What’s the problem? Just the facts.

Did you know that in 2003, 75 people died from work-related injuries in Oregon and more than 58,000 people reported being hurt or getting sick from their jobs? Work-related injuries and illnesses cost $447 million annually in workers’ compensation claims in the state, and the indirect costs are likely to be more than twice as high. Workplace injury and illness can be prevented. While Oregon Occupational Safety and Health Division enforces regulations and issues fines to offenders, the role of the Oregon Worker Injury and Illness Prevention Program (OWIIPP) is to collect the information needed to develop prevention plans that stop work-related injuries and illnesses before they happen, saving both lives and money. By working with as many partners as possible, OWIIPP is leveraging resources to do just that.

The solution: Keeping workers healthy and safe requires good information.

Any successful approach to making the workplace healthy and safe must begin with good data. Just as researchers tracked the facts about polio in order to develop a vaccine, we need to know everything we can about when, where, how and why Oregonians are getting sick or hurt on the job in order to protect them. Once OWIIPP collects it into confidential databases, this information can help our partners, including employers, unions, trade associations, medical professionals, state agencies and others to make the workplace safer by:

» Identifying hazards, risk factors and trends
» Directing resources
» Creating prevention strategies
» Evaluating the success of various intervention

What we don’t know is hurting us

Putting Data to Work is produced by the Oregon Worker Illness and Injury Prevention Program (OWIIPP)

OHS Department of Human Services,
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Environmental and Occupational
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Preventing work-related injury and illness makes good business sense

The productivity and profitability of the Oregon workforce depends on the health of its workers. For an employer, the cost of carefully tracking workers’ health or investing in safe equipment is far less than the costs resulting from a disabling injury or illness.

Oregon dermatitis prevention

After early success in promoting latex safe policy in health services, our surveillance data showed that other industries were using single-use latex gloves. In addition to latex allergy education efforts, we worked with Oregon Environmental Public Health Section to change the Oregon Food Code, prohibiting latex glove use in food service. This protects 113,000 restaurant employees, and even more customers, from latex exposure each year.

OWIIPP staff collaborated on drafting and distributing a Latex-Free Dentistry Guide and Latex Allergy Resource guide, with the Pacific Northwest Foundation and Department of Human Services Oral Health Advisory Board, Oregon was awarded the National Occupational Research Agenda Partnership Award in 2001, for our latex work and efforts to prevent plant-related dermatitis (poison oak) in the logging industry. We collaborated with state and local agencies, and insurance, pharmaceutical and logging companies.

Oregon burn injury prevention

Our burn program focuses on collaborating to develop and implement data-driven prevention strategies. Over 500 burn injury claims are identified annually through our surveillance system; approximately 350 of these are accepted disabling claims. Most of these are thermal burns and we have adapted educational materials from other states on burn prevention and first aid. These have been distributed through an industry organization, a private insurer and local health departments. Through our data we have identified youth and aging work force as priority populations, and three priority industries: Food Service, Manufacturing (steel foundries; canning/freezing fruits and vegetables; millwork) and Construction.

What’s new in occupational health: indicators from thirteen states

This year, Oregon participated in a new pilot program to improve systems of occupational health surveillance. “Calendar of Workplace Health and Safety. The Occupational Indicators Project” provides a snapshot of workers in 13 states in 2000 – characterizing, for the first time, numerous aspects of workplace risks and hazards. One of the 19 indicators of worker health is work-related amputations, for which Oregon’s rate of 16 claims per 100,000 workers was the highest among reporting states.

Oregon pesticide poisoning prevention

DHS collaborates with seven other state agencies to address pesticide poisoning in Oregon. Although this is a reportable condition, the Oregon Poison Center is the main source of case reports. In addition to investigating reports and providing individual prevention consultations, OWIIPP:

- Help health care providers better understand pesticide poisoning. OWIIPP worked with Dr. Sudakini of Oregon State University to create an educational DVD. Staff distributes other materials and make presentations to health care provider groups across the state to ensure appropriate clinical and public health response.
- Improve pesticide safety and exposure response. OWIIPP trains migrant clinic staff and community health workers, and provides educational materials for outreach education to migrant and seasonal farmworkers.

Oregon Fatality Assessment and Control Evaluation

Investigations conducted through the OR-FACE program allow the identification of factors that contribute to fatal occupational injuries. Staff at Oregon Health Science University’s Center for Research on Occupational and Environmental Toxicology use this information to develop comprehensive recommendations for preventing similar deaths.

Putting the Data to Work

Twenty years ago, we didn’t even know how many workers were killed on the job, much less how to prevent the deaths. Today, because we’ve collected information about occupational fatalities, injuries and illnesses, we’ve created numerous prevention practices and policies – whether redesigning office chairs and computer keyboards; regulating painters’ exposure to lead; or educating nurses about how to avoid back injuries when lifting heavy equipment.

What we don’t know is hurting us

- What kinds of workers are at highest risk of developing asthma: Beauticians? Painters? Firefighters?
- What are the risks for non-citizens working without permits?
- What hazards affect Americans returning to the workforce after retirement?

Although various agencies collect data about occupational hazards, we don’t know nearly enough about the circumstances surrounding work-related risks or about new threats in emerging industries to answer these types of questions.

Summing up: the bottom line

In 2003, 58,000 non-fatal injuries and illnesses occurred in the state – more than 150 each day. By learning more about the circumstances surrounding these incidents, we can help prevent them – saving lives and money.
Preventing work-related injury and illness makes good business sense

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