



DEPARTMENT OF HEALTH AND HUMAN SERVICES  
 Public Health Service  
 Centers for Disease Control and Prevention  
**INTER/INTRA-AGENCY AGREEMENT (IAA)**  
 Payable Agreements (CDC is Procuring Agency)



1. CDC IAA #: (10 to 13 digits) 09FED906276	2. PARTICIPATING AGENCY IAA #: CPSC-IAG-99-1155 MOD#19	3. TYPE OF AGREEMENT <input type="checkbox"/> New <input checked="" type="checkbox"/> Modification <input type="checkbox"/> Administrative Modification Number: 19
--	---	--

4. TITLE OF PROJECT:  
 (IA#09-16) National Survey of Non-Fatal Occupational Injuries Using NEISS

5. DESCRIPTION OF WORK: (Please attach) See Attached	6. AMOUNT: (Not to exceed without written modification) \$ 57,500.00
---	---

7. NAME AND ADDRESS OF PARTICIPATING FEDERAL AGENCY: U.S. Consumer Product Safety Commission 4330 East West Highway Bethesda, MD 20814-4408 DUNS#069287522 Appropriation#09 PS EXFM 4310 11179 252E	LIAISON NAME: Tom Schroeder EMAIL ADDRESS: TSchroeder@cpsc.gov	PHONE #: (301) 504-7431 FAX #:
--	---	--------------------------------------

8. NAME AND ADDRESS OF CDC, CENTER, INSTITUTE OR OFFICE: National Institute for Occupational Safety and Health Division of Safety Research 1095 Willowdale Road Morgantown, WV 26505 DUNS#927645465	LIAISON NAME: Larry Jackson EMAIL ADDRESS: LLJackson@cdc.gov	PHONE #: (304) 285-5980 FAX #: (304) 285-5774
--	---	--

9. PROJECT PERIOD: from: 07/13/2009 through: 09/30/2009	FUNDING PERIOD: from: 07/13/2009 through: 09/30/2009
--	---

10. CDC AUTHORITY:  
 Economy Act approved June 30, 1932, as amended by 31 U.S.C. 1535 and 1536 (See also item #14)  
 Other (Please specify)

11. PARTICIPATING AGENCY AUTHORITY:  
 Section 29(c) and 29(e) of the Consumer Product Safety Act, 15 U.S.C. 2078(c) and (e), and the Economy Act, as amended (31 U.S.C. 1535 and 1536)

12. CDC FUNDING INFORMATION: FOR CDC USE ONLY (CDC Internal form 6012 - modified Document History Record)							APPROPRIATION NUMBER: 7590943
T.C. (For Accounting Use Only)	FY (2 digits) (Required)	DOC. REF. (For Accounting Use Only)	DOC. NO. (Original 10 digits) (Required)	CAN (7 digits) (Required)	O.C. (4 digits) (Required)	ALLOWANCE (5 digits) (For Budget Use Only)	\$ AMOUNT
050	09	214	09FED906276	927ZJEZ	25103	5611111501	\$46,000.00
050	09	214	09FED906276	921Z9CM	25103	5611RF110	\$11,500.00

6012 ADMINISTRATIVE APPROVAL NAME and EMAIL ADDRESS: (Please print)  
 Valerie A. Felicetti, MBA  
 VAFelicetti@cdc.gov

FMO BUDGET ANALYST SIGNATURE:  
  
 ADMINISTRATIVE APPROVAL SIGNATURE:  
 Valerie A. Felicetti

(Should not be the same as Block #18)



**DEPARTMENT OF HEALTH AND HUMAN SERVICES**  
**Public Health Service**  
**Centers for Disease Control and Prevention**  
**INTER/INTRA-AGENCY AGREEMENT (IAA)**  
**Payable Agreements (CDC is Procuring Agency)**



CDC IAA # 09FED906276

13 ADMINISTRATIVE BILLING REQUIREMENTS: CDC's ALC is **75090421**. Other Agency's ALC (required) 61-00-0001

Billing is to be made through the use of the Online Payment and Collection (OPAC) system. **Please include CDC's Official IAA # from Block #1 on all OPAC billings and correspondence.** When CDC provides funds to the performing agency, in advance of receiving the goods or services, the performing agency agrees to provide, within 15 days of the end of each quarter, statements of obligations and expenditures made during the quarter. The statements shall be provided to the following address: **DHHS, CDC, FMO, AP, Attn: ADVANCES/OPAC Desk, MS D-06, 1600 Clifton Road, Atlanta, GA 30333.** (If required by other agency, CDC's Tax Identification # is 586051157.)

14 ADDITIONAL BILLING REQUIREMENTS (This block must be completed if procuring services under the Economy Act.)

All funds provided by CDC under this agreement must be obligated by the performing agency by the end of the FY in which the funds expire. Any unobligated but expired funds may not be used to fund services in subsequent periods. The CDC Financial Management Office (FMO) must be notified of any unobligated funds pertaining to this agreement at least 15 days before the end of the FY so that the agreement may be modified to reduce the funding amount when appropriate. This notification shall be provided to the following address  
**DHHS, CDC, FMO, AP, Attn: OPAC Desk, MS D-06, 1600 Clifton Road, Atlanta, GA 30333.**

15 PARTICIPATING AGENCY FUNDING and/or INFORMATION  
 (Please include name, telephone number, and email address of contact person.)

Name:	Telephone #:	Email:
Debbie Hodge, Director of Division of Finance	(301) 504-7130	dhodge@cpsc.gov

16  The participating agency as a signatory to the Common Rule states that in accepting these Interagency Agreement funds, it will abide by the human subjects research requirements stated in the Common Rule, and certify that all necessary assurances and institutional review board (IRB) approvals are obtained.

The participating agency is NOT a signatory to the Common Rule. Upon issuance of these Interagency Agreement funds, it is the responsibility of the CDC Center, Institute, or Office (CIO) to certify that all necessary assurances and institutional review board (IRB) approvals are obtained. The CIO Associate Director for Science (ADS) must determine the Applicability of Human Subjects Regulations

17 OTHER REQUIREMENTS

- A. Travel under this agreement is subject to allowances authorized in accordance with Federal Travel Regulations, Joint Federal Travel Regulations, and/or Foreign Service Regulations
- B. CDC will retain the title to any equipment procured under this agreement, unless otherwise justified in the statement of work

18 CDC ACCEPTANCE: (please print)

Name: Kathy Kirkland  
 Title: Acting Assoc. Director for Management Operations, NIO  
 Email address: KKirkland@cdc.gov

Signature: *Kathy Kirkland* Date: 7/17/09

19 PARTICIPATING AGENCY ACCEPTANCE: (please print)

Name: Kim Miles  
 Title: Contracting Officer  
 Email address: Kmiles@cpsc.gov

Signature: *Kim Miles* Date: 7/31/09

This agreement may be terminated by either agency upon a 30-day advance written notice. This agreement may be modified by mutual written consent of all parties.

**INTERAGENCY AGREEMENT BETWEEN  
THE CONSUMER PRODUCT SAFETY COMMISSION  
AND  
THE NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH  
(CDC 09FED906276; CPSC IAG-99-1155-MOD#19)**

This document sets forth the terms of agreement for services, supplies, and/or material between the U.S. Consumer Product Safety Commission (CPSC) and the Department of Health and Human Services (DHHS), Centers for Disease Control and Prevention (CDC), National Institute for Occupational Safety and Health (NIOSH).

This document serves as an amendment to the Interagency Agreement (CDC 09FED906276; CPSC-IAG-99-1155 Mod#18) between NIOSH and the CPSC covering the expansion of the National Electronic Injury Surveillance System (NEISS) to include all work-related incidents (NEISS-Work).

This amendment covers two special studies: (1) Occupational injuries and illnesses among emergency medical services (EMS) workers: A NEISS-Work telephone interview survey and (2) Follow-up studies on occupational injury underreporting. Both of these studies are outlined below.

**I. DESCRIPTION OF SERVICES**

**OCCUPATIONAL INJURIES AND ILLNESSES AMONG EMERGENCY MEDICAL SERVICES (EMS) WORKERS: A NEISS-WORK TELEPHONE INTERVIEW SURVEY**

**Background:**

Emergency Medical Services (EMS) personnel treat an estimated 22 million patients a year (Maguire & Walz, 2004). While on duty, EMS workers are frequently exposed to increased risk of injury and illness. However, current research on work-related injuries and illnesses involving the EMS workforce is limited. In 2000, the occupational injury rate for EMS workers was found to be one of the highest when compared to other industries (Maguire et al., 2005). Another study found that the occupational fatality rate for EMS workers was more than twice the national average (Maguire et al., 2002).

In 1996, the national EMS Agenda for the Future called upon Emergency Medical Services (EMS) systems researchers to collaborate in conducting occupational health studies to improve occupational hazards countermeasures for EMS personnel. In 2004, the NHTSA, Office of Emergency Medical Services (OEMS) began a multi-year effort to develop the national EMS Workforce Agenda for the Future guided by a comprehensive assessment of the state of the nation's EMS workforce. Preliminary findings of this assessment support the objectives of the EMS Agenda for the Future in calling for improvement to EMS worker injury and illness surveillance.

In order to address the need for EMS worker injury and illness surveillance, NHTSA established an interagency agreement with NIOSH for support of "Emergency Medical Services – Workforce Injury and Illness Surveillance Program (EMS-WIISP)." This interagency agreement is the primary funding source for the project titled "Occupational injuries and illnesses among emergency medical services (EMS) workers: A NEISS-Work telephone interview survey." The intent of the NIOSH-

NHTSA collaboration is to improve existing occupational injury surveillance through the NEISS to better address data needs for EMS safety research. To this purpose, NIOSH is herewith requesting CPSC to conduct a telephone interview follow-back study on injuries and illnesses of EMS workers that are captured through the existing occupational injury/illness data collection component of NEISS (i.e., NEISS-Work).

**Purpose:**

The purpose of this study is to describe non-fatal occupational injuries and illnesses incurred by EMS workers and treated in a nationally stratified sample of emergency departments. Previous reports describing occupational injuries and illnesses to EMS workers provide limited details and are generally restricted to specific regions or sub-segments of the EMS worker population. This project will provide an extensive description of EMS worker injuries and illnesses, including worker characteristics, injury circumstances, injury outcomes, and use of personal protective equipment.

**Statement of Work:**

**Data collection**

**a. Description:** CPSC will administer a 20-30 minute telephone follow-back questionnaire to all EMS workers who were identified as having been treated in the ED for a work-related injury or illness and who agree to voluntarily participate in the study. These data will capture detailed information about EMS worker injuries and illnesses that can not be obtained through the routinely collected NEISS-Work data. CPSC will store these data in secure database and remove all contact information prior to submitting the data to NIOSH for analysis.

**b. Sample:** CPSC will identify all work-related injuries and illnesses to EMS workers in the NEISS-Work database and request contact information for every identified case. For every case for which contact information is obtained, CPSC will attempt to establish contact and offer participation in the telephone interview study component. CPSC will make at least ten attempts to reach each potential participant. Funds from this modification will cover up to 115 EMS worker telephone interviews.

**c. Case definition:** CPSC hospital coders will identify work-related injury and illness cases EMS workers or other individuals suspected of providing emergency medical services at the time of their injury/illness. NIOSH will provide detailed case selection guidelines.

**d. Schedule:** CPSC will begin data collection within one month of receipt of OMB approval for survey administration.

**Analysis**

Analysis of the data will be a joint effort between NIOSH and NHTSA. Results will be shared with CPSC.

**Study Protocol**

NIOSH will provide to CPSC detailed case selection guidelines and a CATI based telephone survey questionnaire. NIOSH will also provide the study protocol as approved by the Human Subjects

Review Board (HSRB). NIOSH and CPSC, upon mutual agreement and following any needed review by HSRB, may modify the study protocols to best meet the intended purpose of this data collection effort.

## **FOLLOW-UP STUDIES ON OCCUPATIONAL INJURY UNDERREPORTING**

### **Background:**

In 2008, the Congressional Committee on Education and Labor released the report: *Hidden Tragedy: Underreporting of Workplace Injuries and Illnesses* indicating that “that work-related injuries and illnesses in the United States are chronically and even grossly underreported.” This report and most related research have focused on employer-based reporting of occupational injuries and illnesses and the associated underreporting.

Two national surveillance systems focus on nonfatal occupational injuries and illnesses: the BLS Survey of Occupational Injuries and Illness (SOII), commonly referred to as the “annual survey,” and the NIOSH National Electronic Injury Surveillance System—Work-Related Injury/Illness Supplement (NEISS-Work). The SOII is based on employer reporting of work-related injuries/illnesses whereas NEISS-Work is primarily based on employee self-declaration at the time of ED treatment. Both systems are considered to complement one another as they capture different, but not mutually exclusive populations. NEISS-Work is unique in that it provides an alternative employee-based view for assessing national nonfatal injury/illness trends.

### **Purpose:**

The purpose of this study is to evaluate the ability of NEISS-Work to attain information through routine emergency department medical chart abstraction on the injured/ill worker’s industry, occupation, and economic relationship to their job and type of employer; and the expected payer for medical services.

### **Statement of Work:**

#### **Data collection**

**a. Description:** There are two data collection components to this study. The first involves CPSC collecting two new occupational-related variables as part of the NEISS-Work database. These two variables collect information on employee status (i.e., wage & salary – private industry; wage & salary – government; self-employed (non-agricultural); farm owner/operator; volunteer; and other) and expected payer (i.e., self-pay; private insurance; workers’ compensation; and other). This modification provides funding for training the NEISS hospital coders in the collection of these new variables. The second data collection component involves joint CPSC – NIOSH hospital audits performed to capture and evaluate the prevalence, nature, extent, and location of occupationally relevant data including employment information in the hospital medical records. These audits will involve profiling occupational indicators in hospital records; examining the influence of electronic health records on data collection, and evaluating the abstractors’ knowledge of NEISS-Work case criteria. This modification provides the funding needed for CPSC to initiate this collaborative effort by collecting information from each of the approximately 60 participating hospitals as to the availability of occupational information in their health record systems.

**b. Sample:** Information for the two new occupational-related variables will be collected from all cases identified for inclusion in the NEISS-Work database beginning in May 2009. In August 2009, CPSC will host their annual NEISS hospital coder training and allow NIOSH to provide training related to these two new variables.

Data on the availability of occupational information will be collected from each NEISS-Work participating hospital.

**c. Schedule:** Data collection of the two new occupationally-related variables will begin in May 2009. However, in-person training will not occur until CPSC hosts the annual NEISS coder meeting in August 2009.

NIOSH will begin the hospital occupational information profile data collection at the August 2009 training session. Additional data collection will be done survey of the hospital coders that do not participate in the August training and by CPSC at the routine hospital audit visits beginning September 2009.

**Coder Training**

Training of the NEISS hospital coders related to the two new occupational variables will take place at the annual CPSC NEISS coder meeting. CPSC will be responsible for hosting the meeting, including making travel arrangements for the coders and providing for on-site facility needs (i.e., meeting space and technology needed for presentations). NIOSH staff will be responsible for providing the actual training and any materials specifically related to the occupational variable training.

**Evaluation of Occupational Information Availability**

NIOSH in collaboration with CPSC will develop a hospital information profile. NIOSH will design the profile data elements and create a simple data collection tool for completion by hospital coders. In addition, NIOSH will develop a related tool for completion by CPSC staff at the next hospital audit visit. NIOSH will compile the coder responses and the audit results and share these data with CPSC to assist with improving NEISS and NEISS-Work data collection.

II. DURATION OF AGREEMENT

This agreement is approved from the date of signature for both agencies through September 30, 2009.

III. ESTIMATED COSTS

Total estimated costs are \$57,500. Estimated costs are listed per project and broken down into the following sub-categories:

**OCCUPATIONAL INJURIES AND ILLNESSES AMONG EMERGENCY MEDICAL SERVICES (EMS) WORKERS: A NEISS-WORK TELEPHONE INTERVIEW SURVEY**

Data collection and provision of data to NIOSH	\$11,500.00
--	-------------

**FOLLOW-UP STUDIES ON OCCUPATIONAL INJURY UNDERREPORTING**

Coder training for collection of two new occupational variables	\$40,000.00
Evaluation of available occupational information	\$6,000.00
Total	\$57,500.00

**IV. FUNDING**

All funds provided by NIOSH in this agreement must be obligated by the performing agency by the end of the fiscal year in which the funds expire. Any unobligated but expired funds may not be used to fund services in subsequent periods. The NIOSH Financial Management Office (FMO) must be notified of any unobligated funds pertaining to this agreement at least 60 days before the end of the fiscal year so that the agreement can be amended to reduce the obligated amount when appropriate. The notification must be provided to the address cited below (in paragraph V).

**V. ACCOUNTING AND BILLING INFORMATION**

Funds for this project for FY2009 in the amount not to exceed \$57,500.00 will be transferred to CPSC via IPAC using the following account data:

	<u>From</u>	<u>To</u>
Agency	NIOSH	CPSC
Appropriation	7590943	09 PS EXFM 4310 11179 252E
EIN	586051157	US Treas Code: 6190100
ALC	75090421	61-00-0001
DUNS #	927645465	069287522
CAN	921Z9CM (\$11,500)	TIN: 520978750
	927ZJEZ (\$46,000)	TIN: 520978750
Object class	25103	252E
Amount	\$57,500.00	\$57,500.00

When billing NIOSH through the IPAC system, CPSC will reference agreement number CDC 09FED906276; CPSC-IAG-99-1155 Mod#19.

When funds are provided to the performing agency in advance of services being performed or goods being delivered, the performing agency is required to provide, within 15 days of the end of each quarter, statements of obligations and expenditures made during the quarter. These statements are also provided to the address below:

CDC, FMO  
 Attn: IPAC Desk  
 1600 Clifton Road, MS D-06  
 Atlanta, GA 30333

**VI. EQUIPMENT**

If equipment is procured by CPSC to accomplish the program's goals and objectives using funds provided by this interagency agreement, CDC will retain title to the equipment, with the exception of equipment procured in support of the overall NEISS project for which CPSC shall retain title of equipment.

VII. TRAVEL

Travel under this agreement is subject to allowances authorized in accordance with the Federal Travel Regulations, Joint Federal Travel Regulations, and/or Foreign Service Regulations.

VIII. CONFLICT WITH EXISTING AGREEMENTS

There is no duplication or conflict with existing agreements, policy, or statute.

IX. PROGRAM CONTACTS

NIOSH: Larry Jackson  
NIOSH/DSR/SFIB  
1095 Willowdale Road, MS H1808  
Morgantown, WV 26505  
(304)285-5980

CPSC: Tom Schroeder  
CPSC  
4330 East West Highway, Rm 604D  
Bethesda, MD 20814-4408  
(301)504-7431

X. BUDGET CONTACTS

NIOSH: Sandra Stafford  
Budget Analyst  
Financial Management Office  
(304) 285-6207  
[SStafford@cdc.gov](mailto:SStafford@cdc.gov)

CPSC: Debbie Hodge, Director of Division of Finance  
(301)504-0018  
[dhodge@cpsc.gov](mailto:dhodge@cpsc.gov)

XI. MODIFICATION AND CANCELLATION

This agreement may be modified by mutual consent of both parties or canceled upon 60 days advance written notice by either party.

XII. AUTHORITY

This agreement is entered into under Section 601 of the Economy Act, as amended (31 U.S.C. 1535) and the Consumer Product Safety Act.

### XIII. INFORMATION SAFEGUARDS

CDC-NIOSH shall comply with the Privacy Act in using and storing information related to this agreement. CDC-NIOSH shall provide CPSC with written assurances satisfactory to CPSC that the identity of any injured/ill person, and of any person who treated an injured/ill person, shall not be included in any report or information made available by CDC-NIOSH to any member of the public. CDC-NIOSH also agrees that it shall not disclose information compiled under this agreement to the public if the information describes a consumer product in such a manner that will permit the public to ascertain readily the identity of the manufacturer or private labeler unless the Commission is notified, and the Commission complies with Section 6(b) of the CPSA (15 U.S.C. 2055).

CDC-NIOSH shall maintain all publicly accessible NEISS data records through internet file downloads, web-based query systems, or other electronic mechanisms such that individuals or NEISS hospitals are not directly or indirectly identifiable. CDC-NIOSH shall refer all public requests for hospital identities to CPSC. CDC-NIOSH shall provide CPSC, at their discretion, the opportunity to review for up to 30 days all bulk NEISS occupational data prior to intended release via internet file downloads, web-based query systems, or other electronic mechanisms.

CDC shall be considered the originating agency for all occupational injury and illness cases among civilian workers, including basic NEISS case data and any supplemental data collected. CDC-NIOSH shall serve as the CDC center responsible for employing adequate and effective security controls to protect the confidentiality, availability, and integrity of work-related NEISS data, including all data shared with other organizations. CDC-NIOSH shall ensure, prior to the sharing of any data, that the recipient organization affords the appropriate equivalent level of security controls as maintained by CDC-NIOSH, the originating agency. Since data security remains the responsibility of CDC-NIOSH, procedures shall be agreed to in advance that provide for the security controls of the recipient organization.

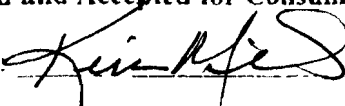
Because individual NEISS case information for work-related injuries and illnesses are considered extremely sensitive and public release of the NEISS data may significantly harm the injured/ill worker, CDC-NIOSH, as the originating agency shall establish agreements with recipient agencies that consider and apply all appropriate management, operational, and technical security controls including physical security needs, such as whether personal information is so sensitive that it should be kept in an approved security container, or whether access to where the information is located should be limited; personnel security needs, such as additional controls over individuals who have access to data; network security, including encryption for data in transit and protection for data at rest; and procedures for the retention and timely destruction of identifiable records. CDC-NIOSH shall provide CPSC a period of up to 30 days to review and provide comment on the privacy and security implications of new data sharing agreements. Once appropriate interagency data sharing agreements have been established between CDC-NIOSH and recipient agencies, CDC-NIOSH may, at its discretion, authorize CPSC to provide NEISS work-related case data directly to the recipient agency.

From time to time, CPSC may be contracted by other agencies to collect supplemental information on specific cases that include work-related injuries and illnesses. Because the activities of the contracting agency and subsequent release of the worker data collected has the potential to significantly harm individual workers and compromise CDC-NIOSH's ability to continue to collect work-related injury and illness data through NEISS, CPSC shall provide CDC-NIOSH a period of up to 30 days to review and provide comment on the privacy and security implications of the new data collection. CPSC shall ensure that agreements with contract agencies include provisions requiring the contracting agencies to apply all appropriate management, operational, and technical security controls including physical security needs, personnel security needs, network security, and procedures for the retention and timely destruction of directly or indirectly identifiable records. Additionally, CPSC shall make a reasonable effort to ensure that CDC-NIOSH have, at their discretion, a period of up to 30 days for review of products arising from such agreements that include work-related case information and that are intended for public release. The CDC-NIOSH review shall not prohibit data release nor shall it be implied to indemnify CPSC or other agencies in the event of public release of personal identifiers through their data release mechanisms.

CDC-NIOSH, as the originating agency, shall be notified in a timely fashion of all work-related data requests under the Freedom of Information Act (FOIA) or other applicable court order. Routine FOIA requests specific to only work-related case information shall be referred to CDC-NIOSH for disposition. Requests for mixed data including more than just work-related case information shall be responded to by CPSC with the opportunity for CDC-NIOSH to provide comment on the releasability of the work-related case data.

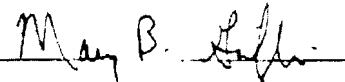
The provisions in this section, Information Safeguards, shall not in any way prohibit or limit the use of the NEISS work-related injury and illness data by CPSC staff in fulfillment of their agency mission and responsibilities. CPSC shall make a reasonable effort to ensure that CDC-NIOSH have, at their discretion, a period of up to 30 days for review of products that include significant work-related case information and that are intended for public release. The CDC-NIOSH review shall not prohibit data release nor shall it be implied to indemnify CPSC.

**Approved and Accepted for Consumer Product Safety Commission**

Signature:  Date: 7/31/09

Name: **Kim Miles**  
Title: **Contracting Officer**  
Address: **Division of Procurement Services**  
**U.S. Consumer Product Safety**  
**4330 East West Highway, Room 517**  
**Bethesda, MD 20814**  
Phone: **301-504-7018**

**Approved and Accepted for CDC/NIOSH**

Signature:  Date: 7/17/09

Name: **Kathy Kirkland**  
Title: **Acting Associate Director for Management Operations**  
Address: **National Institute for Occupational Safety and Health (NIOSH/CDC)**  
**2400 Century Parkway NE, M/S E20**  
**Atlanta, Georgia 30345**  
Phone: **404-498-2500**