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Injury and Illness Records – Make the Data Work for You!

PEF Statewide Safety and Health Conference December 11-13, 2023

Agenda

- Why Data Analysis?
- Injury and Illness Reporting and Recording Requirements
- Injury and Illness Data Sources
- SH900 Log Data Analysis
- Workers' Compensation Report Analysis
- Agency Specific Data Analysis
- Workers' Compensation and SH900 Data Analysis XL Templates
- Discussion

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Why Injury and Illness Data Analysis?

"Those who cannot remember their past are condemned to repeat it." – George Santayana

"Insanity is doing the same thing over and over and expecting different results." – Albert Einstein

"If the cause of a workplace incident is not addressed, controlling it is still a preventative measure for those it has not yet effected." – Mark Stipano, CIH, CSP

Injury and Illness Reporting and Recording Requirements

- All NYS Public Employers are required to keep records of "recordable" workplace injuries and illnesses by 12 NYCRR 800.1
- 801.0 Purpose ... provides for recordkeeping by public employers ... for developing information regarding the <u>causes and prevention</u> of occupational injuries and illnesses ...
- 801.35(a)(1): The employer must inform each employee of how he or she is to report an injury or illness to the employer ...
- <u>https://dol.ny.gov/public-employee-safety-health</u>

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Injury and Illness Reporting and Recording Requirements

- For the state agencies, the Accident Reporting System (ARS) was developed to create uniform incident reporting and assist with workers' compensation claim administration.
- The system is run by the NYS Civil Service Department and has a call center for receiving injury and illness reports.
- Some agencies have their own incident reporting forms.



Injury and Illness Reporting and Recording Requirements

	New York Sta Department Log of Work SH-900		es and Illnes	sses Form	Establishment Name Street Address City						-				r Year of			
Part 801 years. F Violation You mus	n is required by the Com (12 NYCRR Part 801) ar allore to maintain this for and Order to Comply, t record information abo thed injury or illness that	nd must be kept in th im can result in the ut every work-relate	he establishment issuance of a No	for five must also record sig physician or licenses linesses that meet a put every instructions.	ransfer, days away from work, or medical t nilicark work-related injuries and limeses it heath care professional. You must also ny of the specific recording criteria found in one line for a single case if necessary.	at are diagnosed by ecord work-related in	a iures i	and	a manner while the i purposes.	contains in that protec nformation Refer to t s privacy o	is the conf is being u he instruct	identiality sed for oc ions (SH-I	of empl cupatio 301) for	loyees nal sa types	to the elevant lety and of illner	extent p health ss and	ossibi	le
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Case No.	B. Employee Name	C. Job Title	D. Date of Injury or Onset of liness (Mo./day)	E. Where the Event Occurred (e.g., Loading dock, north end)	F. Describe injury or illness, parts of bo object/substance that directly injured on (e.g., Second degree burns on right acets/ene torch)	made person ill forearm from	1 Ceath	H. Days Away From	Remaine L.Jub Transfer or Restriction	d at Work J. Other Recordable Cases	K, Away torn Wark	L-On-Job Translar or restriction	Antiq .	2. Skin Dison	3. Respirato Condition	F. Poisoning	5. Hoaring L	6. All Other
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vision of Re	search and Statistics, 75	Varick St., 7th Floo	or, New York, NY	10013. Telephone (212) 775-	3344.	TOTALS												

Injury and Illness Reporting and Recording Requirements

DEPARTMENT OF LABOR	liế t	Division of Safety and Health Public Employee Safety and Health State Office Campus Building 12, Room 158 Albany, NY 12240
	UMMARY OF WORK-RELATE INJURIES AND ILLNESSES FORM SH-900.1	Calendar Year
	was have the right to review this form. They also h	pational injuries or illnesses occurred during the year. save limited access to the Log (\$H 900) or its equivalent.
1. ESTABLISHMEN	T INFORMATION	2. EMPLOYMENT INFORMATION
ESTABLISHVENT NAME		If you don't have accurate figures, see the instructions on the back of this sheet.
STREET ADDRESS CITY, STATE, 2P CODE		AVERAGE NUMBER OF EMPLOYEES
INDUSTRY DESCRIPTION (s.g., slige fre depart NORTH AMERICAN INDUSTRIAL CLASSIFICAT		TOTAL HOURS WORKED BY ALL EMPLOYEES LAST YEAR
Enter the column totals from the Log of Occupat correspond to the columns on the Log. If a cate	ional Injuries and Illnesses (SH 999) for each -	collegory (column labels under each line
3. NUMBER OF CASES	4. NUMBER OF DAYS	5. INJURIES AND ILLNESS TYPES
3. NUMBER OF CASES DEATHS [Cox G] DANY, ARAY [Cox G] YHOW WORK [Cox G] OR HESTROCTON [Cox H] OTHER RECORD. [Cox B] ARLE CASES [Cox J]	4. NUMBER OF DAYS	5. INJURES AND ILLESS TYPES NUMES Gal 0 SKUDDINGERS Gal 0 SKUDDINGERS Gal 1 POSORIES Gal 3 POSORIES Gal 4 AL OTHER LUESSE Gal 9
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Injury and Illness Reporting and Recording Requirements



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- PESH Injury and Illness Reporting forms (SH900 and SH900.1)
- Worker's Compensation Report (NYS Civil Service)
- Workplace Violence Prevention Incident Reports
- Agency Specific Data (OMH OIRS, DOCCS UIRs, etc.)

Injury and Illness Data Source SH900

	Department of Log of Work I SH-900		es and Illnes	ses Form	Establishment Name Street Address City	Stat	te	Zio	Code						Year of	20	-	
Part 801 years. F Violation You mus	is required by the Comm (12 NYCRR Part 801) and allure to maintain this for and Order to Comply. It record information above	d must be kept in th m can result in the ut every work-relate	te establishment issuance of a No	for five must also record sig bloc of physician or licensed linesses that meet a put every instructions.	rander, days away from work, or medical the nificant work-related injuries and illnesses the health care professional. You must also re ny of the specific recording oriteria found in to one line for a single case if necessary.	atment beyond fin t are diagnosed b cord work-related	st aid. ' ry a iniures	fou 4.	This form a manner while the i purposes.		formation r ts the conf is being u he instruct	identiality sed for oc ions (SH-I	of emp coupation 901) for	loyees mai sa r types	to the e lety and of illne	extent p d health ss and	ossib	le.
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	- 0			1				10	1	1	1.	6 - 2	1	1	1	1	1 1			

Injury and Illness Data Source SH900.1

STATE OF NEW YORK DEPARTMENT OF LABOR		Division of Safety and Health Public Employee Safety and Health State Office Campus Building 12, Room 158 Albany, NY 12240
	SUMMARY OF WORK-RELATI INJURIES AND ILLNESSES FORM SH-900.1	Calendar Year
	tives have the right to review this form. They also	capational injuries or illnesses occurred during the year. have limited access to the Log (SH 900) or its equivalent.
1. ESTABLISHNEN	IT INFORMATION	2. EMPLOYMENT INFORMATION
ESTABLISHWENT NAME		If you don't have accurate ligures, see the instructions on the back of this sheet.
STREET ADDRESS GTV, STATE, 2P CODE		AVERAGE NUMBER OF EMPLOYEES
INDUSTRY DESCRIPTION (s.g., slige fre depa NORTH AMERICAN INDUSTRIAL CLASSFICA)		TOTAL HOURS WORKED BY ALL EMPLOYEES LAST YEAR
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	6. CERTIFICATION	
I certify that I have examined this d	cournerit and that to the best of my knowle	edge the entries are true, accurate, and complete.
SIGNATURE	117	1.E
PRINT NAME		ATE
5H-900.1 (18-05)		

- Under Section 7 of the Civil Service Law, Chapter 171 of the Laws of 2007, the NYS Civil Service Department is required to create an annual summary report of Workers' Compensation for the NYS Executive Branch Agencies.
- The report is by fiscal year.
- It provides information for agencies with rates 25% above the state average.
- The data in the report comes from the New York State Insurance Fund (NYSIF) and the ARS system.

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Injury and Illness Data Sources

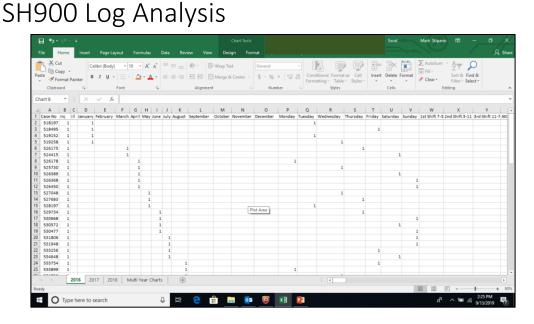


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	Workers' Compensation Clasms Annual Report – Fiscal Year 2022-23 Table of Contents							
	Table of Contents. 2 Introduction 3 Background 3 Exploratory Notes 4							
	Summary of Findings 6 Table 1: Worker's Compensation Incident Datals Selected New York State Agencies 7 Tables 2A and 28: Worker's Compensation Last Time Selected New York State Agencies 17							1.00
	Interced New York State Approvements (1) Table XL and SR Worker's Compensation Costs Selected New York State Approvements Selected New York State Approvements Selected New York State Approvements Selected State State Approvements Selected State State Approvements Selected State State Approvements Selected State State State State State State State State State State State State State State State State State State State State S							
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Injury and Illness Data Sources

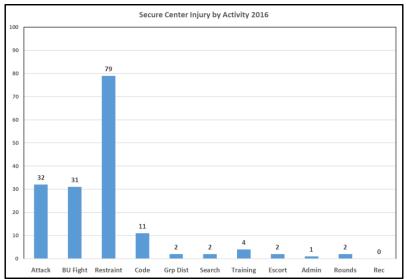
- 12 NYCRR 800.6 is the New York State Department of Labor Workplace Violence Prevention regulation.
- Under this regulation all public employers must establish a system to record the workplace violence incidents.
- Those incident reports must be reviewed annually in conjunction with the AERs for their represented employees to identify workplace violence risks and associated control measures.
- Some of these incidents will also be reported on the PESH recordkeeping forms (SH900, 900.1 and 900.2).

- Some executive branch agencies collect other data that is related to workplace injuries and illnesses.
- That data may be collected to fulfill other regulatory requirements for that agency.
- Examples include:
 - OMH Occupational Incident Reporting System (OIRS), Security 250 reports, etc.
 - DOCCS Unusual Incident Reports (UIRs), Incarcerated Individual Misbehavior Reports, etc.
 - OCFS Resident Disciplinary Reports.



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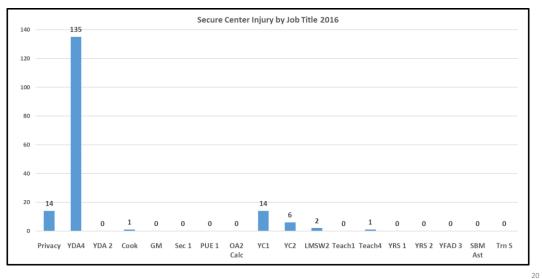
SH900 Log Analysis



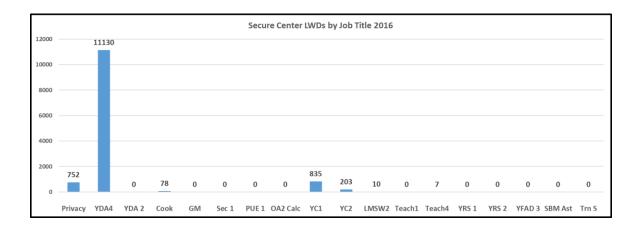
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SH900 Log Analysis



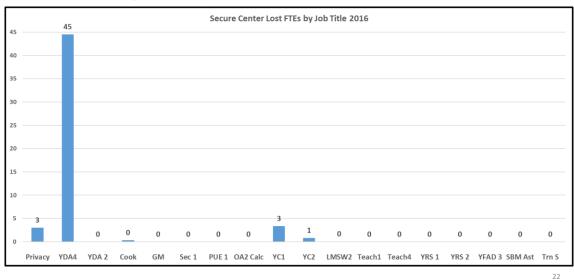
SH900 Log Analysis



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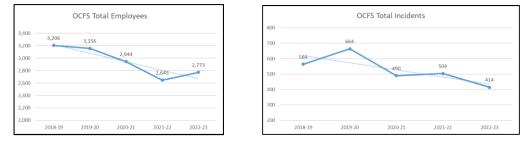
SH900 Log Analysis

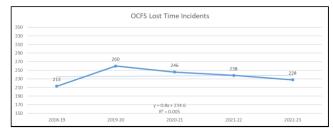


Workers' Compensation Report Analysis

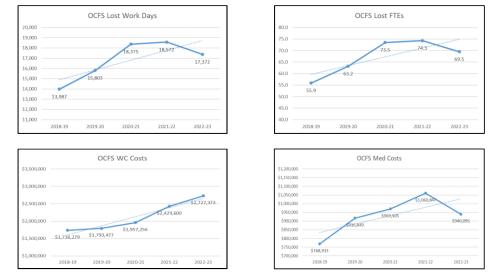
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CSEA				Report Y	'ears - 20	18 - 2023		Table 3A - Comp C	osts incidents file	Plot Area	Table 38- all Com	e Costs Paid	
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2018-19	3,206 3,156	564	17.6%	213		13,987 15,803	55.9		\$768,933 \$916,849	\$2,505,212 \$2,710,326	\$25,843,902 \$20,337,657	\$3,378,661 \$3,278,822	\$29,222,563 \$23,616,479
2019-20	2,944	490	16.6%	246	8.4%	15,803	73.5		\$969,905	\$2,927,161	\$21,800,863	\$3,589,682	\$25,390,545
2021-22	2,645	504	19.1%	238		18,572	74.3		\$1.060.847	\$3,490,447	\$18,181,452	\$3,413,445	\$21,594,897
2022-23	2,773	414	14.9%	230		17,372	69.5		\$940,095	\$3,667,468	\$20,748,825	\$3,259,522	\$24,008,347
Total OCFS		2,636		1,185		84,109		\$10,643,985	\$4,656,629	\$15,300,614	\$106,912,699	\$16,920,132	\$123,832,831
OCFS Ann. Avg	2,945	527	17.9%	237	8.1%	16,822		\$2,128,797	\$931,326	\$3,060,123	\$21,382,540	\$3,384,026	\$24,766,566
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Workers' Compensation Report Analysis



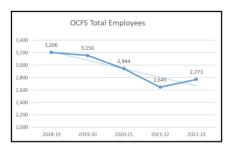


Workers' Compensation Report Analysis

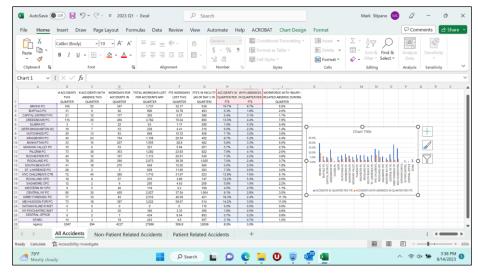


Workers' Compensation Report Analysis

Correlations:	
Employees to Total Incidents:	72.2%
Employees to LT Incidents:	-1.0%
Employees to WC Costs:	-88.1%
Emplouyees to WC Med Costs:	-84.0%
Emplouyees to LDWs	-84.9%
Employees to Lost FTEs	-84.9%







Agency Specific Data Analysis (OMH OIRS)

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020 Q1	1405	\$70	5884	29870	553.2	13754	10.23%	4.15%															
020 02	1056	439 475	6873	38983	721.9 677.1	13785	7.7%	3.2%															
020 Q4	1006	440	6019	31881	590.4	13335	7.5%	3.3%															
021 01	985	387	5288	50711	568.7	13248	7.4%	2.9%															
021 02	1069	450	7012	32756	606.6	13194	8.1%	3.4%															
021 Q3	1105	472	6950	37770	6/29.4	15025	8.5%	3.6%															
2021.04	896	332	5077	34518	639.2	12944	6.9%	2.6%															
1022 Q1	881	299	4264	29978	555.2	12758	6.9N	2.3%															
022 Q2	1042	425	5416	30458	564.0	12846	8.1%	3.3%															
022.Q5	1045	408	6421	52314	598.4	12845	815	3.2%															
1022 Q4	927	349	4664	27487	509.0	12927	7.2%	2.7%															
025 Q1	2047	394	4227	27566	505.8	13036	8.0%	3.0%															
	OMH	Agency Total Acc	idents this Quarte	u	0MH	Agency Accident Quart	with Absence the	ds.															
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	1300	1006 per 1008 11	3842 10	45 1047	120. 421. 47	440 450	425 4	10 mil															
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2020 Q2	42	20	289	3,021	55.9	555	7.6%	3.6%	22	47.62%	52.38%	
2020 Q3	43	20	241	2,651	49.1	542	7.9%	3.7%	23	46.51%	53.49%	
2020 Q4	56	31	381	2,574	47.7	539	10.4%	5.8%	25	55.36%	44.64%	
2021 Q1	60	32	517	2,757	51.1	530	11.3%	6.0%	28	5.3.33%	46.67%	
2021 Q2	48	24	310	3,153	58.4	532	9.0%	4.5%	24	50.00%	50.00%	
2021 Q3	45	30	526	3,225	59.7	527	8.5%	5.7%	15	66.67%	33.33%	
2021 Q4	46	25	354	2,363	43.8	536	8.6%	4.7%	21	54.35%	45.65%	
2022 Q1	46	19	219	2,189	40.5	525	8.8%	3.6%	27	41.30%	58.70%	
2022 Q2	63	26	304	1,985	36.8	546	11.5%	4.8%	37	41.27%	58.73%	
2022 Q3	50	23	577	2,201	40.8	543	9.2%	4.2%	27	46.00%	54.00%	
2022 Q4	62	26	.334	2,088	38.7	537	11.5%	4.8%	36	41.94%	58.06%	
2023 Q1	106	52	347	1,737	32.2	538	19.7%	9.7%	54	49.06%	50.94%	
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Agency Specific Data Analysis (OMH OIRS)



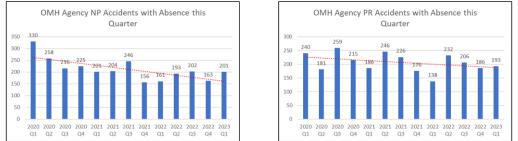


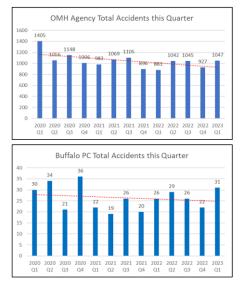




Agency Specific Data Analysis (OMH OIRS)









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Workers' Compensation Report and SH 900 Log XL Data Analysis Templates

- In your conference information is an XL spreadsheet template that can be used to perform an analysis of workers' compensation data for five years.
- A second XL spreadsheet template that can be used to perform an analysis of SH900 data for up to 25 incidents, 5 work activities, 8 job titles, 10 work areas, 20 body parts and 5 illness types.

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Workers' Compensation Report XL Data Analysis Template

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Workers' Compensation Report XL Data Analysis Template

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Data Analysis Activity

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Discussion

Questions?