Overview
State-based Occupational Safety and Health Surveillance in Wisconsin is funded at the ‘fundamental’ level. In addition to calculating the 19 CSTE occupational health indicators, the program believes that surveillance is a cycle and includes analysis and action. AIMS for Wisconsin’s Occupational Safety and Health Surveillance program include:

1. Continue occupational illness/injury/death surveillance
2. Expanding occupational health surveillance activities
3. Informing Wisconsin citizens about workplace illness/injury/death findings
4. Act as a statewide occupational illness/injury/death information resource

Activities done to meet our aims this grant period are reflected below.

Major Accomplishments
Surveillance:
CSTE 19 indicators – as required by the NIOSH grant, Wisconsin collects and calculates all 19 of the CSTE occupational indicators annually. In addition to sending these calculated rates to NIOSH, numbers are graphed and compared to previous years then discussed with Wisconsin’s occupational surveillance advisory board to determine next years priority areas. During the 2010-2011 grant year, rates have improved for six indicators, increased for three indicators and remained the same for ten indicators.

Back indicator – this year was the first year that Wisconsin collected data for and calculated Indicator 20, “work-related low back disorder hospitalizations”. This calculation will serve as a baseline for subsequent year’s rates.

State-created indicators – In addition to the CSTE derived indicators, Wisconsin uses BRFSS data to determine the rate for work-related asthma and Poison Control Center data to determine the rate of and chemicals in occupational pesticide poisoning.

Databases:
Metals – we have created and continue to refine a metals lab report database (MS Access). The occupational health surveillance program receives blood metals laboratory reports. Currently, staff only enter and monitor these test results. However, it is our intention to develop a student research project using these data.
EPHT/Adult lead – During the past year we have been working with Wisconsin Environmental Public Health Tracking (EPHT) and bureau information technology staff to understand the best way to make use of the Audio Visualization and Reporting (AVR) space. During this process, other States were doing the same thing. In recent months representatives from several States have worked together via teleconferences to ensure similar end-products. Wisconsin regularly participates in these teleconferences. To date only static indicator reports are on the EPHT AVR site. Teleconferences have been geared toward working on having a adult lead indicator query at a county-level. We will continue this work into the next budget period.

Outputs
Reports:
Indicators charts – a one-page indicator summary was printed and shared with the occupational health surveillance advisory committee
Indicators report (in progress) – work is currently in progress to write, print and distribute an annual report.
Local Public Health survey summary – a survey was taken of local and regional public health jurisdictions to assess their need for occupational health and safety information. The responses were summarized and a report written and returned to them.

Presentations:
Operation Fresh Start (OFS) – OFS is a local non-profit organization that works with youth who are at risk of or have not attained a high school diploma. In addition to the classroom educational component to the program, OFS teaches job skills through new construction or rehabbing of homes and conservation projects. We conducted observations, interviews, and gave presentations to management. Safety directors, and students regarding the Wisconsin Occupational Surveillance program, safety issues in construction and youth safety culture.

Wisconsin Association of Local Health Departments and Boards (WALHDAB) – Local health departments have expressed interest in additional resources to deal with workplace safety in their jurisdiction. In order to understand what resources are needed, a survey was sent to the local health officer in Wisconsin’s 92 public health jurisdictions. Responses were tallied, summarized, and presented at a quarterly WALHDAB meeting. In addition to a presentation, a focus group discussion took place to determine the best format and types of information to be included.

DHS Program Integration workgroup – Internal to the Department is a workgroup that Staff participate in. One of its objectives is to integrate programs within the division and share information. The OHS program gave a program overview talk during one of its monthly meetings.

Publications:
OFS poster – as an outcome of the OFS project’s youth safety culture discussion, the participants created a poster. The OHS program printed the posters which will be distributed to the 10 regional OFS sites.
OFS safety cards – an outcome of the manager/safety director discussion at OFS was the creation of ‘safety cards’ to encourage regular safety discussion and toolbox talks with the students prior to the days work activities.

Occupational safety toolkit – An outcome of the local public health survey was the development of a toolkit that contains brochures, fact sheets, contact information and references on the ten major occupational safety issues described by local health officers.

MMWR Older worker article – Wisconsin contributed data and writing to the article on older worker injuries that was published in MMWR in April, 2011.

Burden of asthma report - As required by CDC, the Wisconsin Asthma program publishes a “Burden of Asthma” report every three years. The latest was published in February, 2011. OHS staff contributed to the report by supplying information and writing a section on work-related asthma.

New Partnerships:

UW-La Crosse – Beginning in May, 2011 a University of Wisconsin – La Crosse undergraduate student, majoring in health education, worked with the OHS program to review/update safety fact sheets and work on creating a local ph toolkit.

WI Department of Transportation (DOT), University of Wisconsin (UW) - staff are currently working on research on distracted driving in Wisconsin to determine if distracted driving adds to crash risk among either the general driving population or among commercial vehicles.

Operation Fresh Start (OFS) - Staff undertook a project to learn about safety training at OFS and to understand youth safety culture. The project resulted in a safety poster and safety toolbox talk cards.

Local newspapers – A series of three articles about adult asthma triggers in an agricultural setting was written by a student and were submitted and published in local/regional newspapers.

Outcomes

Short-term (acquisition of skills, attitudes, and/or knowledge that occurs in a short time period) - Short-term outcomes for this grant year include the acquisition of knowledge about youth worker safety by students at Operation Fresh Start, the skill to respond to local workplace safety issues by local public health jurisdictions and development of interest in occupational health safety and surveillance as a career choice by UW-La Crosse students.

Intermediate (a change in behavior or decision making) – It has been exciting to see the inclusion of the workplace/workers as a population in the life-cycle model that both the Community Health Communication Unit and the Chronic disease unit use. Regular data collection, data use and active consultation by local public health jurisdictions, unions, non-profit organizations, and OSHA is another example of how behavior and decision making has been impacted. During the grant year phone calls, consultation, requests for student placement and committee memberships have increased.

Long-term (change and retention of change over a longer period of time and include a change in values, status, or a specific condition) – Long term outcomes are harder to assess, however, there has been an obvious and dramatic decline in the rate of workplace non-fatal injuries, amputations, musculoskeletal back disorders, and adult lead poisoning in Wisconsin since 2000. As well, there has been inclusion within the Department of Health Services of work as a determinant of an individual’s health.