

Table 1. Counting Occupational Injuries and Illnesses: Taking Steps to Close the Gaps: Highlights of Agency Accomplishments, 2009-2013

Bureau of Labor Statistics

- Undercount research studies:
- Matching WC cases to SOII days-away-from-work cases
- Multi-source surveillance
- Employer interviews on OSHA recordkeeping, WC reporting and SOII reporting
- Articles (in the Monthly Labor Review) and FAQs addressing SOII completeness and research
- Expansion of SOII to public sector
- Producing rates for case circumstance and worker characteristics by occupation
- Pilot collection of case and demographic data on job transfer and restriction transfer cases
- Proposed report on hospitalization cases using available case and demographic data
- Exploration of auto-coding to improve efficiency and quality of data coding

Occupational Safety and Health Administration

- Proposed change in Fatality/Catastrophe reporting to include injury incidents involving amputations or one or more in-patient hospitalizations
- Proposed change from SIC codes to NAICS to update list of industries partially exempt from routine OSHA log requirements
- Development of a proposal that employers submit occupational injury and illness data electronically on a timely basis
- Guidance on Employer Safety incentive and Disincentive Policies and Practices that discourage injury and illness reporting
- National Emphasis Program on record-keeping and analysis of findings

National Institute for Occupational Safety and Health

- Included an occupational health supplement in the 2010 and 2015 NHIS and have plans to repeat in 2015 and periodically, thereafter
- Collecting industry and occupation (I/O) (2013-2016) in the Behavioral Risk Factor Surveillance Survey as an optional module with goal of incorporating I/O in the BRFSS core module as key demographic data.
- Conducted the Childhood Agricultural Injury Survey (CAIS), Occupational Injury Survey of Production Agriculture (OISPA) and will conduct a new round of injury and musculoskeletal pain modules in the National Agricultural Workers Survey (NAWS)in 2014-2015
- Expanded support for state-based occupational health surveillance programs from 15 to 23 states
- Multi-pronged initiative to promote inclusion of occupational information in Electronic Health Records
- Development of the National Industry and Occupation Coding System (NIOCCS): software tool for automatic coding of occupation and industry

- Conducted two workshops on use of workers' compensation data for surveillance and established a new NIOSH *Center for Workers' Compensation Studies*
- Evaluating NEISS-Work data collection through surveys of workers to assess barriers they experience in reporting work-related injuries and illnesses to hospitals and employers
- Collecting through NEISS-Work reported injuries among EMS workers treated in EDs to understand injury circumstances and worker characteristics
- Assessing utility of trauma registry data for reporting severe occupational injuries among EMS workers.
- Established State-based Clearinghouse located on the NIOSH website to provide access to state-generated occupational health and exposure reports. <http://www.cdc.gov/niosh-survapps/statedoc>
- Established NIOSH Worker Data and Statistics Gateway to provide quick access to a broad range of CDC/NIOSH surveillance resources connected to research initiatives across the Institute. The Gateway incorporates the Worker Health eChartbook, a web-resource of descriptive epidemiologic reference on occupational morbidity and mortality. <http://www.cdc.gov/niosh/data/> and data by industry sector. <http://www.cdc.gov/niosh-survapps/Gateway/Home.aspx>
- Published reports on health status of eight sectors based on 1997-2007 NHIS general health questions
- Released enhanced and updated Occupational Injury and Illness Classification System resource web site in collaboration with BLS, which provides graphical interfaces to the BLS-redesigned OIICS Code Trees and prior versions, along with downloadable software applications. <http://www.cdc.gov/wisards/oiiics/>

State Agencies

NIOSH funds 23 state health agencies and in several instances, labor departments, to compile Occupational Health Indicators and use health data sources to track specific conditions. (See below). Additionally, 41 states have been funded to track elevated blood leads. (NIOSH has informed the states that funding for ABLES will end August 31, 2013). See the CSTE publication: *Putting Data to Work for Worker Safety and Health: Successes in the States* for examples of recent success stories from state programs <http://www.cste2.org/webpdfs/ohsuccessstories.pdf>.

Condition/population under targeted surveillance (# states)

Acute Chemical Exposures (3)	Carpal Tunnel Syndrome (1)
Acute Pesticide Toxicity (6)	Cholinesterase Blood Levels (3)
Amputations (5)	Crush Injuries (1)
Arsenic Blood/Urine Levels (7)	Injuries (Fatal) (9)
Burns (4)	Injuries (Non-fatal) (3)
Cadmium Blood/Urine Levels (5)	Injuries (Teenagers) (3)
Carbon Monoxide Poisoning (7)	

Lead (41)	Tick borne disease (1)
Logging Injures (1)	Trucking Industry including Waste Management (1)
Mercury Blood/Urine Levels (8)	Tuberculosis (1)
Second hand cigarette smoke exposure (1)	Uranium miners (Occupational diseases of former workers) (1)
Silicosis (2)	Workplace Violence/Assaults (1)
Skull Fractures (1)	Work-related asthma (6)
Temporary Agency Workers (2)	

Inclusion of Industry/Occupation in BRFSS (22)

The Behavioral Risk Factor Surveillance System (BRFSS) is an annual state-based random digit-dialed telephone survey of the non institutionalized US civilian adult (≥ 18 years of age) population. The survey is designed to collect information on both health conditions in the population as well as the risk factors that may influence them. In 2013, 22 states have added questions on occupation/industry so prevalence of health conditions/risk factors will be available by occupation/industry.

California	Florida	Georgia	Illinois
Louisiana	Maryland	Massachusetts	Michigan
Minnesota	Mississippi	Montana	Nebraska
New Hampshire	New Jersey	New Mexico	New York
North Dakota	Oregon	Utah	Washington
Wisconsin	Wyoming		

Occupational Health Indicators (28)

There are 20 Occupational Health Indicators (OHIs) compiled by 28 states. See the website of the Council of State and Territorial Epidemiologists (CSTE) for a description and the data for each indicator. Several additional OHIs are also under development. (<http://www.cste.org/?OHIndicators>).

California	Colorado	Connecticut	Florida
Georgia	Illinois	Iowa	Kentucky
Louisiana	Maryland	Massachusetts	Michigan
Minnesota	Missouri	Montana	Nebraska
New Hampshire	New Jersey	New Mexico	New York
North Carolina	North Dakota	Oregon	South Dakota
Texas	Washington	Wisconsin	Wyoming