

Underreporting of Injuries is Greater among Black Compared to White Workers



Background:

- Underreporting of occupational injuries is well documented, posing a challenge to appropriately compare safety performance, and potentially obscuring health disparities among vulnerable groups of workers.
- Patient-care workers are frequently exposed to sharps* injuries, which can involve the risk of serious illness. Previous studies have found that substantial numbers of injuries are not included in employer injury records, which can compromise prevention efforts.

Research Conducted:

- One study linked self-reported data from non-physician patient-care workers' surveys to injury records from employers to examine if there were any discrepancies on injury reporting.
- A second study assessed racial and ethnic disparities in injury reporting using both survey and administrative injury data from a cohort of hospital nurses and aides providing direct care.

Results:

- More than half (64%) of the sharps injuries that workers said they had experienced were not captured in their employer's injury records. Workers also indicated they had not reported some injuries.
- More than half of the sharps injuries that workers said they had reported did not appear in the Occupational Health Services (OHS) data.
- The undercount of occupational injuries in administrative data may be greater among black compared to white workers, leading to underestimates of racial disparities in workplace injury.

Why this is important:

- Self-reports and administrative data showed differences in injury rates suggesting that not all injuries are recorded.
- Sharps injuries are preventable, and elimination of resulting exposures is an important public health goal.
- Evidence of injury underreporting emphasizes the need to improve reporting mechanisms and take steps to understand how incidents might be lost before they are recorded.
- Underreporting appears to be greater among minority patient-care workers, obscuring higher injury rates.

Implications:

- More needs to be done to identify aspects of the hospital work organization that could be changed to make injury reporting more consistent, accurate, automatic and accessible to everyone.
- Measuring injury rates using only administrative records does not necessarily provide a complete picture of the actual number of injuries occurring at the workplace.
- More attention should be paid to racial disparities both in reporting and in injury rates so we can identify better approaches to prevention.

Summary based on the following papers:

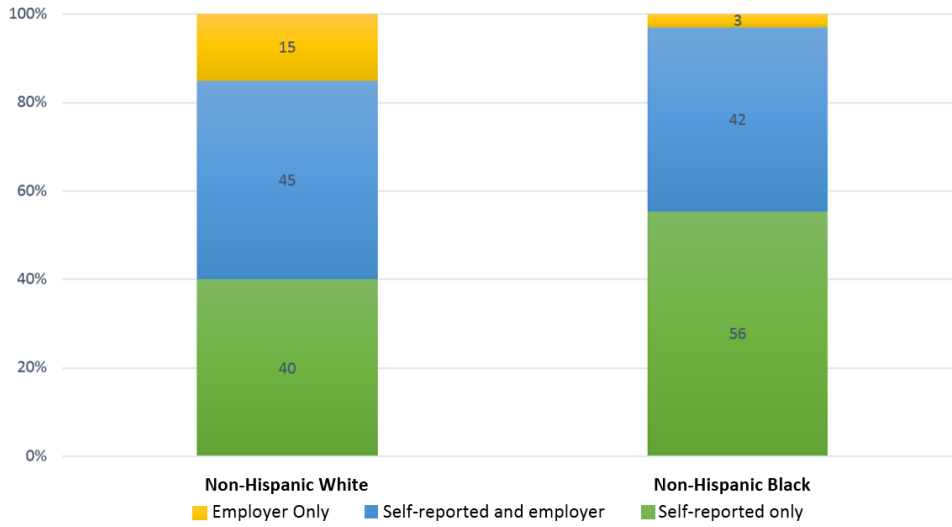
Sabbath EL, Boden LI, Williams JA, Hashimoto D, Hopcia K, Sorensen G. Obscured by administrative data? Racial disparities in occupational injury. Scand J Work Environ Health. 2017 Mar 1;43(2):155-162. doi: 10.5271/sjweh.3611.

Boden, L. I., Petrofsky, Y.V., Hopcia, K., Wagner, G.R., & Hashimoto, D. Understanding the Hospital Sharps Injury Reporting Pathway. American Journal of Industrial Medicine, 2015 Mar;58(3), 282–289. <http://doi.org/10.1002/ajim.22392>

* Sharps are sharp medical devices such as needles.

For more information, please see the Center's website: centerforworkhealth.sph.harvard.edu.

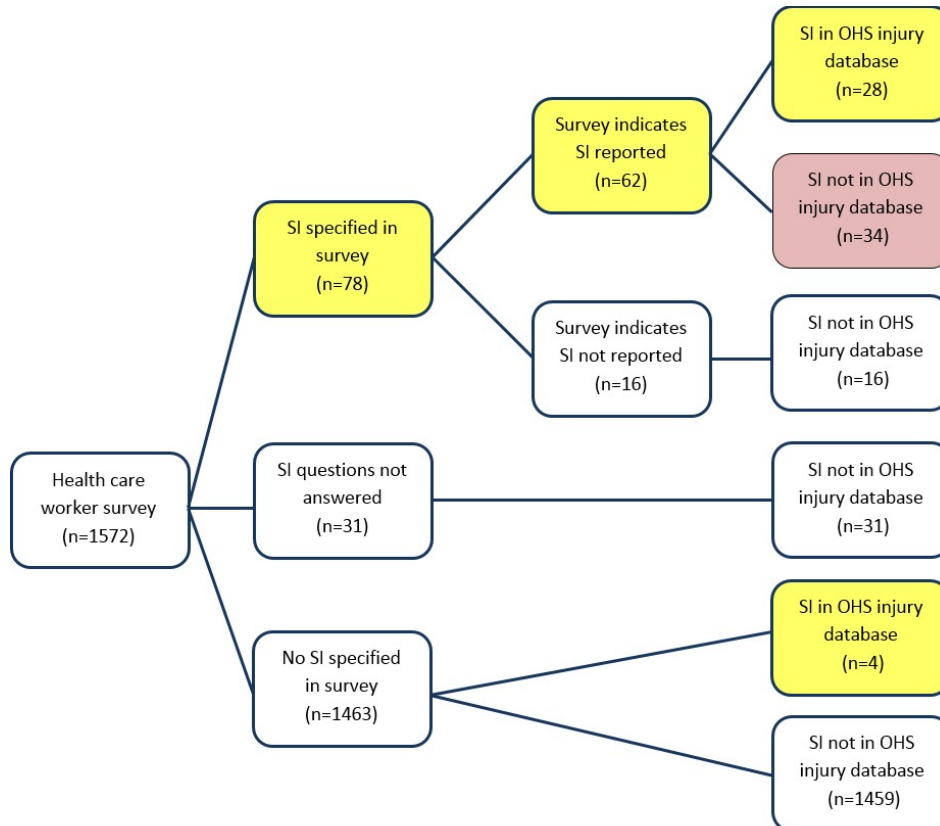
Injury Rates per 100 Full-time equivalent workers (FTEs)



Sabbath et al. (2017)

Sharps injury reporting in survey of health care workers and Occupational Health Services (OHS) database

Boden et al. (2015)



SI: Sharps injuries