NSAA Winter Show HR Session Recap

During the Western NSAA conference, we had quite a turnout at the “Reward and Recognition: Keep them Coming Back” session. Nancy Taylor-Babcock with Wells Fargo Insurance Services and Staci Recksiek from Snowbird teamed up and talked about how to keep seasonal employees coming back year after year. It was an interactive session where the audience participated and discussed varying challenges they have faced and also different rewards that are offered to employees, both seasonal and full-time.

There were many questions around employee benefits: where the future is headed and what can be done to stave off the rising costs, as well as questions from the audience about HSAs and FSAs, etc. Perhaps next year a session on dissecting health coverage options would prove to be valuable—let us know what you think!

Hypothermia Awareness

We are excited to have a “real” winter across the US this year. But very low temperatures create a hazard that should be addressed with your outdoor employees. Long-time mountain residents may need to be reminded of the seriousness of being in cold temperatures for long periods; employees from warmer clients may not understand the serious effects, from frostnip to hypothermia. Don’t assume your employees understand this! A sad reminder of this is a recent incident of an International employee who left the ski area wearing Birkenstocks. His car broke down; in walking for help he suffered severe frostbite to his feet, requiring amputation.

Consider having your ski patrol provide hypothermia and frostbite awareness training to your lift operators, snowmakers, and ski instructors.

- **Symptoms.** Generally, frostbite is accompanied by discoloration of the skin, along with burning and/or tingling sensations, partial or complete numbness, and possibly intense pain. If the affected areas and blood vessels have been severely damaged, gangrene may follow and amputation may eventually be required. If left untreated, frostbitten skin gradually darkens after a few hours. Skin destroyed by frostbite is completely black, and looks loose, flayed, and “flexible. The black skin looks burnt.

- **Treatment.** Frostbite treatment is not initiated until it is likely that the affected areas can remain thawed, as thawing followed by refreezing can lead to more extensive and severe damage to the frostbitten tissue. In severe cases a frozen body part can cause the heart to stop when it thaws as the cold blood starts to circulate and shocks the heart as it flows through; it is therefore crucial to very carefully warm someone who has had severe frostbite.

*If medical attention is immediately available*, the victim is moved to a warm (but not hot), safe area. The frostbitten areas are dressed, but only very carefully; ice crystals that have formed in the body can ruin body tissue when rubbed. Beating or slapping, once commonplace as a measure to increase blood flow to the area, are now known to be very harmful.

*If medical attention is not immediately available*, the affected areas should be placed in warm (but not hot) water until tissues are soft and sensation has returned. The water temperature must be 107.6° F (42° C). Any major fluctuation from this can cause serious harm; at 113° F (45° C) the water will scald the frostbitten tissue, and below 107.6° has also proven to cause harm. Afterward, when the tissues have reached 98.6° F (37° C), the tissues are wrapped in clean, sterile dressings, and moved normally. It is crucial to keep the frostbitten skin from refreezing, which is very harmful.

- **Prevention.** Factors that contribute to frostbite include extreme cold, wet clothes, wind chill, and poor circulation, which can be caused by tight clothing or boots, cramped positions, fatigue, certain medications, smoking, alcohol use, or diseases like diabetes that affect the blood vessels.

If caught in a severe snowstorm, one should find shelter early or increase physical activity to maintain body warmth.

“**Prevention is better than cure.**” People susceptible to frostbites should wear woolen socks/gloves/caps in extreme cold.

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