

US Department of Energy  
Office of Health, Safety and Security

# Illness and Injury Surveillance Program

Office of Illness and Injury Prevention Programs  
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**Further Information and Reports Available At:**

[http://www.hss.energy.gov/HealthSafety/IIPP/hservices/epi\\_surv.html](http://www.hss.energy.gov/HealthSafety/IIPP/hservices/epi_surv.html)

**Program Overview:**

- Department's **only** multi-site program focused primarily on *health* of current workers
- Monitors health of over 79,000 **current** contractor workers
- Program evaluates and communicates potential impact of DOE operations on the health of workers
- Maximizes use of existing data to reduce fiscal burden
- Individual site analyses summarized annually
- Reports of the entire DOE complex provide programmatic overview of workforce health
- Program staff provide epidemiologic and public health expertise to investigate worker health concerns

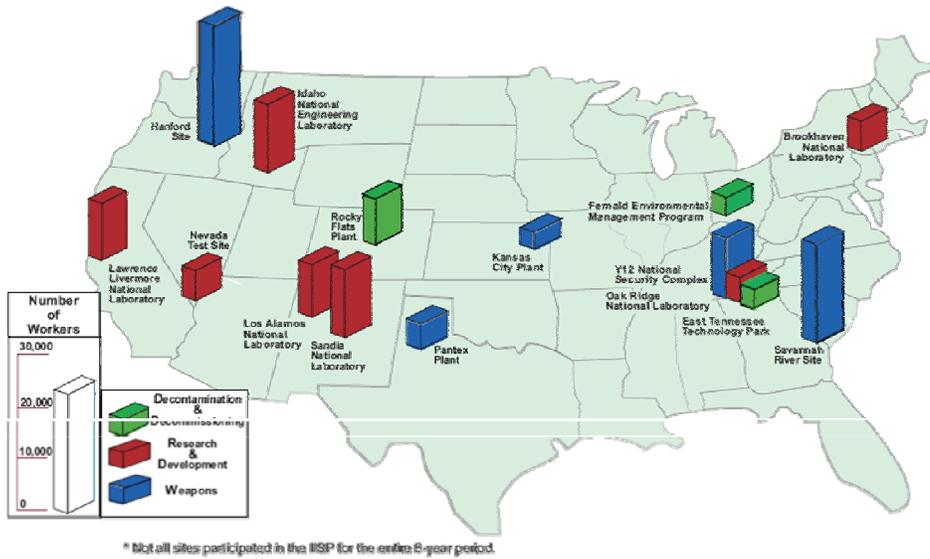
**Program Goals:**

- Provide ongoing assessment of worker health and safety by monitoring both occupational and non-occupational illness and injury among current workers
- Identify groups at potential increased health risk
- Address worker and management health concerns
- Facilitate site investigation of potential health and safety issues
- Facilitate evaluation of risk reduction measures
- Maximize use of existing health data sources

**Program Status:**

- Time depth permits trend analyses
- Dosimetry data module in development
- IH data pilot initiated
- New sites added
- Internet access to reports
- Year 2007 reports in preparation

## Past and Present Participating IISP Sites\*

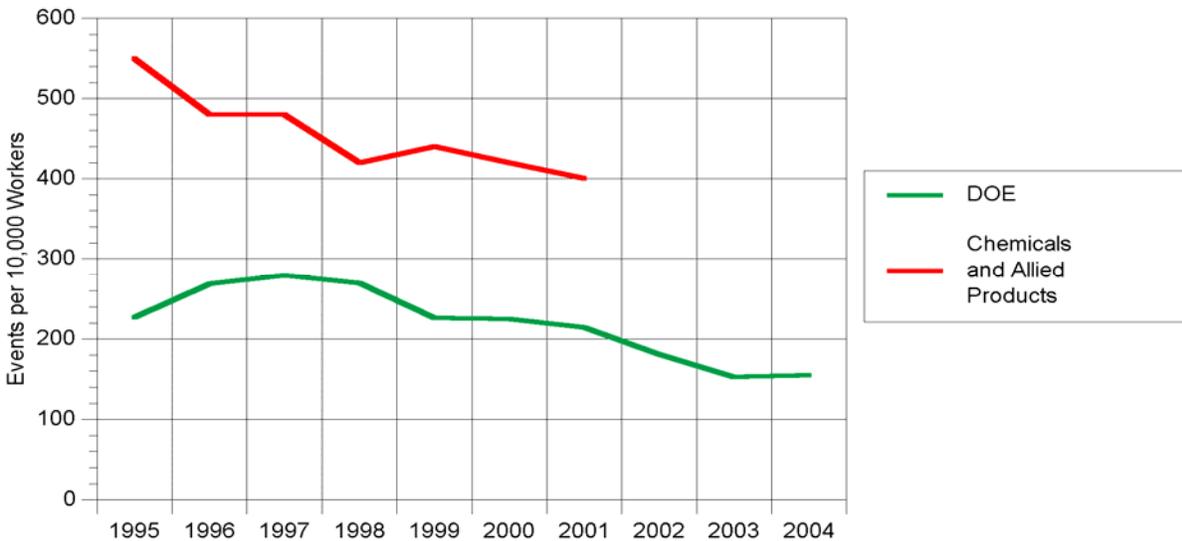


\*Argonne National Laboratory, not shown, will begin participation January, 2009

### Recent Health Trends:

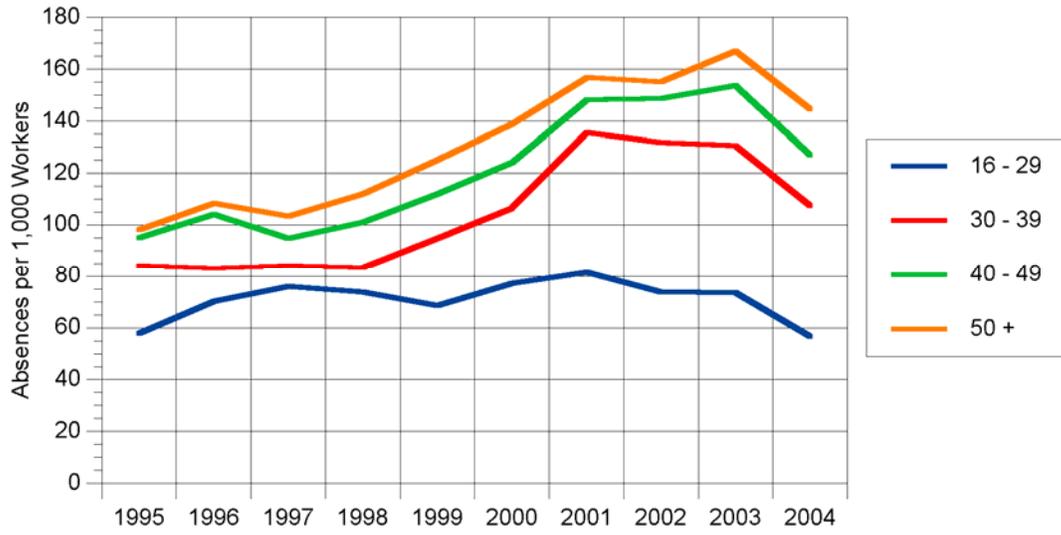
- Recently decreasing occupational injury rates peaked in 1997
- Absence rates increase consistently with age
- Absence rates highest among Service workers and Nuclear Operators
- Increasing rates of chronic diseases usually associated with aging
- Increases noted in hypertension, diabetes, and musculoskeletal conditions.
- Findings point out need to address emerging health issues to reduce potential impact on productivity, absenteeism, presenteeism (sick workers who come to work), and health care costs

### Rates of OSHA Events for DOE Compared with Chemicals and Allied Products Industry, 1995-2004\*

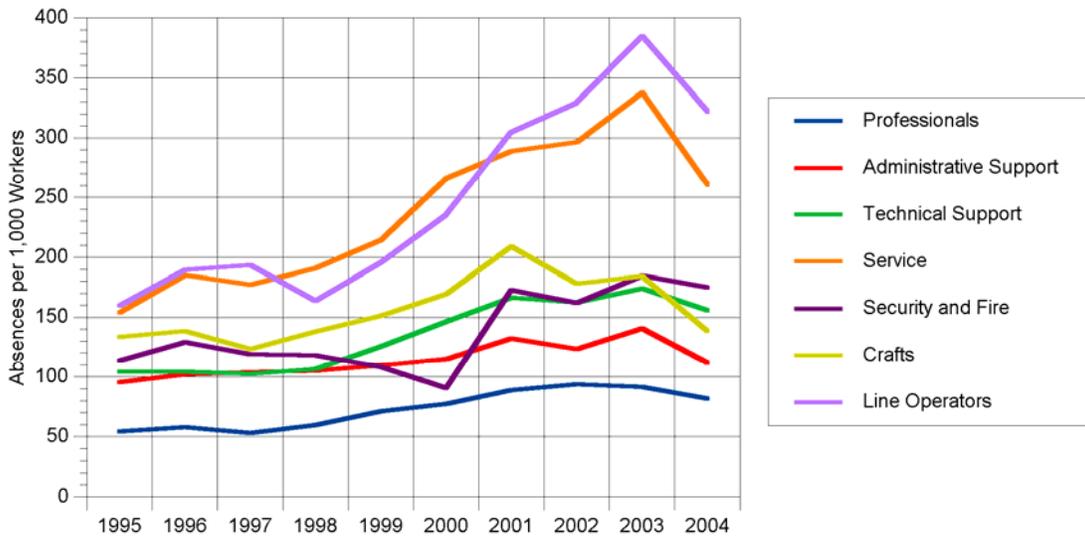


\*Bureau of Labor Statistics (BLS) data are not available after 2001.

### Absence Rates by Age Group, 1995-2004



### Absence Rates by Occupational Group, 1995-2004



**Program Benefits:**

- Responsive to management, workers, other stakeholders
- Data address current workers, not historical cohorts
- Standardized nosologic (diagnostic) coding
- Public health perspective
- Ongoing health assessment - not a study
- Monitors trends
- Participation improves quality of site medical and human resources data, advances data automation, fosters data linkage

**Program Initiatives:**

- Recruit additional sites consistent with program budget
- Improve capture of subcontractors
- Integrate results with on-site planning
- Improve communication and distribution of information to stakeholders; emphasize e-government communication
- Special focus reports
- Incorporate dosimetry data exposure module
- Determine feasibility of IH exposure data module
- Evaluate impact of health & safety initiatives

**Program Drivers:**

- Program responsive to Department of Energy's legislative mandate (Atomic Energy Act, Energy Reorganization Act of 1974, and Department of Energy Organization Act, 1977) to monitor the impact of its operations on the environment, the health of its work force, and the residents of communities surrounding DOE sites
- Addresses expectation "...that worker safety and health committees and worker representatives can obtain trend data on illness and injury...from the Office of ... Epidemiology and Health Surveillance" (now Illness and Injury Prevention Programs) as outlined in 10 CFR 851, Worker Safety and Health Program, Final Rule.