Vermont Farm Health Task Force



Creating Common Ground Solutions for Farm Health and Safety

Agriculture



- Ranked as the most dangerous industry in the country;
- High risk for non-fatal and fatal injuries;
- Family members also at risk for both injuries and death;
- Workers of all ages routinely lose work time due to injuries that lead to permanent disabilities.

Access to Services

- Continuing lack of sufficient Dental, Primary Care, Medical Specialists and Behavioral Health services in rural areas.
- Lack of trained practitioners knowledgeable about Agricultural Medicine and Occupational Safety.
- Many farmers and farm families will still not be enrolled in the state health care system.

Rural Health vs. Agricultural Health

Rural Health - focused on development and support of accessible and appropriate health care services for all rural residents.

Agricultural Health and Safety – a practice field focused on reducing occupational injuries and illnesses in agricultural populations.



Agricultural Medicine

 Specialty area of occupational and environmental medicine, and public health.



- Multidisciplinary approach
- Research base for core curriculum

Specific Illnesses/Conditions

- Respiratory Conditions
- Skin Diseases
- Cancers
- Pesticide-Related Illnesses
- Musculoskeletal Diseases
- Environmental Health Hazards
- Zoonotic Diseases
- Physical Factors (Heat, Cold, Noise, Vibrations)

Special Risk Populations

- Children/Teens
- Older Farmers
- Migrant Farm Workers

Children

Children living on farms are at great risk of injuries and death due to:

- Lack of environmental controls
 Fencing
 Safe play areas
- Large animals
- Dangerous farm machinery
- Inadequate Supervision





All Farm Youth

2012 NATIONAL DATA

FATALITIES

2.5 million children living / working / visiting hazardous agricultural workplaces.

Major fatality causes: Farm vehicles (17%) Machinery (25%) Drownings 16%)

Work-related fatality rate for young agricultural workers was 3.6 times higher than young workers in all industries.

INJURIES

An estimated 7,780 youth living on farms were injured in 2012.

Major injury causes: falls from structures/surfaces, large animals, farm vehicles

Overall injuries declined substantially, *except among children under 10*, and *ATV injuries* have increased 150% among 0-17 year old farm youth .

Older Farmers

- Vermont farm owners/operators have an average age of 57
- Normal aging impacts on hearing, vision, smell, dexterity, balance, respiratory capacity and general reaction time
- 56% of US farmers older than 55 use medications documented to result in heightened accident rates



Migrant/Immigrant Farm Workers

- Linguistic, economic and cultural isolation
- Limited access to medical and mental health care
- Lack immunizations and/or medical records
- Not familiar with causes/symptoms of Lyme Disease and other agricultural diseases
- Unfamiliar with basic first aid or farm emergency procedures

FARM HEALTH TASK FORCE



Mission

- Maintain vital and diverse statewide organization to sustain a healthy, stable farm workforce in Vermont.
- Use common ground approach focused on the shared health and safety needs of farmers, farm workers and family members living and working on Vermont farms.
- Work to advance state and organizational policies and programs to improve the lives of all members of the farm community.

Organization

- Statewide membership organization
- Four standing workgroups:

Farm Safety
Practitioner Education
Migrant/Immigrant Farm Worker Health
Outreach and Education

- Steering Committee
- Quarterly Meetings



Membership

- Farmers
- Medical Practitioners and Administrators
- Agricultural Professionals
- Public Health Specialists
- Mental Health Clinicians
- Pharmacists
- Migrant Worker Services Staff, and Advocates
- Vermont Congressional Staff
- University of Vermont: Faculty and Staff
- Department of Health, Department of Labor,
 Agency of Agriculture: Policy and Program staff

Task Force Activities

- Create partnerships and funding to develop services for state's agricultural workforce.
- Educate farm families, health practitioners, agricultural professionals and general public about unique health and safety needs of the agricultural communities.



Activities

- 3. Run Health and Wellness Booths at Annual Farm Show and Addison County Field Days
- 4. Provide Farm First Aid and Emergency Training for Migrant Farm Workers on Dairy Farms
- Offer 50-hour Agricultural Medicine and Occupational Safety Trainings every two years.
- 6. Pilot model for county-based agricultural medicine collaborative service delivery.

Other Collaborative Projects

- State Barn Fire Initiative
- InvestEAP-Farm First Program for dairy farmers



- Project with Departments of Health and Labor to improve formaldehyde safety practices on dairy farms;
- UVM Extension's Tractor Roll Over Protective
 Systems Program (ROPS).



Planning for the Future

Use Addison County Pilot Projects as next steps in developing new working model for multidisciplinary, interagency Agricultural Medicine services.



Addison County Pilot Projects

AGRICULTURAL MEDICINE
COLLABORATIVE

AGRICULTURAL MEDICINE
TEACHING DAY

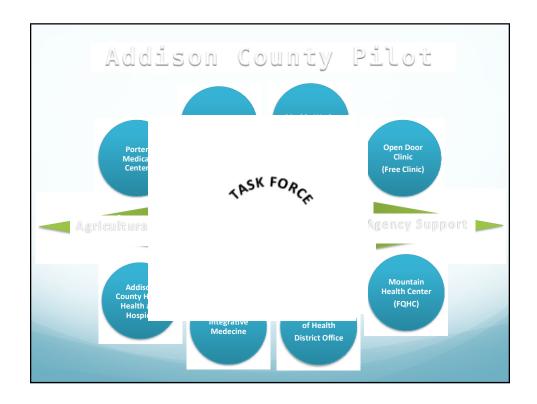
County Agricultural Medicine Collaboratives

Develop and support county coalitions of trained, certified rural health practitioners who can:

- 1. Recognize, diagnose, refer and/or treat agricultural illnesses and conditions;
- Imbed in practice settings new Agricultural Medicine protocols for: health histories; screening and diagnostic procedures; specialist referrals; and, managing farm medical emergencies;
- 3. Develop sustainable local health service delivery systems for farm patients.

Addison County Pilot Collaborative

- Create and test model for county-wide shared service delivery system during the next two to three years.
- Increase individual organizations' and the network's expertise and service capacity.
- Prepare for a December, 2014 application for a HRSA Rural Health Planning Grant and other foundation funding.



Expand Agricultural Medicine Training Options

- Current 50-hour comprehensive multidisciplinary training offered every 2 years.
- Pilot a 1-day Introduction to Agricultural Medicine Teaching Day for staff of Collaborative agencies.
- If successful, plan Teaching Days at least once a year for groups of Vermont and New England medical and agricultural professionals for preliminary education and as a recruitment tool for full Agricultural Medicine Training.

Agricultural Medicine Teaching Day

INTRODUCTION TO AGRICULTURAL MEDICINE

Wednesday, June 18, 2014 8:00 A.M. – 4:30 P.M.

The Inn at Baldwin Creek, Bristol, Vermont



WHAT WE NEED

Help to...

- Improve access to health care in rural areas (primary care, dental, behavioral health, medical specialists).
- Increase Health Connect enrollment outreach in the farm community.
- Update 2006 statewide farm health surveys for owner/operators and farm workers.
- Support the continued delivery of Task Force Agricultural Medicine training.



FOR MORE INFORMATION

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Resources

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- S. Wright, B. Marlenga, B. Lee. Childhood Agricultural Injuries: An Update for Clinicians. <u>Current Problems in Pediatric Adolescent Health Care</u> 2013; 43:20-44.
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