

Document, track and address staff injuries to emphasize employee safety

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While there's a growing focus on workplace violence in home health, don't let your policies and procedures around work-related injuries fall through the cracks. Refreshing your incident response and reporting policies not only supports employee wellbeing but could prevent costly OSHA penalties.

Nearly 500 workplace-related incidents were reported in home health settings in 2024, according to the Occupational Safety and Health Administration (OSHA). The data was part of OSHA's annual workplace injury and illness report released on April 17, 2025, which consisted of approximately 370,000 reports submitted on OSHA Form 300 Summary of Work-Related Injuries and Illnesses.

Employers have a legal obligation to provide their staff with a safe working environment, says Robert Markette, an attorney with Hall, Render, Killian, Heath & Lyman in Indianapolis, Ind. Strong internal policies that ensure a swift response to these incidents not only help prevent employee harm but allow your team to continue providing high-quality care without pause, he notes.

Organizations with more than 10 employees are required to maintain a record of all serious work-related injuries and illnesses. This includes all incidents that require medical treatment beyond first aid, as well as work-related needlestick injuries or cuts caused by an object contaminated with blood or other potentially infectious materials.

Common injuries and illnesses reported among home health employees in OSHA's 2024 dataset include:

- Cuts and contusions
- Ergonomic injuries, like strains from lifting patients
- Exposure to diseases or illnesses like COVID-19
- Injuries caused by patients or pets, including bites or scratches
- Needlestick injuries

These incidents are common across health care settings, says Kristen Wheeler, executive director of private duty home care for the National Alliance for Care at Home. But these risks are often elevated for post-acute care providers who work alone and in an

uncontrolled environment, she notes. “Those of us that have been in the office sometimes forget that our staff is out there all by themselves.”

Accurate and timely reporting also plays a key role in safeguarding your staff and preventing potential legal issues down the line, Markette says. For example, an employee could sue employers who violate the Family and Medical Leave Act (FMLA) by terminating or canceling the staff member’s health insurance while on medical leave. Maintaining comprehensive documentation will also help employers navigate the workers’ compensation process and demonstrate compliance, he adds.

Safety starts before home visits

Culture plays an essential role in ensuring the safety of your staff, Wheeler says. Leadership must create an environment in which clinicians feel comfortable voicing their concerns, even if the threat of injury is just hypothetical, she notes.

Many agencies have taken great strides to create a culture in which employees report any issues without fear of repercussions, Wheeler says. But even those with strong safety cultures still benefit from reviewing their incident response plans, she adds.

Proper training can also help ensure that staff are aware of and prepared for possible safety risks, Markette says. Has every staff member who will be carrying, lifting or moving a patient been educated in the proper technique? Are they aware of how to use relevant equipment?

It’s more than just OSHA compliance

OSHA’s focus in health care remains on workplace violence. But your agency should still take a look at the recent data and use it to update your incident management requirements, Wheeler says.

Prepare staff for possible risks. Assess the patient’s living situation during admission in order to prepare for any safety concerns, Markette recommends. Once identified, make sure your clinicians are aware of any potential issues before care begins, he notes.

Field staff may also benefit from receiving a safety checklist that includes specific situations or objects to look out for, Wheeler says. Experienced clinicians are likely looking for red flags already, but each patient’s home and situation will vary, she notes.

In a standard assessment of the home, remind staff that unsafe items or situations don’t just impact patients, Wheeler suggests. For instance, a clinician may note that a throw rug

could cause a patient to fall without realizing that she is at risk of the same injury, she explains.

Take action. The immediate next steps required after an incident will depend on the severity of the employee's injury, Markette says. That said, some basic policies could help streamline how your agency tackles these issues. For example, providers may encourage a clinician injured during work to visit an after-hours medical clinic.

Strong policies can also prevent work-related incidents from interrupting care, Markette adds. Some situations may call for leadership to jump into action by looking for another staff member who can cover the injured employee's next patient visit or shift, he notes.

Follow up. Take each incident seriously, Wheeler stresses. If an injury occurs in a patient's home, take the time to go out and review the environment, she notes. If a patient is difficult for a clinician to lift alone, send a second employee to the home during the visit.

Don't just report the incident to OSHA and then let it drop, Markette says. Agency leadership should assess the situation to determine exactly what happened and why, he notes. For instance, consider an employee who strains her back lifting the patient. Did the employee choose to cut corners, or is it a breakdown of education?

Be sure to document how you addressed the incident after it occurred, Wheeler suggests. "If OSHA suddenly walks in the door and sees a log of injuries over the course of six to eight months and nothing has been documented about the follow-up, that could be a real problem for the provider."

Look for trends. Analyze your agency's incident reporting data to identify any reoccurring issues, Wheeler suggests. Whether it's trips, sprains or animal bites, your team must consider why these injuries are prominent among staff, she notes.

Consider creating a safety committee that serves to examine frequent safety concerns, Wheeler says. Include frontline employees on this team, she recommends. These individuals could provide key insights into how to avoid and address these issues.