

Occupational Injuries, Illnesses, and Fatalities among Nursing, Psychiatric, and Home Health Aides, 1995-2004

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Over the 10-year period from 1995 to 2004, nearly 800,000 nursing, psychiatric, and home health aides were injured or became sick while on the job, with musculoskeletal disorders the most common type of nonfatal injury or illness reported; over the same period, 154 workers in this occupation were killed on the job, with transportation accidents the most common event leading to fatalities.

Nursing, psychiatric, and home health aides make up nearly two-thirds of all healthcare support occupations. The group consists of three component occupations: home health aides; nursing aides, orderlies, and attendants; and psychiatric aides. The component occupations differ mostly in the location at which care is being provided: homes of patients, residential facilities, medical hospitals, and psychiatric hospitals. Nursing, psychiatric, and home health aides provide basic patient care--such as bathing, grooming, feeding, dressing, and moving assistance--generally under the direction of professional nursing staff. This article examines workplace fatalities and nonfatal injuries and illnesses in this occupational group over the 10-year period from 1995 to 2004.

Nonfatal Injuries And Illnesses

Data from the BLS [Survey of Occupational Injuries and Illnesses \(SOII\)](#) show that over the 10-year period from 1995 to 2004, nursing, psychiatric, and home health aides¹ sustained 799,004 injuries and illnesses involving days away from work.² These injuries accounted for about 5 percent of all nonfatal work injuries and illnesses that occurred during the period.³

Nursing aides, orderlies, and attendants--a subset of the occupational group nursing, psychiatric, and home health aides--consistently ranked among the detailed occupations reporting the most cases of workplace injuries and illnesses during the 1995-2004 period. In 2004, for example, nursing aides, orderlies, and attendants reported the third highest number of injuries and illnesses. Only truck drivers (heavy and tractor-trailer) and laborers and material movers (hand) had more cases.

Although the number of work-related injuries and illnesses sustained by nursing, psychiatric, and home health aides is high relative to most other occupational groups, there was a steady decline in the number of cases over the 1995-2004 period. (See chart 1.) During that period, the series high was 100,596, in 1995, and the low was 60,890, in 2004.

Demographic breakdown. Women sustained more than 90 percent of the workplace injuries and illnesses that occurred among nursing, psychiatric, and home health aides during the 1995-2004 period. In addition, this occupational group accounted for 13 percent of the total number of workplace injuries and illnesses among women, the highest proportion of any one broad occupational group. It is not surprising that women accounted for a large proportion of injuries within this group of occupations because there is a high concentration of women in these jobs. In 2004, for instance, 89 percent of those employed in this occupational group were women.⁴

Black workers accounted for 20 percent of workplace injuries and illnesses among nursing, psychiatric, and home health aides during the 1995-2004 period. In 2004, 35 percent of the persons employed in this group were black. Women accounted for almost 90 percent of the workplace injuries and illnesses among black nursing, psychiatric, and home health aides.

Nature of injuries. Sprains, strains, and tears made up the largest proportion of workplace injuries and illnesses among nursing, psychiatric, and home health aides, representing 65 percent of reported cases during the 1995-2004 period. These injuries made up a slightly lower share (61 percent) of reported cases in 2004. (See table 1.) Among workers in all occupations, sprains, strains, and tears represented 43 percent of the work-related injuries and illnesses during the 1995-2004 period and 41 percent of the injuries and illnesses in 2004.

The second most common kind of injury or illness among nursing, psychiatric, and home health aides was soreness and pain. Nearly half of the 11 percent of injuries in 1995-2004 that were from soreness and pain were attributable to back pain.

Musculoskeletal disorders. In 2004, 54 percent of workplace injuries and illnesses among nursing, psychiatric, and home health aides were musculoskeletal disorders (MSDs). The U.S. Department of Labor defines a musculoskeletal disorder as an injury or disorder of the muscles, nerves, tendons, joints, cartilage, or spinal discs. These disorders are related to events such as bodily reaction, overexertion, and repetitive motion and do not include injuries caused by slips, trips, falls, motor vehicle accidents, or similar accidents. Many of the cases of sprains, strains, and tears and of soreness and pain among nursing, psychiatric, and home health aides in 2004 were classified as MSDs.

Event leading to injury. During the 1995-2004 period, more than half (53 percent) of the work-related injuries and illnesses among nursing, psychiatric, and home health aides were related to overexertion. (See chart 2.) Among workers in general, 27 percent were the result of overexertion. Most of the cases of overexertion among nursing, psychiatric, and home health aides resulted from lifting patients. Indeed, this group accounted for 65 percent of all such injuries that occurred during the 10-year period.

Due largely to fewer reported cases of overexertion, the number of workplace injuries and illnesses among nursing, psychiatric, and home health aides decreased over the 1995-2004 period, especially during the latter portion. From 2000 to 2004, for example, the number of workers from this occupational group who missed work due to overexertion declined by more than 25 percent. By contrast, all other injuries and illnesses in this occupational group declined by 7.5 percent during that 4-year period.

Falls were the second leading injury event among nursing, psychiatric, and home health aides, accounting for 13 percent of their reported cases during the 10-year period. While the number of injuries attributed to falls generally declined over the period, there was a jump from 2001 to 2002 of nearly 3,000 cases. In 2004, however, there was a marked decrease in these kinds of injuries--8,120 reported cases, the lowest number since the Survey of Occupational Injuries and Illnesses began in 1992.

The type of fall-related injuries that were reported by nursing, psychiatric, and home health aides differed from fall-related injuries reported by all workers. The vast majority (87 percent) of injuries from falls within this occupational group over the 10-year period occurred on the same level. In contrast, 65 percent of fall injuries to all workers occurred on the same level. Falls on the same level include falls to the floor, walkway, or other surface; and falls onto or against objects.

Assaults (usually by one of their patients) accounted for 7 percent of the workplace injuries to nursing, psychiatric, and home health aides during the 1995-2004 period. In contrast, among all occupations, 1 percent of the injuries were the result of assaults. In addition, nursing, psychiatric, and home health aides represented nearly 30 percent of the total number of workplace assaults during the 10-year period. This was the highest proportion of assaults represented by any broad occupational group.

There was an overall decline in assaults on nursing, psychiatric, and home health aides during the 1995-2004 period. However, the number of assaults increased by 3 percent from 2003 to 2004. Over that same period (2003-2004), the number of reported assault cases in all occupations increased by nearly 7 percent.

Healthcare patients as the source of injury. A healthcare patient was the leading source of injury among nursing, psychiatric, and home health aides, accounting for 59 percent of their injuries from 1995 to 2004. The vast majority of the cases in this occupational group involved either lifting a patient or an assault by a patient.

The second leading source of injury among nursing, psychiatric, and home health aides was floor and ground surfaces, which accounted for about 12 percent of the reported cases in this group. Closely following was worker motion or position, which accounted for almost 9 percent of the occupational injuries over the period. The actual number of reported cases involving floor, ground surfaces or worker motion or position declined over the 10-year period, but at a slower rate than cases involving other sources of injury.

Fatal Injuries

Data from the BLS [Census of Fatal Occupational Injuries \(CFOI\)](#) show that, from 1995 to 2004, 154 nursing, psychiatric, and home health aides were fatally injured in work-related incidents, which was less than 1 percent of all workplace fatalities that occurred during that period. The number of workplace fatalities in this occupational group peaked in 1995--with 25 deaths--and has generally declined since. (See table 2.)

The demographic breakdown for workplace fatalities among nursing, psychiatric, and home health aides was similar to the breakdown for nonfatal injuries and illnesses--84 percent were women. Women represented just 8 percent of occupational fatalities in general. About 19 percent of the nursing, psychiatric, and home health aides who were fatally injured on the job were black workers, most of whom were women.

Like workers in general, the leading cause of workplace fatalities among nursing, psychiatric, and home health aides was transportation incidents. (See table 3.) The vast majority of the transportation incidents involved collisions between vehicles. The second leading cause of fatal workplace injuries in this occupational group was homicide, which accounted for 19 percent of the fatalities during the 1995-2004 period. For all workers, homicide was the cause of death in 12 percent of the cases.

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Notes

1 With the 2003 reference year, the Survey of Occupational Injuries and Illnesses (SOII) began using the [2000 Standard Occupational Classification \(SOC\) System](#). Prior to 2003, the survey used the Census Bureau's occupational coding system. Substantial differences between the systems have resulted in a break in series for occupation data, and users are generally cautioned against making data comparisons between the occupational categories implemented in 2003 and those from previous years. However, there are specific instances of correspondence between the two classification systems. The SOC category nursing, psychiatric, and home health aides (SOC 31-1000) is analogous to the Census Bureau category nursing aides, orderlies, and attendants (code 447). Thus, for years prior to 2003, this analysis uses estimates for nursing aides, orderlies, and attendants; for 2003 forward, the analysis uses estimates for nursing, psychiatric, and home health aides. For more information on the Standard Occupational Classification System, visit the SOC page on the BLS website at <http://www.bls.gov/soc/home.htm>.

2 Cases involving days away from work are those requiring at least 1 day away from work with or without days of job transfer or restriction. Such cases made up 30 percent of the 4.3 million injuries and illnesses reported in private industry workplaces in 2004. BLS compiles occupational data only for injuries and illnesses requiring days away from work.

3 From 1995 to 2004, employers reported a total of 17,378,137 nonfatal injuries and illnesses.

4 See *Employment and Earnings*, January 2005, p. 212.

Table 1. Percent distribution of nonfatal injuries and illnesses by nature of injury or illness, all occupations and nursing, psychiatric, and home health aides, 2004

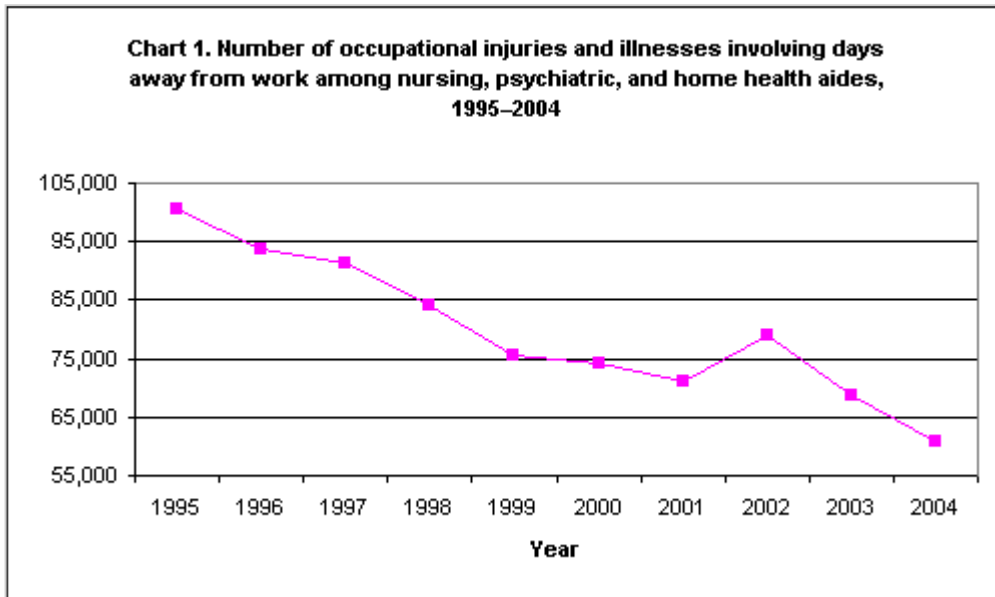
Nature of injury or illness	All occupations	Nursing, psychiatric, and home health aides
Total injuries and illnesses	100.0	100.0
Sprains, strains	41.7	61.0
Cuts, lacerations	9.1	1.1
Bruises, contusions	9.1	7.6
Soreness, pain	8.3	13.3
Fractures	7.5	3.1
All other injuries and illnesses	24.3	14.0

Table 2. Fatal occupational injuries and illnesses among nursing, psychiatric, and home health aides, 1995–2004

Year	Number of fatalities
1995	25
1996	24
1997	15
1998	15
1999	13
2000	10
2001	15
2002	14
2003	14
2004	9

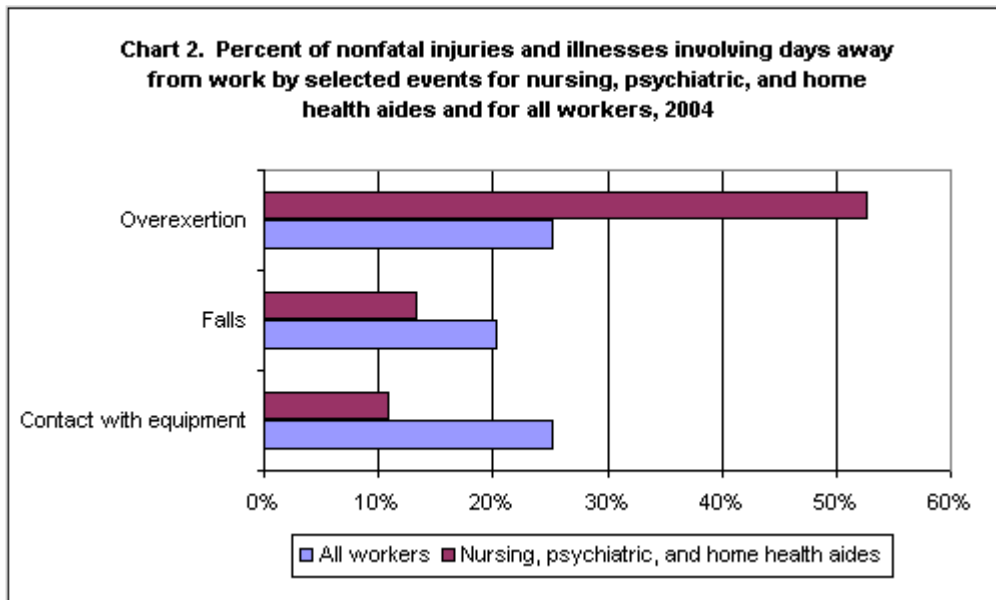
Table 3. Percent distribution of fatal injuries by event, all occupations and nursing, psychiatric, and home health aides, 1995–2004

Event	All occupations	Nursing, psychiatric, and home health aides
Total, all events	100.0	100.0
Transportation incidents	42.6	46.4
Homicides	12.3	19.0
Falls	12.2	11.1
All other	32.9	23.5



Data for Chart 1. Number of occupational injuries and illnesses involving days away from work among nursing, psychiatric, and home health aides, 1995–2004

Year	Number of occupational injuries and illnesses involving days away from work
1995	100596
1996	93569
1997	91267
1998	84128
1999	75695
2000	74205
2001	71017
2002	79007
2003	68630
2004	60890



Data for Chart 2. Percent of nonfatal injuries and illnesses involving days away from work by selected events for nursing, psychiatric, and home health aides and for all workers, 2004

Event	All workers	Nursing, psychiatric, and home health aides
Contact with equipment	25.15%	10.80%
Falls	20.30%	13.34%
Overexertion	25.15%	52.72%

NOTE: The column headings on this table were corrected on July 6, 2006.