SafeSupervisor Newsletter

Your front-line manager safety resource since 1929

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This Month's Highlights

This issue explores practical ways to strengthen workplace safety, from building an effective ergonomics training game plan to understanding how front-line supervisors set the tone for safer workplaces. Read more highlights inside, and visit ilt.safetynow.com to view the full articles.

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Ergonomics

Ergonomics Training Game Plan

Musculoskeletal disorders (MSDs), also known as repetitive strain injuries (RSIs) or ergonomic injuries, are the leading cause of lost-time work injuries and workers' compensation claims.

Here's a script you can use to deliver effective training to your workers on MSD hazards and how to prevent them.

Get Workers' Attention

Start out by telling workers that MSDs don't end lives; they just destroy them. Explain that MSDs are more severe than normal work injuries because they can:

- Disable you.
- Inflict horrible pain that lasts the rest of your life.
- Make it impossible for you to ever work again; and
- Destroy your ability to do even simple things like walk, grip a steering wheel, brush your teeth, or hold a spoon.

Make It Real

Explain that MSDs often lead to crushing poverty, depression, and even suicide. Share some of the heartbreaking stories of real-life victims. Better yet, let the victims tell their own stories in their own words.

Explain What MSDs Are

Having set the tone, explain what MSDs actually are. Tell workers that the things they do at work every day, like lifting objects, reaching up to stack an object and squeezing the handle of a tool, put a strain on muscles, nerves, bones, joints, back, shoulders and limbs.

Working these body parts too hard or in the wrong way can cause serious damage and result in chronic back pain, carpal tunnel syndrome, strains, sprains, and other MSDs.

Explain How MSDs Happen

Explain that MSDs can be either traumatic or cumulative.

Traumatic injuries happen in a single incident, like wrenching your back when lifting a heavy object.

Cumulative MSDs sneak up on you because they build up gradually as a result of repeated stress over a period of time, like back injuries from lifting heavy objects day after day for 10 years.

Describe the 3 Risk Factors of MSDs

Tell workers that their risk of getting an MSD depends on three sets of risk factors:

1. General risk factors include:

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- Duration—how long exposure to a strain or stress last.
- Frequency—how often you're exposed; and
- Intensity—how much the exposure strains your body while it lasts.

2. Job-related risk factors are associated with performing certain jobs or tasks, including:

- Lifting and moving heavy or bulky objects.
- Reaching above, below, or across your body.
- Prolonged squatting, kneeling, or standing.
- Repetition—doing the same physical task over and over again over a consecutive period.
- Tightly gripping tools or other objects.
- Contact stress—tasks that involve physical contact with hard objects or edges.
- Vibration; and
- Working in the cold.

3. Individual risk factors are physical characteristics that can make a person less capable of withstanding strains and thus more vulnerable to MSDs, such as being over age 45; female; out of shape; overweight; a smoker; or on certain kinds of medications.

Explain How to Control MSD Hazards

Describe the measures your company uses to protect workers from MSD risks, including:

- Engineering controls like lifting devices, ergonomically designed tools or work stations, etc.
- Administrative or work controls like safe work procedures such as for lifting heavy objects, rotating workers in and out of high-risk tasks to prevent continuous exposure, regular rest, and recovery breaks, etc.; and
- PPE and safety equipment like anti-vibration gloves or mats, wrist rests on computer keyboards, etc.

Describe the Warning Signs of MSDs

Make sure workers recognize that MSDs can sneak up on them and describe the signs and symptoms they should look for.

Some signs include:

- Aching joints or muscles.
- Muscle weakness.
- Fatigue.
- Tingling or numbness in fingers, toes, hands or feet.
- Swelling, inflammation or redness.
- Stiffness or difficulty moving.
- Inability to use hands or wrists to do certain basic things.
- Burning sensation.
- Stabbing or shooting pain, especially at night; and
- Reduced grip strength.

Tell Them What to Do If They Have MSD Symptoms

Tell workers to immediately notify their supervisor or manager if they experience any of the above signs or symptoms. Explain that early diagnosis and treatment are crucial when dealing with MSDs and that waiting often makes the injury much worse. Reassure them that their complaints will be investigated and that they won't suffer any kind of punishment or reprisal for bringing them.

Special Report

The Avoidable Death of Michael Wagner



The world of human resources, occupational health and safety (OHS), and workplace management is full of policies, paperwork, and procedures that require great attention to detail while also maintaining empathy for every worker on the job. This often requires you to sacrifice one for the other - crunching numbers and reviewing time-off requests may drain your mental and emotional capacity to fully address the complex inner workings of your employees' wellness on and off the worksite. However, a recent story shared by the New York Times highlights why every worker and every case deserves your undivided attention. Compliance and diligence are professional duties. Compassion is something that you, as an employer, should practice every day. In doing so, you may be saving someone's life.

Michael Wagner's Tragic End

When Brittany Wagner's father, Michael Wagner, committed suicide, he left her and her sister, Jacilyn, no fewer than 694 videos detailing his battle with workers' compensation, employment laws, and dismissal that led to his demise. He had been recording these videos in secret to document his struggle with government programs that are supposed to help workers who are injured on the job. Michael began his battle with workers' compensation on May 2, 2000, after suffering a debilitating injury on an Ohio job site. Since his death on February 10, 2018 - one week before his 58th birthday - Brittany has worked tirelessly, raising money and bringing a documentary to life to prevent fatalities like her father's – fatalities entirely preventable in a working, just system.

Born one of ten children in Cincinnati, Ohio, Michael Wagner came from a humble upbringing and worked as a carpenter. "I was a strong worker, paying my taxes and supporting my girls. When I was happy and successful, I was on top of the world. I was on the beam crew, and they put me on a 66-foot telescoping man lift. The lift had been making noises but we were told we had to use it, so me and the other guy got in it. It popped and we just dropped."

What makes Michael's case so complex is that he didn't break any bones. He didn't even walk away with a bruise or cut on his body. Test after test came back negative for any external or internal damage – and when a worker looks "able to work", they are typically expected to work. Unfortunately, Michael was in constant, horrific pain. Full-body stabbing, needles in

hands and feet “like my flesh is being ripped off of my bones” was haunting him 24/7. However, it wasn’t the physical pain that killed him – it was the battle he endured for a decade to be seen and accommodated as a disabled worker.

Michael applied for workers’ compensation to cover his medical expenses and lost wages while he attempted to recover and figure out the cause of his tremendous suffering. While he waited for his claim to be processed, he went back to work. “I didn’t want to lose my job. I was a single parent. But my employer challenged the claim – they lied and said I never told them that my back was hurting. They accused me of faking my own injuries simply because I returned to work after the accident. I was penalized for trying to tough it out.” Described by Brittany as “destitute from day one”, Michael didn’t have the luxury to rest and recover, so his health and autonomy was a ticking time bomb. He hired a lawyer to fight back.

Michael never stopped his effort to change the way the system processed and accepted claims – even writing letters to governors and the president, stating that “workers should not have to make a choice between paying for medical treatments and being able to eat.” Michael saw more than 20 doctors to assess his ailments from all areas of expertise. He was eventually diagnosed with chronic pain syndrome and deterioration in the discs of his spine. He had two major back surgeries, but he still kept working.

There was one last beacon of hope for Michael – medical marijuana. He was first prescribed opioids but he disliked how they “made him feel like a zombie”, whereas marijuana eased his pain. Even though medical marijuana had recently been legalized in Ohio, actually smoking it was still considered a sign of opioid abuse. The irony was not lost on Michael when the marijuana he was consuming to avoid abusing opioids showed up on a drug test during a routine medical check-up and his doctor dropped him as a patient. “The only thing that helped me feel like I wasn’t dying was the marijuana. I just wanted to feel like myself again, and the government punished me for it.” Michael managed 40 phone calls to find his last pain management doctor, 10 years of pain and denial, and two young girls raised with periodic help from his family until he could not endure any longer. Some may see his ending as the ultimate surrender, when truly the one thing Michael refused to do was give up. That same resilience now lives on through his daughter, who continues his fight to right the wrongs he faced.

“Maybe part of my story will help shed light on things that need to be addressed. This struggle cannot be for nothing,” he says in his final video. If workers’ compensation was easier to access and properly funded – and if its difficult application process and numerous cases were taken seriously – Michael’s life could have been saved. No worker should have to choose between tending to their own health or making a living. There has recently been a proposed bill by Senator Blessing in Ohio, the state in which Michael lived and died, where paid leave is guaranteed for workers dealing with medical issues or family responsibilities. This legislation would have been life-changing for Michael, even though it does not address the hoops he had to jump through and hardships he had to endure.

When speaking with Brittany, I see Michael’s fortitude and humour in her. Even at the most somber moments, she finds a way to laugh. Reminiscing over her dad’s innate tenderness, unrelenting tenacity as a worker, and his unique way of nurturing, she says with a smile, “He was a big, brash teddy bear of a

man, honestly. He was a single parent who raised my sister and I, giving us a fun, colorful upbringing in ways that adult me cherishes. He had a perpetual mindset of never wanting us to do without, and even when he was in the throes of terrible pain and gruelling shifts, he made us a hot breakfast every morning before school. And knew everyone at Kroger by name. The guy who wasn't afraid to embarrass me, picking me up from sleepovers blasting Barry White with his shirt off, yelling "Ándale! Ándale!" He made every weekend special before we were "too cool" for it. My father was complicated and contradictory and completely, unapologetically himself. And he always showed up when it mattered. He was a friendly face to everyone always and despite everything, he always tried to lend a hand."

Where Workers' Compensation & Employers Failed

Before workers' compensation was implemented decades ago, workers were stuck paying their own medical bills and looking for other sources of income if they were too injured to work. Those with the conviction and resources to even attempt to sue their employer typically lost in court. President Theodore Roosevelt implemented state safety nets, making it compulsory for companies to pay for workers' compensation. Initially, many workplaces supported this effort as it eliminated employee lawsuits seeking damages for work injuries.

Eventually, states began undermining the importance of workers' compensation – reducing benefits and denying claims in gargantuan numbers. This made things cheaper for employers, but hell for employees. In one video, Michael states: "You come home and pass out from exhaustion, get two to three hours of sleep, and do it all over again the next day. I was crying putting my socks on because I was in so much pain, but I had no choice. You are on your own out there as a worker."

A Story We've Heard Before

As you can see, Michael's case is unfortunately not an anomaly. A 2019 study from New Mexico examined 100,806 workers' compensation claimants whose injuries occurred between 1994 and 2000. Researchers linked their compensation records to mortality data for as long as 20 years. Workers whose injuries were serious enough to result in lost-time benefits had a substantially high suicide mortality rate. Washington State research has published findings that workers with lost-time injuries that caused mental distress had a higher suicide mortality rate than workers with medical-only injuries: 49% higher among men and 30% higher among women. Of all U.S. suicide deaths from 2003-2014, 8.8% were committed by individuals who were living with chronic pain.

Closing Thoughts

No matter your view on social assistance, welfare, and disability benefits, the point is plain to see that all of this could have been avoided if Michael the worker was seen as Michael the human being – if his pain, the love he held for his job, and the inciting injury were taken seriously and accommodated accordingly. Michael Wagner was a worker every employer dreams of – he followed the rules, he loved what he did, and he worked through astounding pain to continue serving his community.

You can donate to the production of Brittany's documentary, "One of Many", to spread awareness about gaps in the system and how employers can do better by clicking this link.

Fatality Files

Pregnant Workers & Return-to-Work: Unique Hazards and Protections

What Happened - In an eight-month period in 1981, five of seven pregnancies among employees of the Immunology Branch at the Centers for Disease Control in Atlanta — or among spouses of male employees in the same department — ended in spontaneous first-trimester abortions. The concentration of losses within a single workplace triggered a formal NIOSH Health Hazard Evaluation. Investigators found that of more than 180 chemicals in use at the laboratory, 39 were identified as known mutagens, teratogens, or embryotoxins. Workers had been routinely handling these substances with no reproductive hazard assessment, no targeted exposure controls for workers of reproductive age, and no communication about the reproductive risks those chemicals carried.

What Went Wrong - The chemicals were already classified as hazardous to reproduction. What was missing was a workplace system to translate that knowledge into protection — flagging reproductive toxins specifically, controlling exposures for workers who were or could become pregnant, and informing workers of the risks they faced daily. Standard occupational exposure limits are developed for normal adult non-pregnant workers and do not account for effects on a developing fetus. None of that was communicated. Workers made no informed decisions because they were given no information on which to base them.

The Bottom Line - Five pregnancies ended in one department in eight months. The hazard was already known. The gap between what was known about those chemicals and what was communicated to the workers who handled them was the gap in which five pregnancies were lost.

Source: https://www.cdc.gov/

PPE Doesn't Replace Thinking: Human Behaviour AND Gear

What Happened - In April 2023, a 34-year-old worker employed by Eastern Constructors Inc. was guiding an I-beam into place atop a plant's paint building in Georgia when he lost his balance and fell. His safety line — the PPE that should have saved his life — was cut by the sharp edge of the building's upper frame as he fell. He died at the scene despite the efforts of emergency personnel.

What Went Wrong - OSHA's investigation determined that Eastern Constructors Inc. failed to ensure workers were provided fall arrest equipment appropriate for the work conditions and capable of resisting sharp edges. The company also allowed worn and damaged fall arrest systems to remain in service rather than taking them out of service. The PPE existed. It was being worn. But it was the wrong PPE for the specific hazard present — and no one had stopped to think about whether the equipment matched the conditions of the job. OSHA cited the company for one willful and one serious violation, proposed $160,724 in penalties, and placed the company in its Severe Violator Enforcement Program.

The Bottom Line - This worker was wearing his fall protection. That equipment still failed to save his life — not because PPE doesn't work, but because the wrong PPE was selected for the specific conditions of the task.

Source: https://www.dol.gov/newsroom

Safety Talk

PPE Doesn't Replace Thinking: Human Behaviour AND Gear Meeting Kit

Personal protective equipment is one of the most visible safety tools on any job site. But PPE sits at the very end of the hazard control chain. It's the last line of defense, not the first. PPE is designed to reduce how bad an injury is when contact happens. It is not designed to stop the contact from happening. When workers or organizations start treating PPE as the whole answer, the thinking that identifies and controls hazards stops happening.

What's the Danger

When PPE becomes a substitute for thinking, here's what actually happens on the floor:

- Workers skip the hazard assessment because they figure the gear covers it, so unrecognized hazards go uncontrolled.
- Gear gets used outside its rated limits because nobody checked what those limits actually are.
- PPE that's worn incorrectly, damaged, or past its service life gives a false sense of protection while providing very little actual protection.
- Engineering controls and procedural controls get skipped because PPE feels like a simpler solution.
- Near-misses go unreported because the gear took the hit, even though the real hazard is still sitting there.

How to Protect Yourself

Before reaching for your PPE, ask whether the hazard has been addressed at a higher level first. Can it be eliminated? Can a design change, a substitution, or a physical guard reduce the risk before it reaches you? PPE works best when it's backing up a system that has already been thought through, not compensating for one that hasn't been.

Every piece of PPE has limits, and those limits matter. A hard hat rated for falling objects is not rated for electrical contact. Cut-resistant gloves vary widely in the cut level they protect against. Safety glasses are not goggles. Using the wrong protection for a hazard is not protection. If you're not sure what your gear is rated for, ask before the job starts.

PPE that's been damaged, exposed to chemicals, or pushed past its service life doesn't protect the way it's supposed to.

Before any task, take a moment to think through what could actually go wrong, not just what you'll be wearing. PPE decisions belong at the end of that conversation, after you've identified the real hazards and asked whether any of them can be controlled further up the chain.

If a piece of PPE was struck, saturated, torn, or otherwise compromised during a task, report it and take it out of service. Don't keep using a hard hat that took an impact because it looks intact on the outside. Don't re-use a respirator cartridge past its rated life because replacements are hard to get. These failures also matter as information: they tell your safety team what hazards workers are actually running into, which is how the controls get better over time.

Final Word

PPE is a good tool in the right place. The right place is last in a chain of controls, not first and only. Think through the hazard before you reach for the gear.

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Safety Talk

Incident Investigation Refresh: Making the Most of What Happened Meeting Kit

When an incident happens, the next 48 hours are some of the most important in your safety program. Done right, an investigation turns a bad event into knowledge that prevents the next one. Done poorly, it leaves the same hazard sitting in place while everyone moves on. Knowing how investigations work, and what good participation looks like, isn't just useful for investigators. It's useful for every person on the floor.

What's the Danger

Investigations fail for predictable reasons. When any of these patterns show up, the learning gets lost.

Focusing on Blame Instead of Cause - When the goal is to find who to blame, the real cause gets overlooked. Human error is almost always the end point of a sequence, not the whole story.

Memories That Change Fast - The brain starts rewriting what happened almost immediately after a stressful event. Delay is one of the most common reasons investigations produce weak findings.

Workers Who Don't Know What to Expect - When workers have never been through an investigation, the process feels threatening. People go quiet, give short answers, or tell investigators what they think they want to hear. That's not dishonesty. It's a normal response to an unfamiliar situation with unknown consequences.

Corrective Actions That Miss the Point - Even a well-run investigation can produce weak corrective actions. 'Remind workers to follow the procedure' fixes nothing. Real corrective actions change the system: redesign the task, repair the equipment, revise the procedure, add a control.

How to Protect Yourself

Your participation makes investigations work. Here's how to be useful in one.

Cooperate Fully and Honestly - Your honest account is the most valuable thing you can give. Don't try to protect anyone, including yourself, by leaving things out.

Report What You Saw, Not Your Conclusion - There's a difference between what you directly observed and what you think happened. Lead with the facts: what you saw, heard, and did.

Protect the Scene Until It's Been Documented - The physical scene of an incident is evidence. If you're nearby after an incident and the scene is being altered before documentation is complete, say something to a supervisor.

Know What Corrective Actions Were Taken - After an investigation closes, follow up on what changed. If you were involved in the event or the process, you have a real interest in knowing what the findings were.

Understand That an Interview Is Not an Accusation - Being interviewed is not the same as being accused. Investigators talk to everyone who was in the area or involved in the task because each person has a different piece of the picture.

Final Word

An incident investigation is not a blame exercise. It's a problem-solving process that only works if the people in it participate honestly. Every accurate detail you contribute helps bring the real cause into focus.

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Safety Talk

Pregnant Workers & Return-to-Work: Hazards and Protections Meeting Kit

Pregnancy changes a worker's relationship with nearly every physical and chemical hazard on the job. The same applies after a leave, whether for parental reasons, surgery, or a health absence. The body takes time to rebuild conditioning, and returning too fast to a full physical workload creates a window of real injury risk.

What's the Danger

As pregnancy progresses, the centre of gravity shifts and ligaments loosen, making joints less stable and activities like lifting, bending, and prolonged standing more hazardous than before. Some chemical and biological exposures carry elevated risk during pregnancy even within normal occupational limits, so additional controls may be needed beyond standard procedures.

The body works harder during pregnancy, meaning heat and physical exertion build up faster — tasks that felt manageable before may become too much sooner, and the risk of heat illness is higher. After extended leave, muscles, joints, and cardiovascular capacity decline, so returning to full physical duty too quickly raises the risk of musculoskeletal injury. A graduated return plan is part of working safely, not optional.

How to Protect Yourself

In most jurisdictions, pregnant workers are entitled by law to reasonable accommodation. This can include modified duties, adjusted hours, more frequent rest breaks, or temporary reassignment away from specific hazards. This is not asking for special treatment. It is using a protection that exists specifically for this situation. Knowing your rights is the first step to using them.

Early disclosure gives your employer time to make adjustments before the job becomes a hazard rather than after. You are not required to disclose the moment you find out, and timing is personal. But the sooner accommodations are in place, the better protected you are throughout the pregnancy.

If you're coming back after parental leave or a health absence, ask about a graduated return. Starting back at lighter duties or reduced hours for the first few weeks gives your body time to rebuild without overloading it. Returning at full intensity after weeks away is how return-to-work injuries happen.

If a coworker is on modified duties, stepping in to cover the difference without complaint is part of being a good crew member. Accommodations are not a sign someone isn't pulling their weight. They're a sign the team is doing right by its people. A workplace that handles these transitions well is one where everybody feels safer bringing their real situation to the table.

Certain physical symptoms during work require you to stop what you're doing. Tell your supervisor, sit down, and seek medical attention. These are not complaints. They are signals the body uses to communicate that something needs attention.

Final Word

These transitions are temporary. The culture you build around them is not. A team that steps up, stays flexible, and uses the protections that exist without making workers fight for them is a team that takes care of its people.

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Safety Talk

Communication in Multilingual Environments: Clarity Saves Lives Meeting Kit

A workplace where workers speak different languages has a specific communication risk that doesn't get enough attention. When a safety instruction gets partially understood, when a warning is spoken in a language only half the crew follows, or when a worker nods along to avoid embarrassment, the gap between what was said and what was understood can put someone in danger.

What's the Danger

Language barriers can create serious workplace safety risks when workers don't fully understand instructions, warnings, or procedures. Misunderstood directions can lead to missed precautions, incorrect steps, or unsafe practices.

Workers may also nod in agreement despite not understanding, creating a false sense of confidence that instructions have been communicated effectively.

These communication gaps become even more dangerous during emergencies, when warnings and evacuation instructions must be understood immediately. Safety materials, procedures, and hazard information provided in only one language can also leave workers without critical information. Ensuring safety communication is clear, accessible, and understood by everyone is essential to preventing incidents.

How to Protect Yourself

Everyone on the crew has a role in making communication work across language differences.

Here's what that looks like in practice.

Clear safety communication starts with making sure everyone understands instructions, regardless of language. Workers should feel comfortable asking for demonstrations, using translation tools to clarify key information, and repeating instructions in their own words to confirm understanding. When giving directions, demonstrate tasks, point out equipment, and use visual aids such as diagrams, labels, and colour coding.

For high-risk tasks, consider pairing workers who share a language to help clarify critical safety steps. Supervisors should check understanding by asking workers to demonstrate or explain what they need to do rather than simply asking if they understand. A nod doesn't always mean the message was received.

Learning basic safety words in coworkers' languages, such as "stop," "danger," "fire," and "evacuate," can also improve communication during emergencies. Consistent visual standards, including hazard markings, warning signs, and equipment tags, provide additional protection by making important safety information easier to recognize across language barriers.

Final Word

A safe workplace is one where every person on the floor, regardless of what language they grew up speaking, can access the information that keeps them safe. That takes active effort, not just goodwill.

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Safety Leadership

Front-Line Supervisors Setting the Tone



The safety culture on a job site isn't set by a poster on the wall or a policy in a binder. It's set by what a supervisor does when a rule gets bent, how they respond when someone reports a near-miss, and whether they ever skip the PPE themselves. Workers watch their supervisors. They mirror what they see. If the supervisor enforces safety rules consistently and takes reporting seriously, the crew does too.

When safety leadership fails at the front line, the effects ripple through the whole crew.

Inconsistent Enforcement - When a rule is enforced for some workers but not others, it stops being a rule. Workers learn quickly that the safety expectation is flexible and adjust accordingly. Inconsistency erodes a safety culture faster than almost anything else.

Normalizing Shortcuts - When a supervisor models a shortcut, even once, workers assume it's acceptable. Repeated shortcuts become standard practice, and the safe procedure gets forgotten.

Failure to Communicate Hazards - If a supervisor knows about a new hazard or a process that went wrong yesterday and doesn't pass it on, the crew walks into the shift blind.

Good safety leadership is a skill. It doesn't happen automatically with a title.

Lead by Example Every Day - The most powerful thing a supervisor can do for safety is follow every rule, every time, even when no one seems to be watching. Wear the PPE. Use the correct procedure. Stop work when conditions are unsafe.

Take Every Report Seriously - Thank workers for reporting near-misses or concerns, investigate the cause, and identify ways to prevent recurrence. Always follow up with the worker to explain what was found and what action was taken.

Enforce Rules Without Exceptions - Apply the same standard to everyone on the crew, regardless of seniority, relationship, or production pressure. When a violation happens, address it immediately and consistently.

Create Space for Honest Communication - Workers need to feel that raising a concern won't get them labeled as difficult or slow. Build that culture by responding to reports calmly and constructively.

Brief Hazards Every Morning - Start every shift with the information your crew needs to stay safe. New conditions, changed procedures, flagged equipment, restricted areas.

Check In During the Shift - Walk the job during the day. Talk to workers. Ask how things are going. Notice when someone looks off or when a task has drifted from the written procedure.