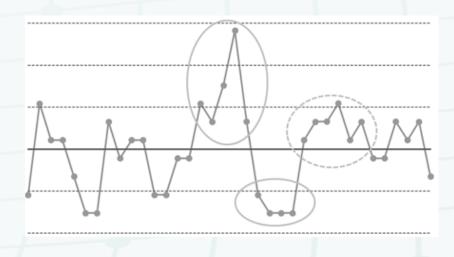


^{*}This visual displays the percent of people within each role who responded in agreement with a topic, overall.



Leaders Need To Understand Safety Fundamentals

Understanding Variation



Understanding Injury Causation





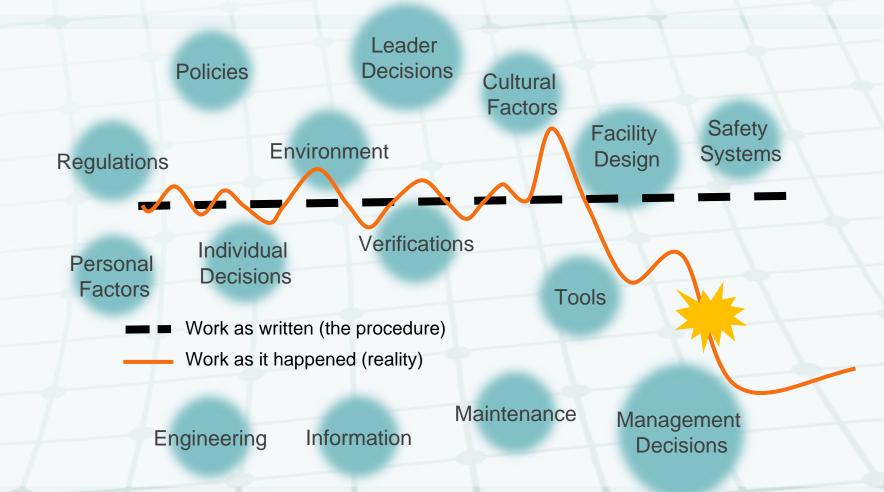
Leaders Need To Understand Safety Fundamentals

- Leaders who understand this insight show evidence of understanding general concepts
 - Systems views vs. Singular views
 - Standards & Management Systems,
 - Role clarity & Accountability
 - Best practice sharing & innovation

 In addition to general concepts, leaders need to understand the specific, evidence-based mechanisms of safety improvement.



A Systems View of Causation





Behavior ...

A different role than most expect.

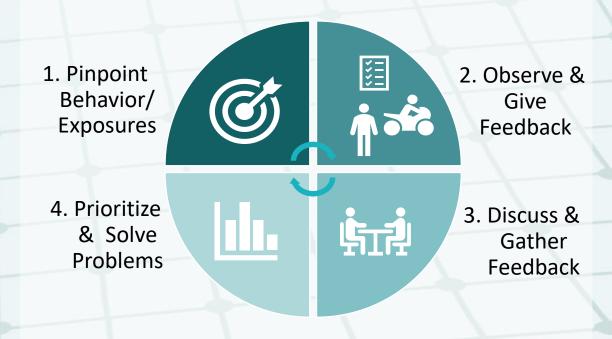




Understanding the Role of Behavior in Safety

BEHAVIOR...

A different role than most expect





Polling Question

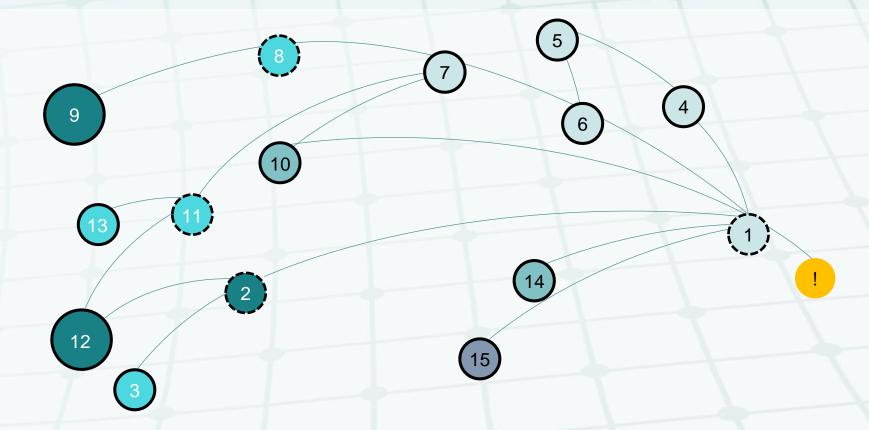
On a scale from 1 - 5 ...

To what extent would you say your organization currently views behavioral contributions to injuries?





Insight 7 Cognitive Bias Affects Safe Decision Making™





The 2015 Safe Decision Making[™] Study

In 2015, six companies set out to explore decision making as a strategy for accelerating safety performance improvement.

. Safe Decision Making™ is a trademark of Krause Bell Group.



Each company contributed data from fatal and life altering events

- ►Investigation reports
- Interview transcripts
- ► Live interviews



Ten additional, deeply investigated SIFs from CMA, NASA, MSHA, and DOE



Incidents from 16 organizations, 60 total incidents, 600+ decisions



Phase 1 of the study took 11 months and averaged 30 hours per case

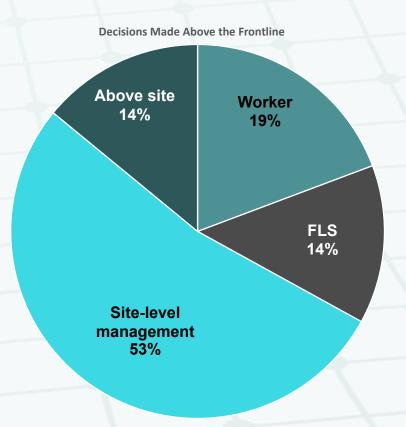


Managerial Decisions Have Leverage

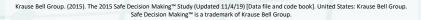
A decision is defined as a choice between alternatives.

- We believe decisions are connected and everyone makes decisions that impact safety
- The key to improving safety is to figure out which ones have the greatest leverage

 64% of decisions were made above the front line



Updated 11/4/19 - 612 Decisions



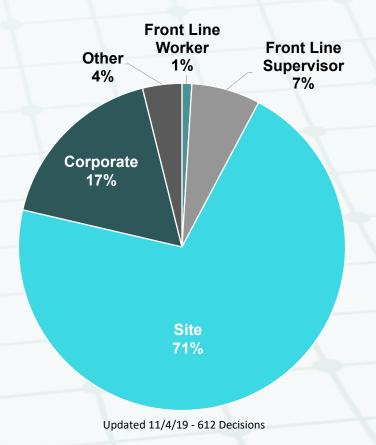


Pivotal Decisions Have *More* Leverage

A pivotal decision is defined as a significant opportunity to change the course of events. It can:

- Set the stage for a series of other decisions
- Create the circumstances surrounding the incident
- Pre-determine, anchor, or set defaults for subsequent decision(s)

 92% of pivotal decisions were made above the front line



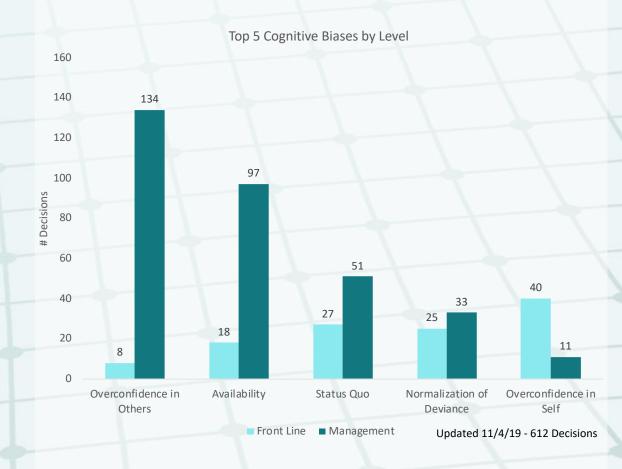
Krause Bell Group. (2015). The 2015 Safe Decision Making™ Study (Updated 11/4/19) [Data file and code book]. United States: Krause Bell Group.

Safe Decision Making™ is a trademark of Krause Bell Group.



85% of the Decisions had Opportunity for Bias

Cognitive bias is defined as a systematic deviation from rational judgement

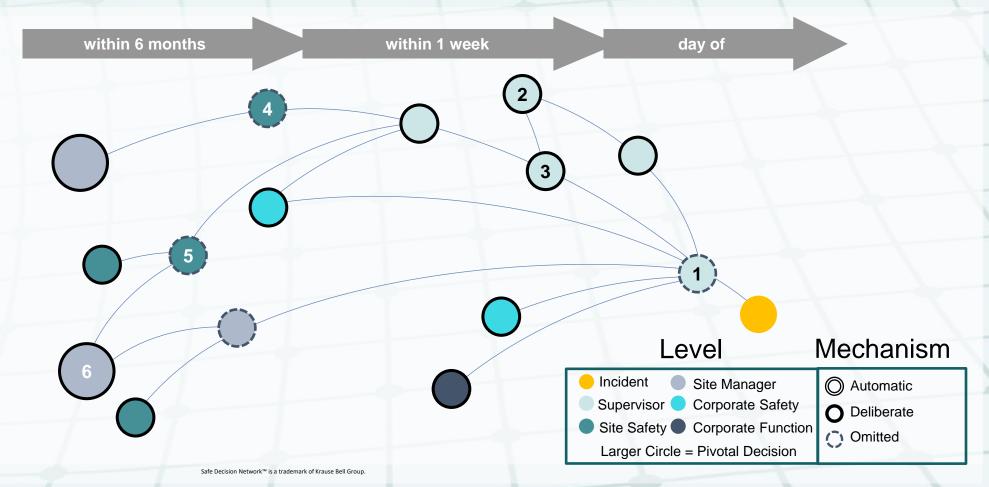


Krause Bell Group. (2015). The 2015 Safe Decision Making™ Study (Updated 11/4/19) [Data file and code book]. United States: Krause Bell Group Safe Decision Making™ is a trademark of Krause Bell Group.



Decision Network Diagram

A set of interrelated decisions across time

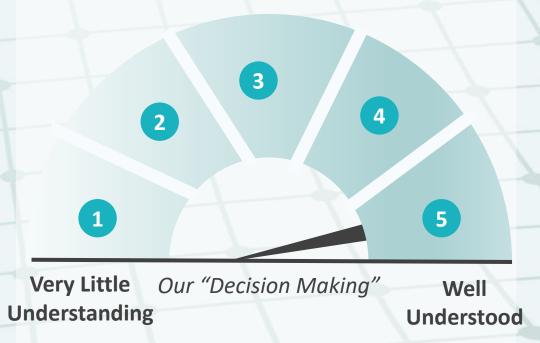




Polling Question

On a scale from 1 - 5 ...

To what extent would you say your organization currently understands how decision making at every level and timeframe influences safety events?





7 Insights into Safety Leadership

CWEA – November 5, 2020

Thank You for Participating!

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