

SHARP's MUSTCURE Criteria

Magnitude of the problem being addressed

- Low** Less than 100 workers statewide affected (<5/100,000 FTE-yr.)
Medium 100 to 10,000 workers statewide affected (5/100,000 to 5/1,000 FTE-yr.)
High 10,000 or more workers statewide affected (>5/1,000 FTE-yr.)

Urgency of the problem (e.g. infectious, rapidly changing exposures)

- Low** Fixed Location, low "attack" rate, well described problem or exposure
Medium Fixed or transient location, higher attack rate,
High Transient location, changing exposures, unique opportunity

Seriousness of the hazard or injury

- Low** Temporary injury/illness, not incapacitating
Medium Severe, temporary, incapacitating illness or injury.
High Life threatening, permanent degradation of quality of life through injury, or illness

Technology transfer opportunities (e.g. tools, equipment for exposure assessment, solutions)

- Low** Applicable to the study site only.
Medium Applicable to a small number of industries, or workers
High Applicable to a large number of industries/workers, (in terms of workplaces or number of workers, or both)

Cost of the injury/illness being addressed, (Medical, lost wages, down time, etc.). Specify direct or indirect costs.

- Low** < \$100,000/year
Medium 100,000/year to \$1 million/year
High > \$1 million/year

Under reporting potential (e.g. reproductive hazards, illnesses not readily identifiable in Workers' Compensation data)

- Low** No evidence of under reporting
Medium Some evidence suggesting under reporting
High Some evidence of under reporting

Research gaps (e.g. incidence rates of work-related asthma in WA, dose response relationship of musculoskeletal disorders)

- Low** Does not address research gaps
Medium Somewhat addresses research gaps
High Specifically addresses research gaps

Emerging or growing hazard, illness, injury (e.g. molds and IAQ issues) or new way to view well described hazard (e.g. lead exposure in construction)

- Low** Perception of increasing incidence
Medium Evidence suggesting increasing incidence
High Evidence demonstrating increasing incidence