



AOHP 2010 National Conference Poster Presentations Abstracts

2010 P001 Implementing A Safe Patient Handling Program, A One-Year Look Back

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Patient handling is the number one hazard in hospitals throughout the United States. Transferring, lifting and repositioning patients manually are hazardous work tasks. They leave healthcare professionals open to disabling musculoskeletal disorders (MSDs) and patients at risk for injuries that can complicate their underlying health problems.

At Peconic Bay Medical Center, the Employee Health Department receives all employee incident reports, and a review of these incident reports revealed that a rise in lifting and patient handling injuries was occurring. It was determined that these injuries were directly related to staff's limited access to assistive transfer devices and training and indicated that such injuries occurred while staff positioned patients in bed and during lateral transfers.

In an effort to decrease and prevent further injuries, as well as to reduce or eliminate the direct and indirect costs of patient handling injuries, Peconic Bay Medical Center sought to implement a Safe Patient Handling Program. This program included the purchase of patient handling devices as well as a comprehensive training program. The goal was to prevent and reduce injuries related to patient handling by 60 percent within one year of implementation. This program resulted in a dramatic improvement in that Peconic Bay Medical Center experienced a 63 percent decrease in patient handling injuries within the first year of implementation.

2010 P002 Hearing Conservation Program In a Health Care Setting

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Hearing is one of our most important senses. Hearing loss due to noise exposures is among the most pervasive occupational health problem facing occupational health professionals. The development of a successful hearing conservation program reduces and prevents the occurrence of noise generated hearing impairment. A successful program prevents employees from developing progressive hearing loss. In addition to this obvious outcome, management realized reduced medical expenses and a reduction in workers' compensation costs.

It is generally recognized that there are seven components of an effective hearing conservation program. The components are noise measurement, engineering and administrative controls, monitoring audiometry, hearing protection, employee training, recordkeeping and program evaluation. The occupational health professional is the catalyst who coordinates all the components among employees, medical professionals and managers. In addition, the occupational health professional must have an understanding of OSHA regulation governing Noise and Hearing Loss Standards.

2010 P003 Smack-Dab in the Middle! H1N1 Novel Influenza Prevention in a New York City Specialty Hospital

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New York City experienced an epidemic of H1N1 Novel Influenza during the spring of 2009. Occupational Health Service and Infection Control partnered as a team to prevent H1N1 transmission among employees and patients at a 162-bed orthopedic specialty hospital with 3,000 employees located in the heart of New York City.

Prevention opportunities included a robust vaccination program conducted in coordination with the New York City Department of Health and Mental Hygiene, and a video program regarding influenza-like-illness (ILI) and vaccination was posted on the hospital intranet. Education was provided via e-mail regarding respiratory etiquette and shelter-in-place. Instructions were provided to management and employees regarding appropriate use of sick time and returning to work.

No clusters of influenza-like-illness (ILI) were reported among hospital employees, and there were no reported cases of secondary transmission of influenza to hospitalized patients.

2010 P004 Secrets to Successful Staffing in Employee Health

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Occupational and employee health programs need help from time to time. Vacations and extended absences must be staffed. Flu clinics, wellness fairs and special events often require additional personnel. You hate to go on vacation because you know there will be a pile on your desk when you return. There are some secrets to help you return to work and be able to find your desk. Occupational and employee health has unique needs and some challenges when it comes to temporary staffing. These secrets are: what to look for in an agency; how to communicate your needs; and creating a partnership. What are the agency's responsibilities, and what are your responsibilities? Finding the right fit will make going on vacation much easier. Enjoy, and don't forget your sun screen!

2010 P005 Evaluation of the Workforce Initiatives Safe Handling (WISH) Minimal Lift Program on Patient Care Provider Injuries, Quality of Work Life and Patient Satisfaction

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After an assessment of injury factors related to patient handling, a hospital invested in a minimal lift mechanical equipment program designed to promote ease of sliding, transferring and positioning of patients. Equipment included ceiling lifts for patient beds, slide sheets, standing and ambulation aids. Prospective survey research and a retrospective chart review were conducted. The purpose of the study was to measure the return on this investment, injury rates and associated average costs before and after the lift equipment was installed. Injury rates decreased by 30 percent. Average total costs for work-related injuries also decreased.

2010 P006 The Intersection of Employment and Intimate Partner Violence and Women's Concerns in Sustaining Employment

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Workplace violence accounted for 18 percent of all violent crimes in the United States, with Federal Source reporting 17 percent of workplace homicides against women were attributable to Intimate Partner Violence (IPV). The purpose of this study was to provide insight into how the workplace either facilitates or hampers women in dealing with such situations. All participants (N=11) were asked questions regarding the severity of abuse, their personal challenges with sustaining employment while involved in IPV, and how the workplace impacted their ability to sustain employment. The study specifically addressed gaps in the knowledge about how women, from a first-person standpoint, simultaneously deal with IPV and employment.

Three major themes were identified within the data: the value of work; the struggle of abuse; and the environment of work. The results were illuminating on the extensiveness of the abuse, the value women attributed to being employed, and in most cases, the lack of resources and the non-supportive atmosphere of the workplace. The occupational health nurse is perfectly positioned for the employer, the employee, professional colleagues and the nursing profession as an advocate for written policies and for increasing awareness and gaining competencies in identifying the signs of IPV.

2010 P007 Improving Staff Compliance with Safe Patient Handling through Six Sigma

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This Six Sigma team's project goal was to increase nursing assistant and RN compliance with following the proper safe patient handling process for patient transfers and bed mobility. One 48-bed medical-surgical nursing unit, with a compliance rate of 51 percent based on 31 patient observations, was included in the project scope. Using Six Sigma methodologies, five critical causes for staff non-compliance with the safe patient handling process were identified. Throughout the course of this project, we were able to improve compliance with the use of rapid cycle changes. Compliance was increased by 83 percent at the 120-day check-in.

2010 P008 Evaluation of a New Lifting Product and Process to Promote Patient Hygiene and Reduce the Risk of Employee Injury

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Turning and lifting of patients to provide hygiene to the bedridden incontinent patient is performed many times a day. This repetitive procedure may require more than one person to perform and may lead to employee strain and injury. In 2000, ANA reported "that 38 percent of the nursing workforce has been affected by back injury. 68 percent of disabling injuries reported by nurses were attributable to over-exertion injuries from lifting patients. 98 percent of patient lifting was still done manually."¹ Two lower back pain risk factors have been identified as "heavy manual lifting and repetitive movement: lifting and twisting."²

The purpose of this case study was to evaluate the use of lifting straps with a patient lifter with T bar technology to safely suspend the patient limbs for hygiene cleaning while eliminating the need for additional staff to assist in the procedure and reducing injury to the employees. No workers' compensation claims have been initiated on this unit from strain or fatigue.



¹American Nurses Association Web site, NursingWorld, Jan.-Feb. 2000

² LBP Risk Factors Source: Valerie Beecher and Danielle Wheeler-Vickery of SUNY Upstate Medical University

2010 P009 Cost-Effective Debriding Alternative to a Pharmaceutical Enzymatic Agent

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Honey impregnated dressing is reported to be a cost-effective, non-cytotoxic alternative to enzymatic debridement for wounds with eschar, particularly when residents are not surgical candidates.

Honey impregnated calcium alginate dressing (HICAD) was selected as a non-caustic, natural alternative to pharmaceutical enzymatic agents for debridement of a sacral pressure ulcer with a black eschar measuring 10 cm x 9.5 cm. The HICAD was applied daily and as needed for soiling, and covered with a foam dressing. Within two weeks, the black eschar transitioned to thick tenacious slough. Within eight weeks, the wound was beefy red, with surrounding tissue healed enough to permit adherence of a dressing. Dressing changes were decreased to three times a week. Black eschar was rapidly debrided with the HICAD. The wound remained infection free, and the size decreased to 4.5cm X 4.7cm (77 percent) despite multiple co-morbid factors. Active *Leptospermum* HICADs enhanced wound healing in this resident with multiple co-morbidities. The dressing provided a pain-free, cost-effective alternative to an enzymatic debriding agent, and it was easy for staff to apply. Granulation tissue was enhanced, and no overgrowth of microorganisms was noted.

This poster won first place at the 2010 American Professional Wound Care Association's National Clinical Conference.

2010 P010 Management of an MRSA Colonized Wound Using Honey Impregnated Calcium Alginate Dressings

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In San Mateo Medical Center, a county system of healthcare, cost for healthcare and wound care is either provided by Medi-Cal or not reimbursed. Caregivers are compelled to provide cost-effective infection control and wound care management for all hospitalized patients and long term care residents. Honey impregnated calcium alginate dressings were investigated as a cost-effective form of infection control and viable wound management option for a mentally compromised patient with MRSA colonization of a dehisced abdominal wound.

Preparing to discharge a patient with chronic schizophrenia to the mental health system included patient education about local wound care using honey impregnated calcium alginate dressings. The patient received instruction regarding daily wound cleansing, application of a *Leptospermum* honey calcium alginate dressing and a cover dressing. The patient's wound was evaluated bi-weekly.

Honey dressing provided an easy dressing change for this psychiatric patient over the dehisced abdominal site. The protocol was easy for the patient to follow, the wound remained infection free, and healing was promoted in this previously non-healing wound.

This poster received a third place award at the 2009 American Professional Wound Care Association's National Clinical Conference.



2010 P011 Efficient Employee Vaccination Utilizing a Novel Scanning System

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Children's Hospital of Wisconsin (CHW) has implemented a novel scanning system that greatly enhances the efficiency of capturing employee vaccination data. This scanning system, commercially available as Vac-Seen, allows CHW to scan employee badges and quickly select the vaccine, site and drug information. The data in the scanner is then uploaded to CHW's employee health software, thereby eliminating the need to type in the data from consent forms. As a result, CHW has been able to save hundreds of hours annually.