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AOHP Commissions National Survey on Blood Exposures Among Healthcare Workers

November 18, 2013 – The Association of Occupational Health Professionals in Healthcare (AOHP) recently commissioned a survey among its members to establish the first nationally representative blood exposure database and benchmark resource. The results of AOHP's inaugural 2011 EXPO-S.T.O.P. (**EXPO**sure **S**urvey of Trends in **O**ccupational **P**ractice), the largest annual survey of its kind conducted in the United States, were released in the Fall 2013 edition of the AOHP *Journal*.

"Blood exposure among healthcare workers (HCW) is a serious occupational risk that healthcare facilities strive to reduce," explains Linda Good, PhD, RN, COHN-S, Director, Employee Occupational Services, Scripps Health, San Diego, CA, and EXPO-S.T.O.P. co-author. "For the first time, we now have stick and splash exposure benchmark rates that represent the United States nationally."

A nine-item electronic survey was developed and distributed to AOHP members across the nation in 2012 to ascertain blood exposure incidence and denominator data. The survey, which will be conducted annually by AOHP, will provide results to help healthcare facilities enumerate and categorize blood exposures to better understand how they occur, how they can be reduced and what resources are required to achieve their reduction. The survey also identifies best practices in hospitals with low incidence rates of blood exposures.

"AOHP members from 125 hospitals in 29 states participated in EXPO-S.T.O.P.," says survey co-author Terry Grimmond, FASM, BAgrSc, GrDpAdEd, Director, Grimmond and Associates, Microbiology Consultants, Hamilton, New Zealand. "The survey shows a sharps injury (SI) rate of 24 per 100 occupied beds, or 1.9 per 100 full-time equivalents (FTE.) Extrapolating nationally, we estimate that annually, 320,000 US HCW sustain SI in hospital and non-hospital settings. This is the first national estimate since the Needlestick Safety and Prevention Act of 2001. It indicates the mandated use of safety engineered devices alone is not achieving our reduction goals, and a new vigor must be found to protect our HCW."

This incidence of SI is significantly higher than in other contemporary surveys and shows that little reduction in SI rates has occurred in the last decade. AOHP is committed to reporting this information to compel healthcare facilities across the nation to identify new methods to protect HCW from blood exposures and to set the goal for blood exposures at zero.

AOHP, led by an experienced and dedicated group of occupational health professionals, is a national association representing thousands of HCW across the nation and beyond. The association's vision is to be the defining resource and leading advocate for occupational health and safety in healthcare.

AOHP promotes health, safety and well-being for HCW through: advocating for employee health and safety; occupational health education and networking opportunities; health and safety advancement through best practice and research; and partnering with employers, regulatory agencies and related associations.

For more information about AOHP or this article, contact Judy Lyle, AOHP Executive Director, at 800-362-4347, or e-mail info@aohp.org. Copies of this article are available to non-AOHP members by contacting info@aohp.org.

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