

Minneapolis Park and Recreation Board Worker Safety Audit

City of Minneapolis – Internal Audit Department January 10, 2017



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Internal Audit Department

350 South 5th Street, Suite 302 Minneapolis, MN 55415-1316 (612) 673-2056

Date: January 10, 2017

To: Minneapolis Park and Recreation Board Superintendent Jayne Miller, Minneapolis Park and

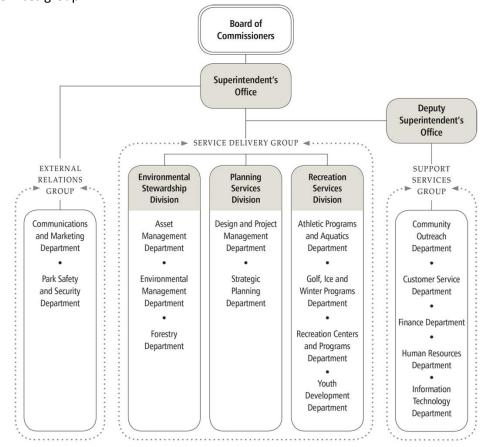
Recreation Board Commissioners, Mayor Betsy Hodges, City Council Members, and City Coordinator

Spencer Cronk

Re: Minneapolis Park and Recreation Board Worker Safety Audit

Background

The Minneapolis Park and Recreation Board (MPRB) is an independently elected, semi-autonomous body responsible for governing, maintaining and developing the Minneapolis Park System. The City of Minneapolis voters elect nine commissioners every four years: one from each of the six park districts, and three that serve at-large. The Superintendent is appointed by the Board of Commissioners, implements Board policy and provides leadership, vision and direction to the Park Board's service areas. MPRB had approximately 500 full-time and 1,300 part-time staff. MPRB was organized into an External Relations group, Service Delivery group and Support Services group.



The MPRB system included 6,790 acres of local and regional parks, playgrounds, golf courses, gardens, biking and walking paths, nature sanctuaries, lakes and a 55-mile parkway system. The MPRB was named the number one park system in America by the Trust for Public Land in 2013, 2014, 2015 and 2016. MPRB is also accredited by The Commission for Accreditation of Park and Recreation Agencies (CAPRA), the only national accreditation of park and recreation agencies, for excellence in operation and service. Internal audit notes that the Trust for Public Land ratings and CAPRA standards did not specifically consider employee safety programs.

The Occupational Safety and Health Act of 1970 created the Occupational Safety and Health Administration (OSHA) to assure safe and healthful working conditions by setting and enforcing standards. OSHA covered the state of Minnesota indirectly through an OSHA-approved State Plan. The State Plan was set and enforced by the Minnesota OSHA Division (MNOSHA), a part of the Minnesota Department of Labor & Industry. Minnesota employers under MNOSHA jurisdiction, including the MPRB, had to comply with both the federal OSHA Standards adopted by reference in Minnesota and Minnesota Statutes and Rules. Key components specific to Minnesota Statutes included comprehensive safety AWAIR (A Workplace Accident and Injury Reduction) programs for certain employers, Employee Right-to-Know² and Safety Committees. MNOSHA also publishes a number of guides⁴ to assist organizations seeking to comply with statutes and rules.

MPRB had a number of written policies and programs to address worker safety, including an AWAIR program, Employee Right-to-Know program, Risk Management Plan and other documents. Though the written programs had been in place for years prior to the audit focus period of 2014-2016, key components of the AWAIR program and safety related elements of the Risk Management Plan were not currently implemented.

^{1 -} Minnesota Statutes 182.653 subd. 8; Minnesota Rules 5208.1500.

^{2 -} Minnesota Rules 5206.

^{3 -} Minnesota Statutes 182.676; Minnesota Rules 5208.0010-.0090.

^{4 -} Including an AWAIR program guide; http://www.dli.mn.gov/osha/PDF/awair.pdf; and a Safety Committee guide; http://www.doli.state.mn.us/WSC/PDF/safetycommittees.pdf.

Objective, Scope and Approach

This audit was conducted in accordance with the International Standards for the Professional Practice of Internal Auditing as a part of the Internal Audit Department's Fiscal Year 2016 Annual Audit Plan. MPRB identified its safety program as a risk area during Internal Audit's annual risk assessment process, and requested that worker safety be reviewed as part of the 2016 Annual Audit Plan.

Objective

The objective of the audit was to assess how key elements of the Minneapolis Park and Recreation Board's (MPRB) comprehensive safety program comply with Minnesota statutes, rules and guidance issued by the Minnesota OSHA (MNOSHA). The audit reviewed the implementation of the safety program for high risk jobs, tasks and hazards.

Scope

The scope of the audit included a review of:

- Assigned roles and responsibilities.
- Policies, programs and procedures.
- Training materials and records.
- Incident investigation records and findings implementation.
- Safety program review and assessment records.
- Hazard identification and assessment documentation, and resulting controls.
- Various MPRB park locations, recreation facilities, support facilities and construction areas.

Approach

To accomplish our audit objectives, Internal Audit:

- Reviewed information posted on MPRB's website, interviewed MPRB management and interviewed MPRB's Occupational Health and Safety Consultant.
- Reviewed Minnesota statutes, rules and MNOSHA guides; reviewed Federal OSHA statues; interviewed worker safety staff at the City of Minneapolis and Hennepin County; and interviewed MNOSHA staff.
- Requested and reviewed policies, procedures and records related to the overall MPRB employee safety program and related to high risk areas identified by management and by Internal Audit in the preliminary risk assessment.
- Conducted phone interviews with MPRB staff.
- Conducted in person interviews with MPRB employees, supervisors and managers covering the following areas:
 - Arborists.
 - o Parkkeepers.
 - o Equipment Operators.
 - o Five trades groups.
 - Mechanics.
 - Recreation.
 - o Police.
- Observed MPRB work at park locations, recreation facilities, the main office location and operations centers.

To report the findings and observations, Internal Audit grouped the results into four related categories covering concerns with how the safety program was designed, how the safety program was implemented, safety-related training, and safety communications. Findings in the report fall within these categories, but are arranged starting with the most critical issues. The report does not discuss areas where Internal Audit did not conclude that an exception exists, or where no exceptions were identified.

Audit Results and Recommendations

Finding 1: Safety Program Implementation - Hazard Identification, Assessment and Control

MPRB's key process for identifying, assessing and controlling hazards – performance of Job Hazard Analyses (JHAs) was not implemented. Internal Audit noted a general lack of awareness and enforcement of this portion of the AWAIR program. As a result MPRB was unaware of whether it had identified all hazards, whether the identified hazards have been assessed or whether the controls in place for hazards were appropriate.

Testing Results

An important component of a safety program is a systematic approach to identifying possible job hazards, analyzing the hazards for potential solutions or mitigations, and implementing the most reasonable solutions to control the hazard. MN statutes require that the AWAIR program describe the methods used to identify, analyze and control hazards.

MPRB stated that it followed its AWAIR program to identify, assess and control hazards. The MPRB AWAIR program listed JHAs as the tool used to accomplish these steps for each task or job, and identified a Federal OSHA publication⁵ as a reference for conducting JHAs. It also stated that supervisors were to review the JHAs with new employees prior to performance of the applicable task or job, and that JHAs were to be reviewed on an annual basis by a cross-disciplinary team.

While the MPRB AWAIR program appeared to set up an adequate written structure to address hazards, Internal Audit review found that the majority of JHAs were conducted between 2001-2004. When inquiring about JHAs in interviews with MPRB employees, 32 of 37, or 86 percent, did not recall knowing that JHAs exist for any jobs at MPRB. Four of the employees that did recall were Park Police, and identified their MPD Policy manual, which covered key elements of a JHA. Referencing the MPD policy was reasonable because the Park Police was not one of the groups for whom JHAs were developed in 2001-2004. MPRB management stated they were aware that JHAs need updating and that they were planning to do so in 2017. Additionally, the Occupational Health and Safety Consultant's work plan for 2017 included a JHA update.

Without an up-to-date, systematic approach to tracking, assessing and controlling hazards, MPRB cannot be sure that it has instituted appropriate safeguards, policies, procedures and protective equipment requirements across the organization.

Safety Program Implementation - Hazard Identification, Assessment and Control Recommendations

Internal Audit recommends that MPRB:

- Implement the JHA-related components of its AWAIR program, including:
 - Updating JHAs in line with Federal OSHA Publication 3071, as stated in the AWAIR program.
 - Communicating JHA related responsibilities to MPRB staff, including expectations for annual reviews, reviews when processes change and the sharing of JHAs with employees before they begin a new job. Internal Audit notes that if the planned 2017 update for JHAs occurs, implementing the AWAIR program as written would result in a continuous update and annual refresh process for JHAs. This would further engrain

^{5 -} Federal OSHA Publication 3071; https://www.osha.gov/Publications/osha3071.pdf

- safety in supervisors and employees, and may reduce the need and expense of periodic large scale refresh projects.
- Implement a process to enforce the JHA-related responsibilities of supervisors, foremen and crew leaders as stated in the MPRB AWAIR program. This could be a separate process, or be incorporated into current processes like annual employee reviews.

MPRB Response

MPRB agrees with the findings and will take the following actions to address the recommendations:

- In 2017, the MPRB will revise its annual performance review process for employees. This revision will be used to enforce the JHA-related responsibilities of supervisors, foremen and crewleaders as stated in the MPRB AWAIR program.
- The JHA-related components of the MPRB AWAIR program are included in an RFP for a Safety and Health Management System (SHMS) consultant that will be issued in early 2017. Review of the JHA process will be a focus of the 2017 work with the SHMS.

Finding 2: Safety Program Implementation – Safety Committee

MPRB did not have a safety committee in place during the audit period. The prior safety committee stopped meeting in 2012, and MPRB's process for implementing a new safety committee resulted in slow progress since 2012. As a result, MPRB lacked a critical component of its AWAIR program that is required by MNOSHA.

Testing Results

Minnesota Statute 182.676 requires employers in Minnesota with 25 or more employees to establish and administer a joint labor-management safety committee. Minnesota Rules 5208.0010-.0090 provide additional rules for safety committees, and MNOSHA has published a guide to developing a safety committee.

MPRB had a safety committee that last met in 2012. Internal Audit noted the AWAIR program assigned responsibility for establishing and administering the safety committee to "MPRB." The need for a safety committee was identified in 2012, and MPRB assigned responsibility, among other safety duties, to an Occupational Health and Safety Consultant hired in 2014. Internal Audit did note several steps after 2014 toward reestablishing a safety committee, including gathering a list of volunteers to participate on the committee and, toward the end of 2016, the signing of a Joint Statement of Commitment by the MPRB Labor/Management Committee.

Safety Program Implementation - Safety Committee Recommendations

Internal Audit recommends that MPRB:

- Establish a safety committee in line with Minnesota Statutes and Rules, and review the MNOSHA published safety committee guide as a reference to ensure that the committee has the appropriate structure, resources and responsibilities.
- To enhance the effectiveness of the safety committee, and reduce the likelihood that a safety committee stops being in place in the future, consider implementing a periodic report to the MPRB Commissioners summarizing safety committee activities.

MPRB Response

MPRB agrees with the findings and will take the following actions to address the recommendations:

- The MPRB is in the process of re-establishing the Safety Committee. The committee will
 conduct its first meeting in January 2017. If needed, the MPRB will seek assistance from
 Minnesota OSHA to help establish and focus the direction of the committee. The RFP for a
 SHMS consultant includes providing assistance to re-establishing the safety committee, as
 needed. The committee will also provide assistance to the SHMS consultant, as needed.
- As part of a periodic report on workplace safety, key aspects of the safety committee work will be provided to the Board of Commissioners. Starting in 2017, however, regular reports of the safety committee will be expected to be provided to the Executive Team to ensure tracking and coordination is occurring.

Finding 3: Safety Program Design and Implementation - Inspections

Internal Audit observed a number of different types of inspections either had not been done within a required time period or were not documented. The safety inspection program, established in MPRB's Risk Management policy did not identify expectations for the elements observed to be out of date. This exposed the MPRB to additional risk from potentially uninspected, outdated or faulty equipment.

Testing Results

Inspections Design

Internal Audit reviewed MPRB safety related policies and procedures and noted that periodic safety inspections of all facilities were an element of the MPRB Risk Management Policy. However, the policy did not clearly lay out inspection schedules, check-lists, or other tools to identify what elements are to be reviewed or inspected during a safety inspection. The Risk Management Policy did specifically identify, in a different section, that MPRB was to schedule inspection and restocking for first aid kits, and that 'first report of incident' forms should be located in each kit.

Internal Audit asked about safety inspections and first aid kit inspections during interviews, but no MPRB staff indicated that they knew of, or participated in, a safety inspection during the audit period. Staff did maintain first aid kits, but did not know of any schedules for their inspection or restocking, and did not have a list of materials that kits should contain. None of the kits reviewed in walkthroughs included copies of forms to report incidents.

Inspections Execution

Internal Audit performed onsite interviews and walkthroughs at six MPRB locations. These walkthroughs included observations of equipment inspection tags for fire extinguishers, fire alarm testing, eye wash stations, HVAC systems and electrical equipment clearance requirements. Below are the results of these walkthroughs:

- Fire extinguisher tags at four of the locations showed last inspections were more than one year prior to walkthrough, but tags are void one year after inspection.
- Three fire alarm control panels had attached inspection and test reports showing they were last tested more than one year prior to the walkthrough, though the reports should be done annually.
- Three of the visited locations had one or more eye wash stations. Some of the observed stations did not have an inspection/testing tag attached at all. Tags state that the unit must be tested each week.

- Of the stations that did have tags, none showed tracking of weekly testing, and only one tag showed an inspection date within a year of the walkthrough. One tag had a note only that it was installed 12/16/84. Internal Audit also noted instances where eye wash stations were not accessible because of equipment and materials stored in the way.
- In three locations, a three foot clearance around building electrical equipment was not maintained in utility rooms; cleaning equipment, chairs and an employee desk were observed positioned within the three foot distance.
- Most HVAC systems did not show inspection stickers with inspections within a year of the
 walkthrough. Staff at the locations recalled inspections occurring annually, but MPRB did not provide
 information on how these inspections were tracked.

Internal Audit made additional observations during the on-site reviews at specific locations and for specific departments:

- During the on-site review for the Park Police, Internal Audit noted there was an expectation that police officers maintain specific safety equipment in cars (disposable gloves, high visibility vest, policy manual, etc.). However, there was no systematic review or spot check process to verify that cars were correctly stocked. The police car Internal Audit looked at during the walkthrough contained an expired fire extinguisher and did not have a policy manual in the glove box. Park Police systematically reordered basic police car safety equipment, relying on staff noting the needed gear when it ran low or out on a white board. However, there was no inventory tracking system and equipment could run out completely before being flagged.
- Internal Audit inquired about emergency evacuation drills at two locations and learned that, while fire
 drills had been held, MPRB could not provide written fire evacuation plans as required under Federal
 OSHA regulations.⁶
- Internal Audit inquired about inspections related to employee license requirements, and learned that
 there was no system in place to verify that employees that are required to have driver's licenses
 maintain those licenses after initial employment checks. This exposed MPRB to greater risk of
 employees operating MPRB vehicles without current driver's licenses.

Safety Program Design and Implementation – Inspections Recommendations

Internal Audit recommends that MPRB:

- Include as part of its written safety inspections program a comprehensive list of inspection requirements, including the elements to be inspected (e.g. fire extinguishers), frequency (e.g. at least annually), the staff titles or groups responsible for the inspection and how the inspections will be tracked.
- Conduct safety inspections specified in its safety inspections program in line with established schedules, and maintain documentation of the completed inspections.
- Establish a first aid kit inspection and restocking program, identify the staff titles or groups
 responsible, and document how the inspections will be tracked. Consider developing a list of
 required first aid kit contents and a reference guide identifying the correct suppliers for those
 contents as a tool for staff responsible for the inspections.
- Conduct first aid kit inspection and restocking in line with the established program, and maintain documentation of the competed inspections.
- MPRB Park Police develop controls to help ensure police vehicles are appropriately stocked through an inspection and review process of vehicle contents and on-hand inventory of basic supplies. A single review could address both concerns through, for example, a bi-weekly check of a sample of vehicles and a visual verification of on-hand inventory.

- Develop and communicate to staff written fire evacuation plans for MPRB locations.
- Develop and implement a system to verify or spot check that staff required to have driver's licenses maintain those licenses after the initial employment background checks.

MPRB Response

MPRB agrees with the findings and will take the following actions to address the recommendations:

- The MPRB is currently working with a consultant on fire emergency related inspections and plans, including alarms and extinguishers and updating evacuation plans.
- The MPRB is currently developing a facility safety and health check list for facilities. This list
 will be used monthly by staff to perform a safety and health inspection of the facility in which
 they work.
- The RFP for a SHMS consultant includes setting up inspection processes, including communication of when and what needs to be inspected by which position. This would include a system for checking key work requirements like valid driver's licenses. Setting up the inspection process will be a focus for 2017 with the SHMS consultant.

Finding 4: Safety Program Implementation - Goals, Objectives and Safety Program Review

MPRB's review of its AWAIR program did not include key recommended review elements, including whether or not the program goals and objectives were achieved. The partial review occurred because no specific review elements were defined, and because a key group responsible for reviews, the Safety Committee, was not in place. As a result, information on the effectiveness of MPRB's worker safety program was not available to inform management decisions and improve safety program design.

Testing Results

Minnesota statutes require a review of the AWAIR program at least annually, with documentation of how the safety procedures described in the program are met. The MNOSHA AWAIR guide identifies the primary focus of the review to be whether the organization has made progress in achieving AWAIR goals and objectives, and to determine whether procedures used by employees are effective and consistent with the program. Key guide steps for conducting a review included a review of safety program documents created in the last year, employee and supervisor interviews, observation and walkarounds, and written program element review and revision.

MPRB's AWAIR program did list an annual review as a role and responsibility for various managers and groups, but there was no clear definition of what a review consisted of. Documentation provided to support MPRB's annual AWAIR program review included reports from the 3rd party workers' compensation manager on injury trends, and a survey conducted in 2014 following OSHAs Form 33 format – a tool used to measure, evaluate and determine the strength of a safety program. Internal Audit notes that the provided information did not cover the requirement of documenting how the safety procedures in the AWAIR program were met. Of the review steps recommended by the MNOSHA guide, MBRB did conduct an annual review of some safety program documents generated in the prior year through the workers compensation report. The Form 33 survey was similar in scope to recommended employee and supervisor interviews, but had not occurred annually.

MPRB could not describe how its goals and objectives were established because the individual that created them was no longer an employee. The goals and objectives had not been modified since 2010. MPRB did not provide documentation showing how it was evaluating its AWAIR goals and objectives. Internal Audit notes

that one of the objectives, to "..actively enforce all safety rules throughout the organization," is difficult to measure or demonstrate without conducting some sort of program review. Two other objectives involve metrics that MPRB appeared not to track, specifically (1) employee-reported safety issues and timeliness in addressing those issues; and (2) the accidents and near misses that occur and timeliness in taking corrective action after the occurrence.

Safety Program Implementation – Goals, Objectives and Safety Program Review Recommendations

Internal Audit recommends that MPRB:

- Review Minnesota statutes and the MNOSHA guide on annual AWAIR program reviews, and update MPRB's AWAIR program to include:
 - o A clear definition of what an annual review consists of.
 - What type of documentation should be developed as part of each review to adequately demonstrate that safety procedures described in the program are met.
 - o Which individual/group is responsible for which components of the review.
- Review MPRB's AWAIR goals and objectives, and either implement tracking for the metrics
 that would demonstrate accomplishment of the goals and objectives, or revise goals and
 objectives to be based off data that is currently tracked.

MPRB Response

MPRB agrees with the findings and will take the following action to address the recommendations:

• The RFP for a SHMS consultant includes updating the AWAIR program. To achieve this outcome the future consultant would work closely with the MPRB's Executive Team to revise the program, including goals and objectives. This will include to developing a tracking system to measure progress toward or accomplishment of the goals and objectives. This will be a focus of the MPRB's 2017 work with the SHMS consultant.

Finding 5: Safety Program Implementation - Incident Investigation

MPRB did not have the post incident investigation documentation to support that the investigations contained elements recommended by the MNOSHA AWAIR guide. MPRB's AWAIR program identified a first report of injury document and a supervisor's report of injury document, but did not discuss any other supporting information; the two documents that were produced were not consistently filled out. As a result, Internal Audit could not verify that key incident investigation elements were executed by MPRB.

Testing Results

Internal Audit reviewed MPRB's incident investigation process, OSHA Form 300 injury reporting logs for 2015 and 2016, and the MNOSHA guides incident investigation recommendations. MNOSHA recommended that each incident and near miss be investigated, that each investigation be conducted by a team and include steps such as accident site examinations, witness interviews, documentation, reviews of operating procedures and development of a sequence of events leading up to the accident. The guide recommended that a root cause for the incident or near miss be identified and corrective actions be prepared and presented to management.

Internal Audit sampled the OSHA Form 300 injury logs, and requested documentation generated by MPRB as part of its incident investigation process. The documentation produced consisted of first report of injury forms, supervisor's report of injury forms and a small amount of workers compensation-related

correspondence. The supervisor's report of injury form included a brief section to discuss what happened, and checkbox areas for developing causes and deciding on corrective actions (see relevant form portion below):

Accident Description			
Exact Location of Accident	·		
Describe Job Being Done (i.e. loading truck with boxes)			
What occurred? Describe in sequence 1) employee's physical location and po accident, 4) any witnesses.		now he/sh	e was performing task, 3) what occurred to trigger
2)	-		
3)			
4)_[WITNESSES]			
Please Answer The Following 1) Was injured person properly instructed in safe and efficient methods? 2) Did injured person violate any instructions? 3) Was necessary personal protective equipment worn? (if applicable) 4) Did poor housekeeping contribute to the injury? 5) Did horseplay contribute to the injury? 6) Did poor body position/posture/mechanics contribute to the injury? 7) Was it caused by equipment or tools that need repair? 8) Should a safety guard or other device by provided? (if applicable) 9) Did any bodily defect contribute to the injury? 10) Was it caused by an unsafe act? 11) Did injured person report the injury to you, the supervisor, immediately?	Yes	No No No No No No No No	
Corrective Action Plan To Prevent Recurrence (Check All 1 Retraining of all employees involved Install/modify safety guards/devices Repair/replace defective equipment Improve training and follow-up Correction other than these listed: Supervisor responsible for corrective action being implemented:	edures nployee(s) r/supplier		☐ Clean up hazardous conditions ☐ Improve storage or arrangement ☐ Require personal protective equipment ☐ Perform ergonomic review

Based on this section, Internal Audit was not able to confirm how many staff conducted the investigation, or compare the steps taken in the investigations to the recommended guidelines for investigations. Internal Audit observed that 4 of the 13 selected incidents did not have the "Please Answer The Following" section filled out; and 7 of the 13 selected incidents did not have the "Corrective Action Plan" section filled out. There was also no information or evidence as to whether the identified corrective action plan was actually carried out.

MPRB noted the supervisors that conducted the investigations may have additional documentation, and that the Occupational Health and Safety (OHS) Consultant participated in investigations of incidents that lead to severe injuries. Additionally, the third party contractor handling workers compensation conducted their own investigations to determine whether or not the claims were compensable, but MPRB did not receive copies of those investigation materials and they did not focus on employee safety or hazard control. Finally, Internal Audit did review documents provided separately for incidents reviewed by the MPRB Accident Review Board which included more details, but those reviews only occurred when there was vehicle or equipment damage. A majority of employee injuries on the OSHA Form 300 logs did not include vehicle or equipment damage.

Maintaining more complete documentation for incident follow up would provide MPRB a better opportunity to track implementation of corrective actions, and a better opportunity to identify similar hazards that could lead to more incidents in other areas of the organization. Also, Minnesota Rule 5208.0050 states that a duty of the Safety Committee is to review incidents resulting in work-related injuries and make recommendations to prevent further occurrences. The rule states this duty can be satisfied by a review of the report generated by those investigating the incident. Having documentation that provides more information on how the

investigation was conducted, how the root cause and corrective actions were determined, and whether the corrective action was put in place would significantly streamline the Safety Committees ability to carry out this responsibility.

Safety Program Implementation – Incident Investigation Recommendations

Internal Audit recommends that MPRB:

- Review the incident response section of the AWAIR program and consider including elements listed in the MNOSHA AWAIR guide as part of its required steps for an investigation.
- Require incident investigators to document how they conduct their investigations and reach their conclusions on root causes and corrective actions to take, and include those documents as part of the incident files.
- Implement a follow-up process with individuals responsible for corrective actions to verify that they have been taken.

MPRB Response

MPRB agrees with the findings and will take the following action to address the recommendations:

- MPRB supervisors will receive a training session on how to complete the first report of injury document in the first quarter of 2017.
- The RFP for a SHMS consultant will review and revise the incident investigation process. The
 consultant will also provide recommendations on a follow-up process to verify that corrective
 actions are being implemented.

Finding 6: Safety Program Design – Roles and Responsibilities

The MPRB safety program roles and responsibilities did not cover tracking of safety statutes, rules and regulations, nor does it specifically designate the responsibilities for several safety related elements. As a result, the AWAIR program did not fully describe how MPRB implemented its safety program.

Testing Results

Internal Audit reviewed the roles and responsibilities listed in MPRB's AWAIR program, and discussed how employee safety was functioning with MPRB management and staff. The AWAIR program listed roles and responsibilities of MPRB staff, of the MPRB Commissioners, and the MPRB Safety Committee. The AWAIR program did not include the role of the OHS Consultant, though MPRB has had one on staff since 2014. The OHS Consultant has taken on parts of various other roles' responsibilities including some safety communications, training and incident investigations.

Internal Audit identified in reviews of the AWAIR Program and the Risk Management Plan that key responsibilities are assigned vaguely, or not at all. Specifically, the AWAIR program states that "MPRB must establish and administer a joint labor-management safety committee...", but does not assign this responsibility to any specific group or individual, or define a specific group or individual as 'MPRB.' As noted in Finding 2 above, a safety committee was not in place during the audit period, likely as a result of no-one being tasked with making sure it existed. The Risk Management Plan covered first aid kit inspection and restocking scheduling as something MPRB was to provide, similarly without specifying 'MPRB.' Also, while most Risk Management Plan sections discussed responsibilities of either the MPRB or the MPRB in conjunction with the Risk Manager, the section on Safety Inspections merely stated that "...a safety inspection program will be instituted." Per Finding 3 above, Internal Audit did not receive any information that either first aid schedules

nor safety inspections were in place, also likely as a result of no-one being tasked with making sure these elements were occurring.

A stated goal of the MPRB AWAIR program was compliance with State and Federal OSHA regulations. Internal Audit did not observe safety program documents assigning responsibility for awareness and tracking of compliance with safety statutes, rules, regulations or best practices. Initial meetings with the OHS Consultant yielded a partial list of OSHA requirements that apply to MPRB that was used as an internal discussion tool. Subsequent requests for safety laws, regulations and rules that MPRB complies with did not result in additional information on what MPRB complies with or tracks. It is difficult to attain and maintain compliance without a systematic approach to determining what applies, and a systematic approach to tracking how compliance is occurring.

Finally, during interviews several service delivery groups' current staffing levels were discussed as being much lower as compared to the early-to-mid 2000's. Internal Audit did not conduct an evaluation of staffing numbers and workloads. It is important to note that staffing numbers are a function of available funding, and that while employee safety requires additional staff time, effective employee safety programs prevent days away from work due to injuries. As MPRB further develops its employee safety program and assign more staff specific safety responsibilities, it should continue to consider staffing levels with workloads that accommodate those responsibilities.

Safety Program Design - Roles and Responsibilities Recommendations

Internal Audit recommends that MPRB:

- Identify specific staff titles or groups to take on safety responsibilities within the AWAIR program and Risk Management Plan that did not have clear assignments.
- Within the AWAIR program, review and redefine roles and responsibilities to reflect the current MPRB safety program structure.
- Within the AWAIR program, identify specific staff titles or groups to take on responsibility for awareness of, and tracking compliance with, state and federal OSHA regulations and rules.
- Update the AWAIR program and Risk Management Plan for the above recommendations, and communicate the redefined responsibilities to appropriate staff.

MPRB Response

MPRB agrees with the findings and will take the following actions to address the recommendations:

- The Executive Team will work with the future SHMS consultant to update the AWAIR program and Risk Management plan to reflect the current organizational structure and provide clear roles and responsibilities. This will include responsibility of awareness for and tracking of compliance with state and federal OSHA regulations and rules.
- A communications plan will be developed and implemented to share this updated program and plan with staff in 2017.

Finding 7: Safety Program Design – Management Participation

MPRB's AWAIR program did not state how continued participation of management will be measured. Minnesota statutes require the written work place AWAIR program describe how this measurement will occur. This affected MPRB compliance with Minnesota statutes, and removed a control designed to increase management participation in the employee safety program.

Testing Results

Internal Audit compared the MPRB AWAIR program documents to Minnesota AWAIR statutes and the MNOSHA guide, and requested additional information on management participation elements. The statutes state "The program must describe: (1) how managers, supervisors and employees are responsible for implementing the program and how continued participation of management will be established, measured and maintained;..."

The AWAIR program did list manager roles and responsibilities, which established participation of management. MPRB also referenced management's written responsibility for conducting annual program reviews as how the AWAIR program maintained management participation. However, the AWAIR program did not state how management participation will be measured.

Safety Program Design - Management Participation Recommendations

Internal Audit recommends that MPRB:

- Update its AWAIR program to include how management participation will be measured, how frequently the measurement will occur, and how the measurement will be documented.
- Conduct measurement of management participation in line with developed metrics and schedules.

MPRB Response

MPRB agrees with the findings and will take the following action to address the recommendations:

• The Executive Team will work with the future SHMS consultant to update the AWAIR program to articulate how management participation will be measured and establish a protocol for implementing the measures. This will be part of the AWAIR program update in 2017.

Finding 8: Safety Program Communication – Disseminating Program Information

MPRB staff were not aware of all MPRB safety policies and procedures applicable to their work because elements of the safety program were not communicated to all affected employees. This affected the awareness of the MPRB-established safety expectations and the ability of staff to comply with policies and procedures.

Testing Results

MNOSHA's AWAIR guide identified that the safety program should be communicated to all affected employees so they know and can comply with the safety policies and procedures of their organization. The guide stated that communication regarding safety and health issues should be a continual process; and noted there are times when it is especially critical, including the beginning of an employee's new job assignment, whenever material, process or procedural changes are implemented, and whenever the employer notices deficiencies in safe work practices.

Internal Audit performed onsite interviews and walkthroughs at six MPRB locations and a review of safety policies and procedures on the MPRB's intranet. Overall, 24 of 37, or 65 percent, of staff interviewed were not confident in being able to find copies of safety policies without asking another staff member. Staff that were confident identified either a specific policies binder location or the MPRB intranet. The MPRB intranet did have copies of most organization-wide safety policies provided to Internal Audit, though the versions posted

on the intranet were more recent, so differed slightly from those provided to Internal Audit. The policy binders that were reviewed generally contained older versions of policies, and MPRB staff did not have a set process for maintaining up to date policy binders. This meant staff referencing a binder to find a policy were not guaranteed to find the most recent version. The Risk Management Plan, Equipment Training Procedures and Documentation and Accident Review Board Guidelines documents provided to Internal Audit as part of MPRB's safety related policies were not found on the intranet. The intranet did include safety videos in line with MPRB-required training, but no other training materials were posted. The intranet did not have a 'search' bar, which meant finding a specific policy required navigating to the Safety Committee section either directly or from a link listed among other policies.

MPRB's AWAIR program lists staff safety roles and responsibilities, however 28 of 37, or 76 percent, of staff interviewed did not know whether their safety responsibilities were written down. Staff were generally aware that MPRB had an AWAIR program, however the awareness came from annual OSHA training and not from having seen or read the actual program document. MPRB could not demonstrate that the safety roles and responsibilities expected of employees per the AWAIR program were communicated. Internal Audit also asked whether staff were assessed on their safety responsibilities – most staff evaluations included a discussion of safety, but did not list it as specific evaluation criteria. This presents an opportunity for MPRB to better communicate and enforce safety responsibilities by modifying employee evaluations to specifically consider those responsibilities. Internal Audit noted another example of MPRB policy communications issues – discussions with Water Resources staff identified that they had been arranging for confined spaces training from City Public Works staff for themselves and interested MPRB Trades staff for at least eight years. While MPRB had its own confined spaces policy, Water Resources used the City policy and were unaware that MPRB had had a separate document in place.

Material Safety Data Sheets (MSDS) were required by MNOSHA to be readily available to staff for all chemicals used by MPRB staff. These sheets list detailed information about the nature of a chemical, such as physical and chemical properties, health, safety, fire and environmental hazards of a chemical product, and how to safely deal with emergency situations. Internal Audit reviewed and discussed with staff the MSDS binders at several locations, and noted that the binders were not systematically kept up to date. In addition, the MPRB has had a contract for an electronic system for storing and automatically updating MSDS (3E) for approximately 10 years. MNOSHA does not require a paper copy be available if an electronic version is readily accessible; Internal Audit discussed chemical hazards with all divisions interviewed, however only six staff knew of the 3E system and only three of them discussed using it.

Safety Program Communication - Disseminating Program Information Recommendations

Internal Audit recommends that MPRB:

- Communicate the AWAIR program and other MPRB safety policies to all MPRB staff so that all affected employees are informed of MPRB's safety expectations.
- Develop a process to ensure staff are aware of MPRB's safety policies and their roles and responsibilities, and are carrying them out. This could be achieved by discussing the safety roles and responsibilities in staff reviews, or even making safety program compliance a specific review category.
- Implement a process to provide up-to-date SDS to staff that work with chemicals, either through a systematic process to update binders, increased familiarity and access to the 3E system, or both.

MPRB Response:

MPRB agrees with the findings and will take the following actions to address the recommendations:

- In the first quarter of 2017, the current AWAIR program, Risk Management Plan and other safety policies will be communicated to all affected staff. All supervisors will also be reminded of their roles and responsibilities at the first bi-monthly meeting of supervisors in 2017.
- The update of the AWAIR program as part of the work with the SHMS consultant will include a communication plan for 2017 and subsequent years.
- In 2017, the MPRB will revise its annual performance review process for employees. This revision will allow awareness of safety policies, roles and responsibilities to be incorporated into annual reviews.
- In collaboration with the SHMS consultant, a process to provide an up-to-date SDS to staff on an ongoing basis will be developed.

Finding 9: Safety Training

MPRB did not have readily available information on employee safety training requirements. Centrally determined requirements were not up to date, and decentralized requirements set by departments were not systematically tracked. This increased the risk of MPRB not identifying safety training needs of its employees.

Testing Results

Internal Audit discussed with MPRB how training requirements were developed, and requested information on MPRB-required safety training. Requirements were set at two levels – some general training requirements were set by MPRB, and additional job-specific training requirements were determined by employees' departments.

MPRB identified to Internal Audit that its safety training requirements consisted of a set of nine safety videos provided to employees when they started. Different positions were required to watch some, or all, of the videos, and MPRB provided a "Training by Positions" chart that identified which positions required which videos. Internal Audit noted from interviews that the list of videos did not encompass all required training, for example it did not include the annually held required OSHA training. Internal Audit reviewed the job titles on the provided required videos chart and noted that the position titles only partially matched the titles on the current MPRB Organization chart, or the titles on the MPRB website job descriptions, or titles on the MPRB-provided training tracking document titled '2015-2016 Training by Department.' It appeared that the training requirements document was last updated in 2010, before the most recent reorganization, causing the discrepancies.

For the department-level safety training, Internal Audit learned that most was integrated into general training on day-to-day duties. There was no MPRB-wide system in place to determine and track which employees needed which training, though Internal Audit received several examples of different department spreadsheets covering staff training subjects. Internal Audit observed that a systematic approach to tracking safety training needs was set up in MPRB's AWAIR program "Safety Training" section – however that section stated employees must receive safety training as indicated on their Job Hazard Analyses (JHAs). Per Finding 1 above, JHAs were not actively used.

Internal Audit noted a few examples of department-level training variations for similar subjects; for example staff training on new equipment varied from bringing in manufacturers for hands on classes, to having staff figure out the equipment based on its manual. Information on seasonal staff training requirements was not

provided; in interviews Internal Audit learned of varied expectations for seasonal staff training ranging from receiving similar training as full time staff, to expectations that full time staff attending a training would then deliver similar training to seasonal staff.

Internal Audit received several spreadsheets tracking training dates for staff for select training. Certain training, specifically the MPRB safety videos, appeared to not be systematically tracked. The training tracking systems varied between departments and divisions, and in some cases overlapped with the listings of retraining expectations.

Safety Training Recommendations

Internal Audit recommends that MPRB:

- Update and maintain a current schedule of MPRB-wide safety training requirements including safety videos, OSHA training, and other requirements that apply to multiple departments. The schedule should identify frequency of repetition for each training element.
- Once JHAs are updated in line with the recommendations to Finding 1, utilize the training needs identified in the JHAs as the foundation for establishing written department-level training requirements for different jobs, in line with MPRB's AWAIR program.
- Consider implementing an MPRB-wide system to track both MPRB and department level training requirements, training attendance and documentation of subject matter covered at training.

MPRB Response

MPRB agrees with the findings and will take the following action to address the recommendations:

- The MPRB will compile existing training into a central location in 2017.
- Updating and maintaining a current schedule of MPRB-wide and job specific safety training
 requirements will be a key outcome of the work with the future Safety and Training
 Management System consultant. As part of the work with the consultant, the MPRB will seek
 recommendations on how to best to track training (requirements, attendance, content). This
 will be an action item for 2017.

Finding 10: Safety Program Communication - Staff Concerns Tracking

MPRB did not have records of safety concerns raised by staff and their resolution because no system to track safety concerns was in place, and no Safety Committee was in place to execute the Minnesota rule requiring such a system be in place. As a result, MPRB would have great difficulty in assessing its progress on one of its AWAIR program objectives, and compliance with Safety Committee duties will be more difficult to achieve.

Testing Results

Minnesota Rule 5208.0050 lists that a duty of the Safety Committee is to "...establish a system to obtain safety-related suggestions, reports of hazards, and other information from all persons involved in the operations of their workplace." MNOSHA's AWAIR guide also notes "...if employees... have no clear method or reporting their concerns to management, safety and health hazards can go undetected."

MPRB's system for staff safety concerns, as stated in its AWAIR program, was to report issues to a supervisor or safety committee member. From interviews Internal Audit learned that staff were generally encouraged to report safety concerns, and would also report some concerns to the OHS Consultant. Supervisors worked to

address concerns that were brought to them, and could escalate concerns if they felt they could not be addressed at the supervisors' level.

The various supervisors Internal Audit spoke to did not systematically track the issues that were reported to them, and MPRB did not have a central process for gathering and tracking reported issues. One area reviewed did have a readily available list of safety priorities put together which was incorporated staff concerns. Internal Audit note that, as discussed in Finding 2 above, a Safety Committee was not in place; once it is in place, it will be required to establish a system to obtain safety related input. Additionally, one of MPRB's safety program objectives was based on how quickly an employee safety issue is addressed, however without a uniform process to track reported issues and the response to the reported issue there was no reasonable way for MPRB to evaluate its success at meeting that objective.

In addition to improving objectives tracking and easing the path to compliance for a newly established safety committee, staff concerns are an excellent resource for identifying potential work hazards. Tracking and systematically analyzing and controlling those reported concerns would improve MPRB's employee safety by focusing attention on higher risk areas, and would improve staff confidence in MPRB's commitment to safety. Even if the resolution of the concern is that there is no hazard, going through an assessment and control process, for example by conducting or updating a Job Hazard Analysis, would produce a document reassuring staff that a concern has been addressed. During fieldwork Internal Audit noted a few areas of concern that an MPRB review and assessment could alleviate or identify mitigation measures for, including:

- Operating off-road vehicles on City streets.
- Whether certain spaces were considered "confined spaces."
- Ventilation concerns in enclosed park utility room spaces.
- Repetitive strain concerns from some tasks currently done by hand.

Safety Program Communication – Staff Concerns Tracking Recommendations:

Internal Audit recommends that MPRB:

• Implement a system that tracks staff safety-related suggestions, reports of hazards, and other information. The system would also ideally include a function to track MPRB's response to a hazard or safety issue. A system could be as basic as a system of spreadsheets to track data, but Internal Audit was informed that MPRB may be working on a revised intranet, so there may be an opportunity to develop a more automated tracking system accessed via the intranet that could automatically generate identifying numbers for submissions and communicate the submissions to a supervisor or staff that would be responsible for addressing them.

MPRB Response

MPRB agrees with the findings and will take the following action to address the recommendations:

Tracking staff safety concerns will be a key expectation of the re-established Safety
Committee. This includes creating and maintaining the system, and reporting outcomes to the
Executive Team.

Acknowledgments

The City of Minneapolis Internal Audit team would like to acknowledge the time, effort and partnership put forth from the Minneapolis Park and Recreation Board. Their enthusiasm, collaboration, flexibility with staff schedules for interviews and providing access to shadow staff conducting their day-to-day duties were very helpful in completing this audit.

Appendix A

Minneapolis Park and Recreation Board Response

MPRB provided responses to each of the findings, incorporated into the body of the report following each recommendations section, and a response memorandum with an attachment:



Administrative Offices 2117 West River Road Minneapolis, MN 55411-2227

Operations Center 3800 Bryant Avenue South Minneapolis, MN 55409-1000

> Phone 612-230-6400 Fax 612-230-6500

www.minneapolisparks.org

President Anita Tabb

Vice President John Erwin

Commissioners Brad Bourn Meg Forney Steffanie Musich Jon C. Olson

Scott Vreeland Liz Wielinski M. Annie Young

Superintendent Javne Miller

Secretary to the Board Jennifer B. Ringold



To: Will Tetsell, City Auditor

cc: Kiril Vassiliev, Senior Internal Auditor

From: Jayne Miller, Superintendent

Date: January 4, 2017

Re: City of Minneapolis Audit Department Response – Minneapolis Park and Recreation Board Worker Safety Audit

Thank you for the timely completion of the Minneapolis Park and Recreation Board Worker Safety Audit. The audit, requested by the Minneapolis Park and Recreation Board (MPRB), evaluated the current safety program for the MPRB. Over the past several years the MPRB has worked on strategies to improve its safety program. Despite this work, we recognize that there are some areas of deficit within the program and sought the audit to help determine priorities and next steps. The findings are helping to shape the scope of work for a Safety & Health Management System (SHMS) consultant that the MPRB will hire through a request for proposal (RFP) process in 2017. Additionally, the report provides valuable baseline data for the future consultant's work with the MPRB. The draft timeline for the SHMS consultant is provided as Attachment A.

For each finding, the MPRB has provided a response and/or an indication of how the finding will be addressed. The MPRB appreciates the time and effort of the City of Minneapolis audit team that produced the report and of the MPRB staff that provided information to the audit team.

A portion of Attachment A to the memorandum is below. This portion shows the draft SHMS Consultant timeline through August 2018, and captures all one-time and ongoing activities. The full attachment extends through September 2020 and shows repetition of ongoing activities.

Attachment A - Proposed Timeline for Safety & Health Management System (SHMS) Implementation Task RFP Development and Consultant Selection
 Prepare, Launch and Advertise RFP Management Commitment

Develop and/or Revise a SHMS Vision, Mission and Goals for Organization									\neg	=				\neg		_	_	\blacksquare
Assignment of Respponsible Person(s) to Coordinate S&H Activities									\neg				\Box	\neg		\top	\top	+
Assistant Superintendent - Division Head					\neg				\neg				\Box	\neg		+	+	+
Department Heads - Directors					-				\dashv				\vdash	\dashv	_	+	+	+
Communicate Revised S&H Policy Statements to All Employees					-		_		\dashv					\dashv	+	+	+	+
Leadership: Superintendent Communicate S&H Staff Expectations	\vdash				-		_		\dashv					\dashv	+	+	+	+
Leadership: Assistant(s) to Superintendent Communicate S&H Staff Expectations					\dashv				\dashv					\dashv	-	+	+	+
Leadership: Directors Communicated S&H Staff Expectations					\rightarrow				\dashv	_				\dashv	_	+	+	+
Leadership: Managers & Supervisors Communicate S&H Staff Expectations	\vdash				\dashv	-	_		\dashv	-				\dashv	-	+	+	+
Integrate S&H into MPRB's practices (e.g., performance mgmt, job descriptions, hiring, purchases, contracts, design and					\dashv										+	+	+	+
planning/development)					-				\rightarrow					_	-	+	+	+
Conduct SHMS Annual Evaluation		_		-	\dashv				-				\vdash	\rightarrow	+	+	+	+
Determine & Establish SHMS Priorities to work on from Evaluation		_			\rightarrow				\rightarrow	_			\vdash	\rightarrow	-	+	+	+
Determine SHMS Corrective Action Plan/Goals for next years focus on Safety		_			_				_					_	_	_	_	\perp
Recognize Employees for S&H Work Practices	_	_			\dashv				\rightarrow					-	-	+	+	4
Document: Records Management/Records Retention	_	_			\dashv	-			\rightarrow					_		-	_	
Develop needs assessment					\rightarrow								Ш	_	_	\perp	\perp	+
Identify and establish standards										_			Ш	_	_	\perp	_	\perp
Develop RFP															_	\perp	\perp	\perp
Review/select vendor																		
Staff Training																		
Implement system]				I				\Box					
Employee Involvement																		
RE-establish Safety Committee:																		
Define Extent of Authority									\Box					\Box		\Box		\Box
Set Realistic & Measurable Goals														\neg				\Box
Develop Safety Committee Policy						\Box							П		\neg		\top	\forall
Conduct Safety Committee Member Training	П					\Box							\sqcap	7	\neg	\top	\top	\forall
Hold Monthly Safety Committee Meetings																		
Report Out Monthly/Quarterly to Labor/Mgmt. Committee									\neg					\neg		\top	\top	
Involve employees in S&H activies (e.g., conduct self-inspections, assessments, incident investigations, develop safe									$\overline{}$					\dashv	_	_	+	
practices, etc.)																		
Conduct monthly S&H meetings involving Employees, Manageres and Supervisors	\vdash				\dashv				$\overline{}$					\dashv	_	+	+	+
Worksite Analysis														\rightarrow	_	+	+	
Obtain Job Hazard Analysis (JHA) for each position									-					-	_	-		4
	\vdash	_			\dashv				\dashv			_	\vdash	\dashv	+	+	+	+
Establish Proposed JHA Work Plan	\vdash	_		-	\dashv				-					\dashv	_	+	+	+
Conduct JHA	\vdash	_	_	-	\dashv	-			_							-		
Maintenance of the System: ongoing	\vdash	_		-	\dashv					_			\Box	_				
Evaluate workplace activities and processes for hazards monthly	\vdash				\dashv				\dashv	_			\vdash	-	_	+	+	+
Re-evaluate workplace activities when there are changes in processes, materials, or equipment/machinery	_				\dashv	-			\dashv	_	_			-	-	+	+	+
Conduct On-Site Inspections, Identify Hazards and take Corrective Actions					\dashv									_	_	\perp	_	+
Provide a Hazard Reporting System for Employees to Report Unsafe and Unhealthful Conditions					_				_	_				_	_	_	_	\perp
Investigate Incidents and Near Misses to Determine Root Causes					_				_					_				\perp
Document: SHMS Software - Records Management/Records Retention					_				_					_	_	_	\perp	
Communicate																		
Training for Employees, Supervisors and Managers																		
S&H Training for all employees; including strategy seasonal, temporary workers																		
Annual New Hire S&H Orientation																		
Develop Annual Required Regulatory S&H Training Matrix					_				_				Ш	_	_	\perp	\perp	\perp
(JHA) identifies required training	_	<u> </u>			\dashv	-		-	\rightarrow	_			\vdash	-	-	+	+	+
Develop Required Refresher Training on a routine basis (or as required)		_			\dashv				\rightarrow					_	_	_	-	
Train on specific safe work practices before an employee begins work					\rightarrow				\rightarrow				\blacksquare	\rightarrow	-	+	+	4
Train for new work processes and when accidents/incidents and near misses occur					_				_					_	_	_	+	4
Document: SHMS Software - Records Management/Records Retention					_				\rightarrow					_	_	_	\perp	
Communicate									_					_	_	_	\perp	
Hazard Prevention and Control -																		
Eliminate & Control Workplace Hazards e.g., engineering controls, workstation design and work practices																		
Utilize OSHA's Hierarchy of Controls																		
Establish a Predictive/Preventive Maintenance Program																		
Keep Employees informed of S&H Activities & Conditions																		
Plan for Emergencies e.g., Evacuation Plan, Train Employees and Conduct Fire Drills.		Ĺ																
Record and Analyze Occupational Injuries & Illnesses																		
Document: SHMS Software - Records Management/Records Retention																		
Communicate					\neg													
Tracking Performance																		
Determine SHMS Metrics & Strategies for choosing the right mix of Indicators																		\top
Determine Preventative (Proactive) vs Post Incident (Reactive) Indicators					\dashv	\vdash							\vdash	\dashv	\top	+	+	+
Measure Performance	\vdash		\vdash		\dashv	\vdash							\vdash	\dashv	+			
Promote a 'Continuous Improvement' Philosophy	\vdash		\vdash		\dashv	\vdash												
Document: SHMS Software - Records Management/Records Retention	\vdash		\vdash	\vdash	\dashv	\vdash		\vdash										
Communicate Results - Continuous	\vdash		-		\dashv	\vdash		\vdash						\rightarrow	+			
		\vdash			\dashv	\vdash		\vdash										
Celebrate Successes - Continuous											$\overline{}$							