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Using Hospital Data to Identify Disparities in Work Related Injuries and Illnesses in New York State

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Back Bay D, Sheraton Hotel

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BACKGROUND: Work-related injuries and illnesses can have serious and costly effects, from high medical bills to reduced work performance and lost productivity. More serious occupational injuries and illnesses may result in either emergency department visits or in-patient hospitalizations. The aim of this project is to conduct an examination of emergency department (ED) and in-patient hospitalization discharge data (HD) to assess the benefits of hospital data in describing the distribution and nature of visits for non-fatal work-related injuries and illnesses in New York State (NYS).

METHODS: Statewide ED and HD datasets were used to classify non-fatal work-related hospital visits from 2005-2010. Expected payment by workers' compensation (WC) was used as an indicator of probable work-relatedness of the patient's condition. Demographic characteristics of patients seeking hospital care (both ED and HD) for work-related conditions were described and the patterns of diagnoses, causes of injury and place of injury were identified. Patterns of hospital visits for work-related conditions were compared to visits for non-occupational conditions where appropriate. Where possible, average medical charges for hospital visits were examined and compared by visit and by type of diagnosis.

RESULTS: There were on average, 14,800 work-related HD and 185,000 work-related visits to the ED each year in NYS. Males have almost twice the rate of work-related ED visits and HD than females. There has been an overall increase in the rates of ED and HD visits in both Hispanic and non-Hispanic workers during the period 2005-2010. Although the rates among Hispanic and non-Hispanic workers are similar in NYS as a whole, the rate of ED and HD admissions among Hispanic workers residing in New York City (NYC) was almost twice that of non-Hispanic workers. The rate of work-related ED visits among Blacks in NYC, was more than twice the rate of those of White or Asian race, while Native Americans have the highest rate of work-related HD visits in all of NYS. Commonly identified diagnoses among patients include injuries and poisonings, disorders of the musculoskeletal system, and respiratory disease. A large percentage of work-related HD and ED injury-related visits are due to falls from slipping, tripping or stumbling, falls from a ladder and motor vehicle traffic accidents.

CONCLUSIONS: Analysis of hospital data and identification of worker characteristics and risk factors that most contribute to work-related injuries and illnesses, can help direct programs and guide interventions, education and prevention efforts in NYS.

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