

# The Case for Recording All Workplace Illnesses

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## Injuries and Illnesses: Equal Hazards

There is an uncomfortable disparity between how employers are treating workplace injuries versus workplace illnesses. If an employee gets injured at work, regardless of the level of severity, a supervisor typically gets involved. Be it a minor “For Record Only”, or a more serious “First Aid Only” or “Beyond First Aid” event, there is no question that the injury must and will be recorded. However, there isn’t a similar standard of behavior when it comes to Illnesses, or symptoms of the same, encountered at work. In fact, while the number of recorded annual workplace illnesses in the US pales in comparison to the number of nonfatal workplace injuries (about 360,000 illnesses, vs. 3.6 million injuries)<sup>1</sup> an overall massive amount (893 million) of sick days<sup>2</sup> were taken.

When it comes to illness, many organizations focus almost exclusively on cause, fault, and liability, documenting only those illnesses which, for certain, emanated

from the worksite: fume inhaling, ingesting of toxic substances, heatstroke and their like. This is driven by both the traditional approach to injury-centric safety: Track, Fix, Train, and Improve, as well as the nature of current regulatory reporting practices.

Moreover, Injuries are often transactional in nature: “He stepped on a nail and the nail went through his work boot”. This standard method simply can’t work when dealing with illnesses that originated outside of the workplace yet have an enormous impact on it.

Whether employees arrive at work knowing that they are in an unfit state, or are entirely unawares, the risk in the workplace is considerable. Simple seasonal allergies may affect vision, a cold or the flu may hinder hearing, and even a serious toothache may impact the ability to concentrate and focus. All sorts of underlying health conditions (and medications) may lead to an unfit-for-work classification which, for a variety of reasons, but primarily those of economic self-interest, an employee might seek to avoid.

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<sup>1</sup> US Bureau of Labor Statistics, 2018 Survey of Occupational Injuries and Illnesses Data

<sup>2</sup> IBI: “Poor Health Costs US Employers \$530 Billion...”  
11/15/2018

## A New Era in Safety

Now employers face a new challenge, in the form of the current COVID-19 pandemic. How do they ascertain fitness-to-work? How can they protect their workforce and prevent contagion? And how would they ensure that employees are following proper protocols-of-care, even if they did not contract an illness at the workplace?

“What gets measured gets done.” All employers recognize that workplace injuries should be brought to an absolute minimum. When a new training program is put in place, the most important success metric will be its effectiveness in reducing the number and severity of injuries. Thus, most organizations implement, monitor, and benefit from, a continuous-improvement process aimed at eliminating injuries.

But what about measuring “workplace illnesses”? Unfortunately, not so much. For a variety of reasons, employers are often more reluctant to focus safety efforts on workplace illnesses and employee symptomatology. Perhaps because it is harder to take accountability for an event which did not originate in the workplace, perhaps it is perceived that illnesses are harder to control - or there’s a fear that by putting a focus on workplace illnesses there will be some undesirable metrics. It would,

of course, be counter-intuitive to propose a safety goal such as “It’s 108 days since our previous Workplace Illness”! However, incident records are often a barometer of

***“What gets measured gets done.”***

workplace health: A cluster of daily heat exhaustions at 2:00 PM will alert the safety manager to emphasize the importance of workplace hydration—especially as temperatures are rising. For the safety manager, “a trend is your friend”—especially if it gives early warning, enabling action to be taken before an employee’s heat exhaustion results in a more severe illness or, through lack of awareness, a workplace injury.

## Supervisors – Safety’s Gatekeepers

It is commonly the supervisor’s task to ensure that there is no worker in the job site that is unfit for the day’s responsibilities. The employee may not only be risking themselves, but may also be putting others at risk, possibly an entire community. Moreover, unsafe work practices may be putting an employee’s health at risk. A supervisor may observe that an employee is suffering from impaired hearing. If the supervisor had not been diligent in recording the illness, the safety manager may not have been aware that the employee, operating a pneumatic drill, had

been choosing not to wear the employer-provided hearing protection headphones, and as a consequence is putting himself at risk of permanent hearing loss (as well as an OSHA fine and a worker's compensation claim for the employer).

As discussed, workplace illnesses include both those which may have originated at work and those that are brought into the workplace. While many of these illnesses - such as the common cold, seasonal influenza, even heat exhaustion or other short-term ailments - are not OSHA-recordable, they are all material to the workplace and overall safety.

Independent of any regulatory reporting, the rule for the supervisor should be simple: document all worksite incidents, including injuries, illnesses, observations, near-misses; there are no exceptions. This is core to supervisors' implied mission of taking care of their direct reports.

Supervisors do not diagnose. They observe, record, and respond appropriately. It is the responsibility of the HR Manager and Safety Manager to ensure that the supervisor knows the workplace protocols - whether dealing with an employee's injury, possible dehydration and, as of today, an employee that is COVID-19 symptomatic. And, if, as predicted<sup>3</sup>, Novel Coronavirus may be cyclical, then safety leadership will be prepared to face the next outbreak.

Whatever the employee's illness or injury, supervisors should complete the incident record to the best of their ability and with complete transparency. Not only does this reinforce the culture of safety, it ensures that employees know they are being taken care of appropriately and empowers management to continually track and monitor both individuals and the workforce at-large. Accordingly, the supervisor's incident report is a critical component in effective safety management. It is essential that the report is communicated rapidly to the proper stakeholders, facilitating appropriate organizational response.

In the current era there is no excuse for the delays that were inherent in the

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<sup>3</sup> The Hill, 3/25/2020:  
"https://thehill.com/policy/healthcare/489582-fauci-says-us-needs-to-be-prepared-for-coronavirus-to-be-cyclical"

“traditional” timeframe. Historically, workplace incidents were recorded and reported on paper. Certainly, injuries perceived as being urgent have always been escalated - a 911 call achieves much of that - but most of the actionable incident information that management needed remained locked-up within the paper report.

Today’s technologies allow for any incident to be recorded at the workplace, shared, and escalated (if appropriate) immediately. The employer’s Best Practices determine who gets informed about what type of incident. Notifications, with links back to the whole incident record, can be sent in real time. There is no need or excuse for delays in taking appropriate care of an injured or ill employee and, in parallel, taking corrective action to take control or to prevent or limit recurrence.

### **Safety and Health Demand Vigilance**

In this time of Global crisis and emergency, employers have new legal and civic responsibilities to recognize and respond to a potential COVID-19 outbreak. Although being aware of COVID-19 symptoms may sound as an extreme example of the significance of workplace illness vigilance, awareness and ability to respond to workplace health events is critical to

business viability and success. By recording all workplace incidents, not only do we respond to the incident at hand, but we also glean critical insights into the future. Every trend needs to be captured and analyzed - be it employees who are persistently arriving to work in an unfit condition, repeated injuries, a surge in employees suffering from heat exhaustion and dehydration, or those who may be COVID-19 symptomatic at work.

**The current health crisis is forcing companies to look differently at the approach to everyday operations. But in the long run, diligent illness recording makes certain that employees stay safe, workforces remain productive and businesses are run as efficiently and effectively as possible.**

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To find out more about how Compatica may help you with Illness and Injury Incident recording, please visit [www.compatica.com](http://www.compatica.com), or call us at 888.802.4084

