

## AOHP 2012 Annual National Conference Abstracts

### W001

Wednesday, October 3, 2012 8:00 am - 5:30 pm *(Lunch not included)*

8-hour Workshop *Level: Basic*

#### **Title: Getting Started in Occupational/Employee Health**

**Presenters: Aftab Ahmed, MSN RN, Denise Knoblauch, BSN RN COHN-S/CM and Rosalie Sheveland, RN CIC COHN**

**Topic Overview:** This comprehensive, informative presentation is designed for the occupational health professional new to the field. The eight-hour didactic course was developed from the *Getting Started* manual, which is updated every two years by the AOHP organization. Course content includes valuable resources, encourages interactive discussion and is presented by a team of knowledgeable experts. All participants will receive the 2012 edition of the *Getting Started* resource manual in CD format.

#### **Objectives:**

1. Describe how the occupational health professional interacts in the healthcare facility's organizational structure.
2. Discuss areas of medical/legal confidentiality in occupational health.
3. Identify federal, state and local regulatory requirements as related to job placement, physical hazards, and biological and chemical exposures.
4. Review current infection prevention and control practices related to infectious diseases.
5. Identify strategies to utilize health teaching in infection prevention and control, and safety.
6. Describe the effectiveness of case management in loss control.
7. Explain how to communicate the value of the occupational health professional's service and continuous performance improvement.

#### **Presenter Bios:**



**Aftab Ahmed** is an independent consultant for occupational health and safety. He graduated from a nursing school in Manchester, England and holds a Master's Degree in Nursing from Lubbock Christian University. Ahmed has 30 years of nursing experience in a wide variety of healthcare settings, including intensive care, nursing administration and public health, including 19 years in occupational health. He has presented on various employee health and workers' compensation topics at national conferences. In his role as a consultant, Ahmed assists healthcare facilities and industry to develop, implement and evaluate activities relating to health maintenance, drug free workplaces, hospital safety, decontamination response teams, respiratory protection programs, emergency preparedness task forces, and injury prevention and management.



**Denise Knoblauch** is a Case Manager in Occupational Health with more than 20 years as an occupational health professional in healthcare. She began her career as a lone Employee Health nurse in a small rural hospital and transitioned to an urban medical center which provides occupational health services to medical center employees and 500 companies. She has experience as a staff nurse, infection control nurse, clinic coordinator and case manager. She developed the case manager model in her department. In her current position, she facilitates communication and return to work issues for medical center and employer groups. An active AOHP member on the local and national levels, Knoblauch fills many leadership roles, including current co-chair of the Continuing Education Committee and co-instructor for *Getting Started on the Road*. She also presents on

many occupational health related topics nationally, regionally and locally, and is co-researcher of a nursing research project focusing on reducing injuries via nutritional education in the housekeeping department. She is a board certified occupational health nurse specialist and case manager from ABOHN.

**Rosalie Sheveland** is the Director, Employee Health Services at O'Connor Hospital in San Jose, CA. She has more than 20 years experience in employee health and workers' compensation program management and 12 years experience in infection control in the acute care hospital setting. Sheveland has been a member of AOHP for more than 20 years and has served as Region 1 Director, Chapter President, Vice President, Secretary, and is the current President of the AOHP CA Northern Chapter. She has presented on various workers' compensation, infection control and employee health topics at national and state conferences.

## **W002**

**Wednesday, October 3, 2012 8:00 am - 3:20 pm (Lunch not included)**

6-hour Workshop *Level: Intermediate*

### **Title: A Practical Guide for Developing, Maintaining and Enhancing Your Safe Patient Handling Program\***

**Presenters: Colin Brigham, CIH CSP CPE CPEA CSPHP, Catherine Gouvin, OTR/L CHT CSPHP and Kent Wilson, CIE CSPHP**

**Topic Overview:** This workshop will offer recommendations and advice from three individuals who have experience with implementing and sustaining a safe patient handling program (SPH) from the perspectives of the employer, consultant and vendor. Discussion will be geared for those who have a management role for SPH in an acute care environment. Practical examples and tools that are useful in the clinical setting will be presented. The workshop will include a combination of lecture, group interaction and exercises, and a review of case studies and assessment tools. Attendees are encouraged to bring their tough problems to the workshop for discussion.

#### **Objectives:**

1. Identify strategies for implementing and sustaining a safe patient handling program.
2. Explain the use of assessment tools for a safe patient handling program.
3. Clarify how to prepare and use a Cost-Benefit Analysis using Injury Logs and Insurance Loss-Runs.
4. Review how to measure results of an effective safe patient handling program.

*\*The Association of Safe Patient Handling Professionals (ASPHP) proudly acknowledges its relationship with AOHP and recognizes the contact hours for this course in meeting continuing education requirements for its professional certification process.*

#### **Presenter Bios:**



**Colin Brigham** is a Certified Industrial Hygienist (CIH,) Certified Safety Professional (CSP,) Certified Professional Ergonomist (CPE,) Certified Professional Environmental Auditor (CPEA,) and Certified Safe Patient Handling Professional (CSPHP) with more than 38 years experience in the safety and health field. In his current position, he helps to manage the provision of safety and health services to client companies in the healthcare sector, the construction industry, general industry and the public sector. This has included ergonomics program (including safe patient handling) development, implementation and training for a great many employers. He has served (including as Chair) on the

Ergonomics Committee of the AIHA and taught Ergonomics in the Master's in Environmental Health program at Temple University. He has helped healthcare systems to develop and implement safe patient handling programs since 1989.



**Catherine Gouvin** is a Registered Occupational Therapist, Certified Hand Therapist, Certified Specialist in Health Ergonomics and a Certified Safe Patient Handling Professional. She is responsible for the ergonomics program and safe patient handling program at Lawrence & Memorial Hospital. She has practiced occupational therapy in a variety of areas including outpatient orthopedics, psychiatry and inpatient rehabilitation. She is a graduate of Quinnipiac University with a bachelor's degree in Occupational Therapy.



**Kent Wilson** has performed ergonomic and safety evaluations for dozens of healthcare facilities around the country. He is a Certified Ergonomist who takes an active role in the development of regulatory standards. He is a full member of the Human Factors and Ergonomics Society, The National Safety Council, and The American Industrial Hygiene Association, as well as an active participant on their Ergonomic and Healthcare committees. Wilson is the President of the Association of Safe Patient Handling Professionals.

### **W003**

**Wednesday, October 3, 2012 8:00 am - 12:10 pm**

4-hour Workshop *Level: Intermediate*

#### **Title: "Dollars and Sense:" The Science, Practice and Economics of IGRA and Tuberculin Skin Tests**

**Presenters: Daniel Brustein, MD FACOEM, Jennifer Lyn Guida, MPH, Irene Iuppa, David C Marder, MD MPH and Wendy Thanassi MD MA**

**Topic Overview:** This workshop will address changes in tuberculosis (TB) testing protocols, their translation into real-world practice, and the associated effects on cost and surveillance.

The workshop will begin with a presentation on the biostatistics behind TB testing to lay a solid foundation on how to calculate and interpret sensitivity, specificity, predictive value and serial testing. The second presentation will review interferon gamma release assay (IGRA) laboratory limitations and requirements and propose a treatment algorithm for latent tuberculosis. This discussion will be continued with an algorithm for IGRA serial testing and the clinical management of healthcare workers. The final presentation will be an interactive session to assess the cost of IGRAs and tuberculin skin tests (TSTs.)

#### **Section I – 50 min**

##### **Introduction to Test Diagnostics: Can You Trust Your TB Test Results?**

**Presenter: Jennifer Lyn Guida, MPH**

**Topic Overview:** The Centers for Disease Control and Prevention (CDC) supports the use of IGRAs in all situations where TSTs can be used; however, IGRA is preferred over TST for BCG-vaccinated populations and non-compliant populations. Many consider IGRA to be a better test than TST, but is this a fact or a myth? How good are these tests, and how do you know?

When a new clinical test comes into use, it is important to understand the test's strengths and weaknesses. This starts with a few basic calculations. This session will explain the basic biostatistics behind so-called test diagnostics, including how to calculate and interpret sensitivity, specificity, predictive value and serial testing. The presenter will illustrate how knowledge of these so-called "test diagnostics" can help Employee Health practitioners make clinically informed decisions.

**Objectives:**

1. Review how to calculate and interpret sensitivity, specificity, predictive value and serial testing in the context of tuberculin skin tests and interferon gamma release assays.
2. Recognize the difference between confirmatory testing and annual testing as it pertains to serial testing.
3. Understand serial testing and how it relates to net sensitivity.

**Presenter Bio:**

**Jennifer Lyn Guida** is a Healthcare Research Analyst at Axion Health, Inc. She recently completed her Master's of Science Degree in Public Health with a concentration in epidemiology. Formerly, she was a teacher's assistant for an Applied Biostatistics course and tutor for graduate level biostatistics and epidemiology courses. Currently, she leads Axion Health's Medical Content Team in public health and clinical research as it pertains to employee health, as well as designing and integrating complex clinical algorithms into protocols for products.

**Section II – 50 min****All About IGRAs: A Practical Overview of Using and Interpreting IGRA Results**

**Presenter: Wendy Thanassi, MD MA**

**Topic Overview:** The interferon gamma release assays (IGRAs) are the first new tools to have been introduced for the screening for latent tuberculosis infection in the past 130 years. The Palo Alto Veterans Administration (PAVA) Health Care System, has run more than 15,000 IGRAs and experienced the efficiencies and inefficiencies, the cost savings and expenses, the laboratory challenges and requirements, and the complexities and solutions to interpretation of these results.

These novel diagnostic tests are best employed after a working knowledge of the science behind them is introduced. Following that introduction, three short case studies will be reviewed, including relevant supporting medical literature. Laboratory complications and considerations will be addressed. A public access cost analysis to help departments and facilities determine the most cost-effective method (seven scenarios are included) for testing their employee populations will be introduced and then presented for use in Section IV. Finally, interpretation of results, particularly results which change from positive to negative, will be briefly discussed in terms of what we know from the literature and our data analysis.

**Objectives:**

1. Identify the benefits of interferon gamma release assays as surveillance tools for latent tuberculosis.
2. Interpret interferon gamma release assay results, particularly the QuantiFeron Gold-In-Tube: Case-based and Data.
3. Understand the laboratory requirements and limitations.
4. Review cost analysis literature and our model comparing tuberculin skin tests with interferon gamma release assays.

**Presenter Bio:**

**Dr Wendy Thanassi** is the Chief of Occupational Health at the Palo Alto VA and an Assistant Clinical Professor in Emergency Medicine at Stanford Medical Center. Her particular interest is in infectious diseases. She has worked all over the world, including in TB hospitals in South Africa, and would like to help prevent tuberculosis from having the opportunity to spread in the United States.

**Section III – 50 min**

## Developing a Database Driven Algorithm for the Clinical Management of HCWs with Fluctuations in Serial QuantiFERON (IGRA) Tests: A Multi-Center Study

**Presenter: David C Marder, MD MPH**

**Topic Overview:** The CDC acknowledges “uncertainty exists regarding the reproducibility of IGRA results in individual patients and the clinical significance of fluctuations in measured IFN-gamma responses.” We conducted a descriptive study of QuantiFERON-TB Gold In-Tube Assay (QFT-G-IT) for the routine surveillance of healthcare workers between 2008 and 2011. With these results, we are able to propose an algorithm for treatment and reevaluation decisions.

### Objectives:

1. Identify the pros and cons of treatment for latent tuberculosis infection.
2. Recognize the importance of evaluating the interferon gamma release assay positive results prior to beginning a treatment regimen.
3. Understand the patterns of fluctuations found in the descriptive study of our multi-center experience in using the test, and appreciate the rationale for our proposed algorithm.
4. Determine when and how often to repeat tests, as well as how to make treatment decisions based on the results of those tests.

### Presenter Bio:

**Dr David Marder** is Director of the University Health Services, and provides medical surveillance and medical advisorship services to corporate clients through the Occupational Health Service Institute. Included in these duties is the coordination of continuing medical education activities for the occupational component of the center. He has more than 20 years of experience in the field, having worked at the City of Chicago Department of Public Health and Cook County Hospital prior to his current appointment. He has served as final arbiter for the CTA in complex workers’ compensation and fitness for duty cases and has extensive experience as an expert witness in workers’ compensation and environmental disease cases. He currently directs the Occupational Medicine Residency Program at UIC and is an active member of the Chicago Area Occupational Medical Directors Club. Marder’s special interest and expertise is in the evaluation of use of Quantiferon for the identification of latent TB in healthcare workers, and in the field of occupational asthma, about which he has published original research.

### Section IV – 50 min

#### Interactive Workshop on Determining the Cost of Using IGRA Vs TST for Tuberculosis Screening in Healthcare Workers

**Presenters: Irene Iuppa, Wendy Thanassi, MD MA and Daniel Brustein, MD FACOEM**

**Topic Overview:** In this interactive session, participants will be guided through the VAHCS TB screening cost calculator. Entering information such as the number of employees, pre-employees, and volunteers screened for TB at their institution, wage data, TB prevalence, and material costs of the test will allow them to determine the cost of various testing algorithms would be at their institution. Attendees will leave the session with an estimate of the most cost effective TB testing methodology for their circumstances.

### Objectives:

1. Use a cost calculator to assist administrators in determining the most cost effective method for tuberculosis screening of healthcare workers.
2. Estimate the most cost effective tuberculosis testing methodology for your institution.
3. Decipher which factors are important for the cost of various tuberculosis screening methodologies for healthcare workers at your institution.

4. Compare your tuberculosis screening methodology and associated costs with those of other workshop participants.
5. Engage in important discussions on tuberculosis prevention for healthcare workers with participants from across the country.

**Presenter Bios:**

**Irene Iuppa** has been working in the global health research field for the last six years. She was hired by the Department of Veterans Affairs Health Care System to assist in developing recommendations for how to screen healthcare workers for TB in the most cost effective way possible. Over the last year, she has become an expert in balancing evidence-based practice and cost, while creating a calculator which can be used by institutions to determine the cost of screening their healthcare workers for TB.

**Dr Wendy Thanassi** is the Chief of Occupational Health at the Palo Alto VA and an Assistant Clinical Professor in Emergency Medicine at Stanford Medical Center. Her particular interest is in infectious diseases. She has worked all over the world, including in TB hospitals in South Africa, and would like to help prevent tuberculosis from having the opportunity to spread in the United States.

**Dr Daniel Brustein** pursued his bachelor's degree in economics and a carpenter apprenticeship simultaneously, achieving the first at the University of Cincinnati in 1974 and abandoning the second when he entered graduate school in industrial hygiene in 1975. He earned his MSIH in 1977 and is Board Certified in Industrial Hygiene. From 1976 to 1978, he served as a Field Industrial Hygienist with the OSHA office in Cleveland, Ohio, and from 1978 to 1983, he worked in the Department of Industrial Hygiene of the United Rubber Workers International Union. He earned his MD at Case Western Reserve University and completed his training at the University Hospitals/VAMC (Cleveland) internal medicine program in 1990. Since then, he has served in staff and directorship positions at several Cleveland area occupational health programs. He is Board Certified in Internal Medicine and is a Fellow of the American College of Occupational and Environmental Medicine. He is currently a staff physician in the Personnel Health Department of the Louis Stokes VAMC, Cleveland, and Medical Director of University CompCare, a workers' compensation managed care organization.

**Section V – 40 min**

**Panel Questions & Answers**

**W005**

**Wednesday, October 3, 2012 10:10 am – 12:10 pm**

2-hour Workshop *Level: Basic*



**Title: Keeping Employees Out of the Graveyard While Working it: Special Needs of Night Time Workers**

**Presenter: Barbara McCarthy, MSED BSN RN COHN**

**Topic Overview:**

This interactive presentation will discuss the different wellness needs of night shift workers and the increased health risks they face. Identified features will be: what additional health risks they face; how to identify those needs, plan and build wellness initiatives; and providing fun, free or low cost measures that attendees can implement in their organizations. Also discussed will be how to qualify the return on investment your programs can accomplish, and why you should advocate including special groups in your wellness initiatives.

**Objectives:**

1. Identify the business rationale for wellness programs in general, but especially for those on the night shift.
2. Identify four major health issues that night shift workers are at greater risk for than their daytime counterparts.
3. Determine internal and external resources to support, develop and provide program interventions for these employees who are at greater risk due to the hours they work.
4. Discuss how a healthcare model can assist in the development and success of a wellness program.

**Presenter Bio:**

**Barbara McCarthy** has been a nurse for 36 years, having worked in many specialties and positions related to and in occupational health. She was an instructor for former President Clinton's initiative on HIV education in federal agencies. She is a past presenter for the American Association of Occupational Health Nurses and the Association of Occupational Health Professionals in Healthcare at national, state and local levels on topics such as safe patient handling, employee wellness, sleep, and care of employees with bariatric surgery. She is currently the Manager of Occupational Health for Albemarle Health in Elizabeth City, NC. She is a registered nurse and holds a Master's of Science in Health Education from Virginia Tech.

**W006**

**Wednesday, October 3, 2012 1:10 pm - 5:20 pm**

4-hour Workshop *Level: Intermediate*

**Title: Hazardous Medications in Healthcare: The Reality of the Risks and Control Measures to Minimize these Risks**

**Presenters: Karen Karwowski, MSN RN Ed CHSP and Karin L Kolbus, MSN RN COHN-S/CM**

**Section I – 1.75 hour**

**Best Practices in Handling Hazardous Medications in Ambulatory Care**

**Presenter: Karin L Kolbus, MSN RN COHN-S/CM**

**Topic Overview:** Risk assessment of the ambulatory care environment reflects that, with increasing frequency, treatments provided to patients require employees to handle and administer drugs that have been identified by the National Institute of Occupational Safety and Health (NIOSH) as hazardous (carcinogens, teratogens, organ toxic or corrosive.) The clinical staff of an ambulatory care environment includes a few licensed providers (MDs, NPs, PAs and nurse managers) supported by a medical assistant workforce. Awareness of potential hazards and routes of exposure among unlicensed staff is particularly low. To adopt best practices in safe handling of hazardous medications, coordination at every step from purchasing to waste disposal is required. Training of clinical staff is needed to model best practices in safe handling of hazardous drugs. Healthcare workers are also more likely to express confidence that they are empowered to protect themselves from this risk if the organization's management is well informed and supportive. An overview of the toxicology of antineoplastic drugs will also be presented.

**Objectives:**

1. Review the toxicology of potential Hazardous Drug Exposures in Healthcare.
2. Identify hazardous drug utilization often unique to ambulatory care.
3. Examine examples of personal protective equipment and practices recommended for safe management of hazardous drugs in ambulatory care.

4. Illustrate the use of template when working to develop guidelines for other hazardous medications in ambulatory care.

**Presenter Bio:**

**Karin Kolbus** is RN certified in Occupational and Environmental Health, 2001, Certified Medical Case Management, 2001 and Certified OSHA 501 Trainer, 2004. She received her Master's in Nursing Education in 2009. Currently employed by Intermountain Healthcare, Salt Lake City, Utah, as Employee Health Coordinator to Ambulatory Care, she is also a Community Health DNP student of the University of Utah. During the summer of 2011, she completed a study abroad project, providing occupational health nursing support to Global Health Uganda.

**Section II – 1.75 hour**

**Developing an Antineoplastic Medical Surveillance Program for Employees**

**Presenter: Karen Karwowski, MSN RN Ed CHSP**

**Topic Overview:** In 2005, the NIOSH Alert Preventing Occupational Exposures to Antineoplastic and Other Hazardous Drugs in Health Care Settings was published. It called further attention to the healthcare professionals (HCPs) who were being exposed to antineoplastic medications daily, as well as highlighted once again the necessity of surveillance for these employees to assist in maintaining their safety while they provide care to patients.

In October 2007, this health system rolled out a new Antineoplastic Medical Surveillance Program to its employees. This program is not only for medical professionals, but for all employees who come into contact with chemotherapy drugs. Employees are assigned to three groups according to their level of potential exposure risk: primary; secondary; and tertiary. The components of this program include yearly education for all three groups of exposure risk, a surveillance questionnaire and a physical examination performed by our occupational physician and RN every two years.

This program, developed and implemented for a specific population in a large health system encompassing four urban and suburban counties in Michigan, is replicable for both large and small healthcare settings.

**Objectives:**

1. Identify employee groups who are affected by chemotherapy medications.
2. Recognize at least one employee group who fits into each of the three levels of exposure risk.
3. Define at least one strategy to assist in developing a surveillance questionnaire.
4. Recall at least one strategy to assist in developing surveillance educational programming.

**Presenter Bio:**



**Karen Karwowski** is the Nurse Manager of Employee Health and Safety for Henry Ford Hospital and Health Network and West Bloomfield Hospital, which employs approximately 20,000 of the 25,000 employees of the health System throughout southeastern Michigan. Employee Health and Safety provides pre-placement and annual screening, work-related injury treatment and management, BBP needlestick/splash and communicable disease management, antineoplastic surveillance examinations, for cause and HPRP drug and alcohol screening, and wellness supportive activities for employees. Karwowski has been an RN for more than 24 years in various hospital and inpatient sub-acute settings including behavioral and geriatrics. She has worked in many capacities that include Staff Nurse, Charge Nurse, Clinical Coordinator, Inservice Director, Director of Nursing, Corporate Nurse and Nurse Manager. She is certified by the State of Michigan as a Master Train-the-Trainer and TST instructor and provides courses

throughout the state. In addition, she works as a part-time NCLEX-RN instructor for RN graduates preparing for their board examinations. She has just become a Board Certified Healthcare Safety Professional.

### Section III – 0.5 Hours

#### Panel Questions & Answers

#### W007

Wednesday, October 3, 2012 1:10 pm - 5:20 pm

4-hour Workshop *Level: Intermediate*

### **Title: Essential Job Functions: Utilizing an Analysis of the Physical Requirements of Jobs Throughout Employment**

**Presenter: Diane Like, RN COHN-S**



**Topic Overview:** Implementing a physical assessment/job analysis process and incorporating the information into job descriptions is a constant opportunity. Learn steps to include the process in your daily activities while keeping with FMLA and ADA guidelines. Identify tasks to be analyzed, and determine which are essential. Review which key partnerships are paramount to the success of the program, and how to process the return to work note. Obtain practical advice and best practices for pre-placement screening, assessing restrictions, alternate placement and requests for accommodations. Interactive discussion will focus on real life scenarios to enable participants to become familiar with practical application of the process.

#### Objectives:

1. Describe how to implement a physical assessment/job analysis program to be incorporated into the job description for every position.
2. Determine steps to develop consistent processes for evaluation of pre-placement screenings and return to work after injury/illness.
3. Explain steps to develop a consistent methodology for evaluation of performance issues concerning the employee's ability to perform essential functions of his/her position.

#### Presenter Bio:

**Diane Like** is the Regional Manager of Employee Health for Baycare Health System, including 11 hospitals and 18,000+ team members. She received her degree from Purdue University School of Nursing and is a Certified Occupational Health Nurse Specialist by the American Board of Occupational Health Nurses. Like has taught "Leading Quality Improvement" and is responsible for the development and implementation of all policies, procedures, processes and competencies related to Employee Health at Baycare Health System.

#### W008

Wednesday, October 3, 2012 1:10 pm - 3:10 pm

2-hour Workshop *Level: Intermediate*

### **Title: Leadership Strategies and Business Planning for Results – Take the Gamble**

**Presenter: Barb Maxwell, MHA RN COHN-S CCM CWCP QRP FAAOHN**



**Topic Overview:** This interactive session will enhance the business knowledge of participating occupational health professionals (OHPs.) Many tips and tricks will be shared on how OHPs can become more business savvy in today's workforce. Participants will be able to identify key resources and name critical steps in program development. The OHP will describe the importance of his/her role in the operations of an effective occupational health program.

**Objectives:**

1. Describe three initiatives of a Successes-Weaknesses-Opportunities-Threats (SWOT) analysis for strategic planning.
2. Name two critical steps in program development.
3. Identify three key resources in program development.
4. Describe the leadership function in the operations of occupational health services.

**Presenter Bio:**

**Barb Maxwell** established a hospital-based occupational health program in 1986 known as Company Care for HCA. Her current responsibilities include management of operations for 10 Company Care Occupational Health Programs and 16 Employee Health Departments for the HCA West Florida Division. She is Past President of FSAOHN, Inc. and currently serves as the Chair of FOHC and Treasurer for FWCAOHN. She is a fellow through AAOHN. Maxwell received her RN from St. Luke's Hospital School of Nursing, Kansas City, MO, and her BS and Master's in Health Administration from the University of St. Francis, Joliet, IL. She is a contributing author for Dr Nancy Menzel's book *Workers' Comp Management from A to Z*.

**W009**

**Wednesday, October 3, 2012 1:10 pm - 3:10 pm**

2-hour Workshop *Level: Intermediate*

**Title: Employee Health Journal Club: How to Read Recent Research and Incorporate it into Practice**

**Presenters: Lee S Newman, MD MA FCCP FACOEM, Kenneth Scott, MPH and Liliana Tenney, MPH**

**Topic Overview:** To stay abreast of developments in the field of employee health and safety, it is necessary to be able to read and analyze the content of recently published research papers. In addition, to bring this information from research into practical application, it is important to develop skill in identifying whether the content of a research paper is relevant and generalizable to the real world practice of occupational health. This session will present a standard, shorthand approach to reading and analyzing research papers and finding the "nuggets" of useful information in them. The presenters will select recently published papers that are important for people in employee health to be aware of, and they will use those journal articles to demonstrate the principles that make a research study useful in practice.

**Objectives:**

1. Develop a systematic approach to reading journal articles on employee health topics.
2. Recognize key elements of a well-written and well-conducted research study in occupational health.
3. Determine if a particular research study is relevant and applicable to employee health practice.
4. Understand the relevance of recently published research papers to practice.

**Presenter Bios:**



**Dr Lee Newman** is a Professor in the Department of Environmental and Occupational Health, Colorado School of Public Health and in the School of Medicine, University of Colorado. He has more than 20 years of experience in occupational health and safety research, teaching and clinical practice. He is the Founding Director of the NIOSH-funded Mountain and Plains Education and Research Center, and Founder/CEO of Axion Health.

**Kenneth Scott** received his Master’s of Public Health Degree from the University of Washington and is a Senior Professional Research Assistant in the Department of Environmental and Occupational Health at the Colorado School of Public Health. Scott is the Outreach Director of the Mountain and Plains Education and Research Center. He conducts research on the aging workforce and is completing his PhD in Epidemiology at the Colorado School of Public Health.



**Liliana Tenney** received her Master’s of Public Health Degree from the Colorado School of Public Health, University of Colorado campus, and is a Professional Research Assistant in the Department of Environmental and Occupational Health at the Colorado School of Public Health. Tenney is the Assistant Director for Continuing Education for the NIOSH-funded Mountain and Plains Education and Research Center. Her research interests include workplace wellness programs and their relationship to workplace injuries and workers’ compensation claims.

**W010**

**Wednesday, October 3, 2012 3:20 pm - 5:20 pm**

2-hour Workshop *Level: Intermediate*

**Title: Analysis of a Successful Risk Reduction Program – Do They Really Work?**

**Presenter: Barb Maxwell, MHA RN COHN-S CCM CWCP QRP FAAOHN**



**Topic Overview:** Are your workers’ compensation injury costs going through the roof? Many organizations have felt an increase in their employee workers’ compensation injury costs in the last few years that has affected their financial bottom lines. Organizations are looking to be proactive by implementing aggressive prevention programs to decrease their workers’ compensation costs while increasing employee morale. Participants in this class will be given tips on what a risk reduction program is comprised of and how to implement it in the workplace.

**Objectives:**

1. Discuss how an effective Employee Safety Committee can serve a vital role in increasing safety within an organization.
2. Identify “key players” within an Employee Safety Committee and their functions.
3. Discuss active and passive Employee Safety Committee tasks in improving an organization’s culture of safety.
4. Summarize an integrated Risk Reduction Program model to enhance health and safety.
5. Identify three components of an effective Risk Reduction Program.

**Presenter Bio:**

**Barb Maxwell** established a hospital-based occupational health program in 1986 known as Company Care for HCA. Her current responsibilities include management of operations for 10 Company Care Occupational Health Programs and 16 Employee Health Departments for the HCA West Florida Division. She is Past President of FSAOHN, Inc. and currently serves as the Chair of FOHC and Treasurer for FWCAOHN. She is a fellow through AAOHN. Maxwell received her RN from St. Luke's Hospital School of Nursing, Kansas City, MO, and her BS and Master's in Health Administration from the University of St. Francis, Joliet, IL. She is a contributing author for Dr Nancy Menzel's book *Workers' Comp Management from A to Z*.

**A001**

**Thursday, October 4, 2012 8:15 am - 9:15 am**

**Keynote** Level: *Intermediate*

**Title: Workforce Health and the Healthcare Industry**

**Presenter: John Howard, MD MPH JD LLM**



**Topic Overview:** This presentation will include a discussion of current issues in occupational safety and health. The keynote speaker will highlight challenges facing today's occupational health professionals in healthcare due to the evolving 21st Century American workforce. He will also review the value of promoting occupational safety and health protection, as well as the discovery of imminent changes in health insurance coming in 2014 and how those changes may impact healthcare providers and patients.

**Objectives:**

1. Examine the evolving healthcare workforce.
2. Evaluate challenges that face occupational health professionals as America's workforce changes.
3. Illustrate how upcoming health insurance changes will impact occupational health.
4. Translate the value of integrating occupational safety and health protection with worker health promotion.

**Presenter Bio:**

**John Howard** is the Director of the National Institute for Occupational Safety and Health (NIOSH) in the US Department of Health and Human Services. He also serves as Administrator of the World Trade Center Health Program. Howard first served as NIOSH Director from 2002 - 2008. In 2008 and 2009, he worked as a consultant with the US Government's Afghanistan Health Initiative in the US Department of Health and Human Services. Prior to his appointment as Director of NIOSH in 2002, he served as Chief of the Division of Occupational Safety and Health in the California Labor and Workforce Development Agency from 1991 - 2002. Howard received a Doctor of Medicine degree from Loyola University of Chicago, a Master's of Public Health Degree from the Harvard School of Public Health, a Doctor of Law from the University of California at Los Angeles, and a Master of Law in Administrative Law and Economic Regulation from the George Washington University in Washington, DC. He is board certified in internal medicine and occupational medicine. Howard is admitted to the practice of medicine and law in the State of California and in the District of Columbia, and he is a member of the US Supreme Court bar. He has written numerous articles on occupational health law and policy.

## A002

Thursday, October 4, 2012 9:45 am - 10:45 am

General Session *Level: Intermediate*

### **Title: Changing Epidemiology and New Treatment Regimens for Latent TB Infection**

**Presenter: Nicholas Walter, MD MS**



**Topic Overview:** Tuberculosis (TB) rates in the United States have fallen to historic lows, with 10,521 new cases reported in 2011. Declining TB rates affect US healthcare worker TB risk. New cases are increasingly found among foreign-born persons who now have a rate 12 times greater than US-born persons. Novel regimens such as weekly isoniazid/rifapentine provide new options for treatment of latent TB infection.

#### **Objectives:**

1. Understand recent trends in the epidemiology of tuberculosis in the United States and globally.
2. Recognize the implications of these changes for healthcare worker tuberculosis risk.
3. Review the range of regimens available for treatment of latent tuberculosis infection.

#### **Presenter Bio:**

**Dr Nicholas Walter** is Assistant Professor in Pulmonary Sciences and Critical Care Medicine at the University of Colorado Denver. He cares for patients in the Denver Metro Tuberculosis Clinic as well as in intensive care at the University of Colorado. His research focuses on the application of genomic assays for epidemiologic purposes in tuberculosis. He and collaborators are identifying markers for disease state through analysis of both human host and *M tuberculosis* transcriptomes.

Walter obtained his Bachelor of Arts at Middlebury College and a Master of Health and Medical Sciences in Medical Anthropology at the University of California Berkeley. He earned his MD at the University of California San Francisco and completed internship, residency and chief medical residency at San Francisco General Hospital. Walter served as an Epidemic Intelligence Service Officer in the Respiratory Diseases Branch at the US Centers for Disease Control and Prevention before completing a pulmonary fellowship at the University of Colorado. He is a PhD student in Epidemiology, focusing on the application of high throughput biologic assays for epidemiologic purposes.

## A003

Thursday, October 4, 2012 10:50 am - 11:50 am

General Session *Level: Intermediate*

### **Title: Healthcare Industry Obligations Under the Revised OSHA Hazard Communication Standard**

**Presenter: Joy Flack, CIH**

**Topic Overview:** Major revision to the OSHA Hazard Communication Rule was published in the Federal Register on March 20, 2012. The Hazard Communication Standard (HCS) is now aligned with the Globally Harmonized System of Classification and Labeling of Chemicals (GHS.) This update to the HCS will provide a common and coherent approach to classifying chemicals and communicating hazard information on labels and safety data sheets.

Once implemented, the revised standard will improve the quality and consistency of hazard information in the workplace, making it safer for workers by providing easily understandable information on appropriate handling and safe use of hazardous chemicals. Employers, including those in the healthcare industry, are required to train workers by December 1, 2013 on the new labels elements and safety data sheets format to facilitate recognition and understanding.

**Objectives:**

1. Learn the four basic requirements of the Hazard Communication regulation.
2. Employ training to staff on the new labeling and safety data sheet format for chemicals in their work areas.
3. Apply updates to the written hazard communication program at the workplace.

**Presenter Bio:**

**Joy Flack** is the Area Director for the Department of Labor, OSHA in Las Vegas, NV. She has a BA in Environmental Health, an MBA in Business Administration and is a Certified Industrial Hygienist (CIH.) She has also worked with the Department of Energy's Hanford Nuclear Clean-Up site and the Oregon state OSHA program. Flack has more than 28 years experience in the safety and health of workers.

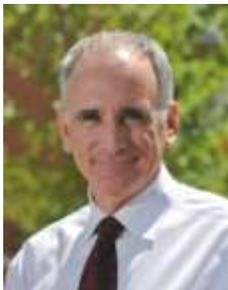
**A004**

**Thursday, October 4, 2012 1:15 pm - 2:15 pm**

General Session *Level: Intermediate*

**Title: Hazardous Chemicals in Healthcare: Challenges We Face in Designing Medical Surveillance Programs**

**Presenter: Lee S Newman, MD MA FCCP FACOEM**



**Topic Overview:** There is increasing recognition that chemicals used in healthcare can pose risks for healthcare workers. From sterilizing agents like glutaraldehyde to antineoplastic drugs, safe handling practices reduce, but do not eliminate, risk for hospital workers. Medical surveillance programs are considered the "safety net," a means of either identifying whether a hazardous chemical has entered the body (biological exposure) or has caused harm to the employee. The CDC and others have recommended that employee health departments institute medical surveillance programs for hazardous drugs, raising some significant challenges. These range from the challenge of knowing:

who should be in the program; what they should be told about the uncertain risks for reproductive health, cancer and other illnesses; what tests and questions should be asked; how surveillance should be conducted; and how to analyze the information that is collected. These and other practical questions will be examined in this lecture.

**Objectives:**

1. Recognize the scope of the problem of hazardous chemical exposures in healthcare.
2. Learn the major goals of a medical surveillance program in the context of the "hierarchy of prevention."
3. Understand the key elements for the creation of a successful medical surveillance program.
4. Identify the pitfalls and limitations of medical surveillance for hazardous chemicals.
5. Develop practical solutions to address the challenges of designing and executing such programs.

**Presenter Bio:**

**Dr Lee Newman** is a Professor in the Department of Environmental and Occupational Health, Colorado School of Public Health and in the School of Medicine, University of Colorado. He has more than 20 years of

experience in occupational health and safety research, teaching and clinical practice, including the design and management of medical surveillance programs for workplace hazards. He is the Founding Director of the NIOSH-funded Mountain and Plains Education and Research Center, and Founder/CEO of Axion Health, Inc.

## **A005**

**Thursday, October 4, 2012 2:20 pm - 3:20 pm**

General Session *Level: Intermediate*

### **Title: Mandatory Reporting of Healthcare Personnel Influenza Vaccination Using the National Healthcare Safety Network (NHSN): A New Occupational Health and Quality Measure**

**Presenter: Megan C Lindley, MPH**



**Topic Overview:** Beginning in January 2013, the Centers for Medicare and Medicaid Services' Hospital Inpatient Quality Reporting Program will require reporting of aggregate influenza vaccination among healthcare personnel (HCP) using a standardized measure endorsed by the National Quality Forum. Hospitals will report data via the National Healthcare Safety Network (NHSN) system, which will incorporate the new aggregate vaccination measure by August 2012. This session will include an overview of definitions and reporting protocols for the new measure, a preview of the NHSN module, and practical examples for applying definitions drawn from real-life queries from healthcare facilities. The use of this standardized measure in hospitals and other healthcare facilities

will inform quality improvement efforts and will facilitate comparison of estimates of HCP influenza vaccination among healthcare facilities nationally.

#### **Objectives:**

1. Define the three groups of healthcare personnel covered by this quality measure.
2. Classify the vaccination status of healthcare personnel according to measure specifications.
3. Recognize the most common questions and answers related to implementation of the vaccination measure.

#### **Presenter Bio:**

**Megan C Lindley** graduated Yale University School of Public Health in 2004 with an MPH in Health Policy and Administration. Since 2004, she has worked as an Epidemiologist in the National Center for Immunization and Respiratory Diseases of the Centers for Disease Control and Prevention. Her areas of research interest include racial/ethnic disparities in adult immunization, vaccine financing issues and healthcare personnel vaccination. Most recently, Lindley served as the lead for a 300-facility pilot test to determine feasibility, utility and barriers to implementation for a standardized measure of healthcare personnel influenza vaccination coverage. Her research has been published in the American Journal of Public Health, Annals of Internal Medicine, Pediatrics, the American Journal of Preventive Medicine, and Infection Control and Hospital Epidemiology, among others.

## **A006**

**Thursday, October 4, 2012 3:25 pm - 4:25 pm**

General Session *Level: Basic*

### **Title: Respiratory Protection- How to Best Protect Yourself from Workplace Exposures**

**Presenter: Debra A Novak, DSN RN**



**Topic Overview:** There have been several recent reports of healthcare workers' (HCWs) inconsistent and suboptimal adherence, less than 60 percent, to recommended infection control precautions. Most recently, the lack of adherence to the proper use of infection control precautions including respiratory personal protective equipment was documented during the H1N1 outbreak. Both the Occupational Safety and Health Administration (OSHA) and the Centers for Disease Control and Prevention/Healthcare Infection Control Practices Advisory Committee ( CDC/HICPAC) stated that, based on the evidence, there appears to be marginal compliance by HCWs with respiratory protection guidelines and that day-to-day compliance is left to the individual employee and employer. In addition, OSHA warns that, given the emergence of new infectious diseases that affect both patients and HCWs, compliance with recommended infection control practices is an increasingly important issue.

**Objectives:**

1. Review National Institute for Occupational Safety and Health and National Personal Protective Technology Laboratory healthcare-related workplace safety and research efforts.
2. Understand recent clinical events and related research findings evidencing respiratory protective equipment compliance breaches.
3. Identify suggested strategies to provide protection from workplace exposures.

**Presenter Bio:**

**Debra A Novak** holds a Doctorate of Science in Nursing from The University of Alabama-Birmingham and has held a variety of clinical, research and faculty positions for more than 30 years. Novak is currently a Senior Service Fellow with the National Personal Protective Technology Laboratory (NPPTL) which is part of the National Institute for Occupational Safety and Health (NIOSH) and CDC. She is responsible for translating personal protective equipment (PPE) research findings to clinical workplaces and thereby promoting safer healthcare worker practices.

**A007**

**Thursday, October 4, 2012 4:30 pm - 5:30 pm**

General Session *Level: Intermediate*

**Title: Filling the Glass: Real World Tactics and Motivation for Improving Communication, Increasing Productivity AND Job Satisfaction**

**Presenter: Barry Maher**



**Topic Overview:** In this high-energy, humor-rich presentation, Barry Maher offers the antidote to presentations that are simply “let’s all think happy thoughts and everything will be wonderful” fluff. His presentation is chock full of nuts and bolts content and straight-talk tactics health professionals in healthcare can apply immediately. Yet, it’s also real-world motivational – even inspirational. This session is perfect for the most cynical veteran health professional AND the most starry-eyed (or the most discouraged) novice.

**Objectives:**

1. Learn simple, powerful yet often neglected communication strategies.
2. Explore the power of incentives, some of which might not seem like incentives.
3. Discuss how to turn negatives into selling points; even bragging points.

**Presenter Bio:**

**Barry Maher** is in demand for business and professional audiences of all types. And, whether as a speaker or a consultant, he's hired to get results: to improve productivity and attitude and ultimately, the bottom line. His clients include innumerable trade and professional associations as well as organizations like ABC, the American Management Association, AT&T, Blue Cross, Canon, Cessna, Colgate-Palmolive, Fuji, Hewlett-Packard, Humana Healthcare, IBM, Infiniti, Johnson & Johnson, Managed Health Care Associates, Merck, the National Lottery of Ireland, Nestlé, Seasons Hospice Care, TIME/Warner, the US Army, Verizon and Wells Fargo. Maher's books include *Filling the Glass*, which has been honored as "[one of] The Seven Essential Popular Business Books." He has appeared on the Today Show, NBC Nightly News and CNBC, and he's frequently featured in publications that range from *USA Today*, *The New York Times* and *The Wall Street Journal* to—what he insists is his personal favorite—*Funeral Services Insider*.

**B001**

**Friday, October 5, 2012 8:00 am - 9:00 am**

General Session *Level: Intermediate*

**Title: Where is the Research Heading to Improve Employee Health in the Healthcare Sector?**

**Presenter: Yvonne Boudreau, MD MSPH**

**Topic Overview:** The National Institute for Occupational Safety and Health (NIOSH) has a specific mission to decrease occupational diseases, injuries and fatalities in healthcare workers through a focused program of research and prevention. This presentation will provide an overview of NIOSH and the National Occupational Research Agenda (NORA,) specifically as it pertains to addressing the safety and health of healthcare employees. It will include a discussion of the current high priority issues that are being addressed for healthcare workers, including musculoskeletal disorders, long hours, changing shifts, lifting and repetitive tasks, violence, stress, sharps injuries and exposures to infectious diseases and hazardous chemicals.

**Objectives:**

1. Assess the work of the National Institute for Occupational Safety and Health.
2. Understand the National Occupational Research Agenda program.
3. Recognize the magnitude of occupational injuries and illnesses in healthcare workers.
4. Identify the highest priority occupational safety and health hazards for healthcare workers.
5. Examine research that is being undertaken to help decrease occupational safety and health hazards to healthcare workers.

**Presenter Bio:**

**Dr Yvonne Boudreau** is the Deputy Director of the Centers for Disease Control and Prevention (CDC,) National Institute for Occupational Safety and Health (NIOSH,) Western States Office. She also holds a position as Assistant Clinical Professor in the Department of Occupational and Environmental Medicine in the School of Public Health at the University of Colorado Denver. She received her BA from New Mexico State University and her Doctor of Medicine from the University of Arkansas for Medical Sciences. She completed a residency in Preventive Medicine and a Master's of Science in Public Health at the University of Colorado Health Sciences Center. Subsequently, she completed a CDC fellowship in Epidemiology and board certification in Preventive Medicine. Her work involves: national and international surveillance and evaluation of a wide variety of occupational health issues (e.g., TB, HIV, hepatitis, emergency response;) providing recommendations and policies to address these issues; and outreach to and collaboration with state and local health departments, academic institutions and other federal agencies to help build occupational safety and health capacity throughout the United States.

## **B002**

**Friday, October 5, 2012 9:05 am - 10:05 am**

General Session *Level: Advanced*

### **Title: A Measured Response: Action Plans for Identifying and Supporting the Chemically-Impaired Employee**

**Presenter: Link Christin, MA JD LADC**



**Topic Overview:** A chemically-impaired employee is often especially adept at concealing his or her disease in the workplace. This presentation will provide tangible tools and strategies for employees or co-workers to recognize and address this frequently overlooked or ignored problem. The session will further provide a plan on how to approach and support such employees to encourage treatment and foster recovery from the disease. Participants will develop an enhanced ability to recognize the chemically-impaired employee and to access support for addressing the issue while ensuring safety in the workplace.

#### **Objectives:**

1. Describe the disease of addiction and its progression.
2. Analyze specific workplace behaviors and conduct which indicate chemical abuse or dependence.
3. Illustrate a strategy for approaching the impaired employee.

#### **Presenter Bio:**

**Link Christin** is Director of Hazelden's Legal Professionals Program in Center City, MN. This residential addiction treatment program incorporates integrated clinical disciplines with individualized planning and care – all in a comfortable, healing and supportive environment. The program addresses the addiction problems unique to legal professionals. Before entering the field of addiction treatment, Christin had a deep history in the legal profession. After earning his JD from the University of Pittsburgh School of Law in 1979, he was a civil trial lawyer for more than 25 years and partner in two law firms in Pittsburgh, PA. In 2004, he transitioned into the field of creating and marketing continuing legal education with both Virginia and Minnesota Continuing Legal Education, including serving as the Administrator for the National College of Trial Advocacy at the University of Virginia School of Law. During this time, he served as a volunteer to counsel lawyers and judges for the Virginia and Minnesota Lawyers Assistance programs, which led to his decision to launch a second career in the field of addiction.

Christin completed his Master's in Addiction Counseling at the Hazelden Graduate School of Addiction Studies in August 2010 and subsequently received his LADC license. He was appointed Director of a new Hazelden Legal Professionals Program in September 2010, and the most extensive specialty track for lawyers at a major treatment center was officially launched in January 2011. Christin also serves as an adjunct faculty member at William Mitchell College of Law in St. Paul, MN.

## **B003**

**Friday, October 5, 2012 10:45 am - 11:45 am**

Breakout Session *Level: Intermediate*

### **Title: "Who Ya Gonna Call"...Sharps Hotline**

**Presenters: Barbara Brehm, RN and James Fenush Jr, MS RN**

**Topic Overview:** This presentation focuses on an Occupational Medicine Inventory conducted at a 491-bed Academic Medical Center in central Pennsylvania to comply with federal and state regulations. One of the

areas reviewed was the Bloodborne Pathogens Sharps Injury Program. The organizational plan for Bloodborne Pathogens Exposure Control was compliant with OSHA standards and hospital policies; however, the process had operational gaps, including lack of centralized reporting and collection methods for sharps injury or blood/body fluid splashes. A literature review was conducted to determine evidence based practice and to inquire about best practices both regionally and nationally. Analysis revealed a poorly designed process for reporting, post exposure care and follow-up. An interdisciplinary team was formed to create and implement a Sharps Injury Hotline within the Institution. Participants will learn how a new Sharps Injury Hotline and sharps injury and body fluid splashes reporting process provides clear and immediate guidance to employees who sustain a sharps injury or blood/body fluid splash. The Sharps Injury Hotline provides the victim with a single contact to initiate the process of reporting, treatment, medical consultation and post exposure follow-up care. This 24/7 process has successfully enhanced and continues to promote the culture of safety within the institution.

#### Objectives:

1. Review Occupational Safety and Health Administration and Centers for Disease Control and Prevention Bloodborne Pathogens Standards related to sharps injury prevention.
2. Describe the advantages of implementing a centralized 24-hour Sharps Injury Hotline in an academic medical center.
3. Identify strategies for implementing and sustaining a Sharps Injury Hotline.
4. Describe the project plan and tools used for the successful implementation of a Sharps Injury Hotline.

#### Presenter Bios:



**Barbara Brehm** is a staff nurse in the Employee Health Department at the Penn State Milton S Hershey Medical Center, a 491-bed academic medical center in central Pennsylvania. The medical center campus also includes Penn State College of Medicine (Penn State University's medical school,) Penn State Hershey Cancer Institute, and Penn State Hershey Children's Hospital—the region's only children's hospital. The organization is ANCC Magnet designated. Brehm graduated from Lancaster General Hospital School of Nursing in May 1976 and first worked as a medical-surgical staff nurse at a small community hospital. She then worked at the Penn State Hershey Medical Center in the Surgical Intensive Care Unit. In 1985, Brehm moved to Philadelphia, PA, where she

worked as a Nurse Manager for the American Red Cross Donor Service until 1992. At that time, she returned to the medical center as a direct care staff nurse in the Surgical Intensive Care Unit. In 1998, she transferred to the Post Anesthesia Care Unit until she began her current role as Employee Health Nurse in 2000.

Brehm actively participates in numerous committees within the system, including Safety and Infection Control. It was during her tenure as Co-Chair of the Sharps Injury Prevention Task Force that she began to work on a team that created the Sharps Injury Hotline. Her focus frequently revolves around sharps injuries/sharps prevention, and she is directly responsible for maintaining and reporting sharps data. Improving the culture of employee/patient safety is paramount in her role as Employee Health Nurse.



**James Fenush** is Director of Nursing, Clinical Support Services at the Penn State Milton S Hershey Medical Center, a 491-bed academic medical center in central Pennsylvania. The medical center campus also includes Penn State College of Medicine (Penn State University's medical school,) Penn State Hershey Cancer Institute, and Penn State Hershey Children's Hospital—the region's only children's hospital. The organization is ANCC Magnet designated.

Prior to his current nursing leadership position, Fenush spent 12 years in various nursing leadership and clinical roles within the organization, including Interim Director of Nursing Care Coordination, Assistant Director of Nursing for the Medicine Division, Nurse Manager

of a post acute care surgical unit, and Emergency Department Nurse Manager. He was a direct care staff nurse in Surgical Intensive Care for six years. He has shared leadership responsibility for several operational projects, including Project BOOST (the Society of Medicine's initiative of Better Outcomes for Older Adults through Safe Transitions,) the Nursing Department's Strategic Bed Realignment Plan, Capacity Management-Support Services project, and nursing consultant for the Cancer Institute's redesign for outpatient infusion services. His tenure at Penn State Hershey Medical Center has afforded Fenush numerous opportunities: to mentor and coach nurse managers as well as direct care nurses; to promote active participation in nursing's shared governance model; and to lead and develop others through teamwork. He received his BS in Nursing (1994) and an MS in Nursing (2006) with an administration focus from the Pennsylvania State University, and he serves as an Adjunct Instructor for the Penn State School of Nursing.

## **B004**

**Friday, October 5, 2012 10:45 am - 11:45 am**

Breakout Session *Level: Basic*



### **Title: Proven Practices to Improve Your Teaching and Influence Behavior Change in the Workplace**

**Presenter: Suzette Bramwell, DNP RN COHN-S**

**Topic Overview:** Occupational health nurses (OHNs) are educating employees daily, from board rooms to staff meetings, in offices and hallways. Healthcare teams have various education levels and learning styles. Occupational health teaching can become more effective when targeted to the individuals' needs. This presentation will provide an overview of adult learning principles, examples from practice and everyday teaching

tips.

OHNs have a unique opportunity to influence behavior change at both individual and organizational levels. Using influenza immunization programs as the example, this presentation will take an in-depth look at the Health Belief Model and how it can be used to target educational programs for all employees and healthcare organizations.

#### **Objectives:**

1. Discuss principles of adult learning.
2. Demonstrate how occupational health nurses can use the Health Belief Model to influence behavior change.
3. Identify practical teaching strategies for occupational health nurses.

#### **Presenter Bio:**

**Suzette Bramwell** joined the Brigham Young University nursing faculty in the fall of 2011. Prior to this position, she worked in healthcare-based occupational health nursing roles at Seattle Children's Hospital and Intermountain Healthcare. Bramwell recently finished her Doctorate of Nursing Practice (DNP) from the University of Utah. She combined her passion for education and occupational health programs in her doctoral work by using the Health Belief Model to focus on the attitudes and beliefs of healthcare workers surrounding mandatory influenza programs and organizational decision making.

## **B005**

**Friday, October 5, 2012 10:45 am - 11:45 am**

Breakout Session *Level: Intermediate*

## **Title: Managing Potential Violence in the Workplace**

**Presenters: Dean Steiner, LCPC and Marianne Dungan, RNBC**

**Topic Overview:** With increased attention being given to workplace violence, many healthcare settings are examining ways to improve and promote a safer work environment. In this session, attendees will gain an understanding of the scope of violence in hospital settings and the effects of such violence. Factors that place an individual at risk to commit a violent act at work and warning signs of potential violence will also be examined. Participants will learn practical ways to minimize workplace violence, including components of staff education and a debriefing process that one hospital established to reduce staff injuries resulting from aggressive patients.

### **Objectives:**

1. Understand the definition and identify the effects of workplace violence.
2. Discuss the risk factors for workplace violence.
3. Recognize possible warning signs/triggers for workplace violence.
4. Demonstrate some basic "do's and don'ts" for managing workplace violence.
5. Analyze debriefing process benefits in managing workplace violence.

### **Presenter Bios:**

**Marianne Dungan** is the Clinical Education Specialist assigned to Behavioral Health through Methodist's Center for Innovation and Clinical Advancement. She is a Certified Psychiatric Nurse with more than 20 years experience. She is a Master Level Associate with the IANCI with 15 years of experience in the science of aggression management and de-escalation.

Dean Steiner is the Director of Behavioral Health Services at Methodist Medical Center of Illinois. He oversees the operational and clinical components of the hospital's 67 inpatient beds, outpatient services and Behavioral Health Intake Center located in Methodist's Emergency Department. He is a Licensed Clinical Professional Counselor (LCPC) with more than 20 years of clinical experience. He is a member of the hospital's Patient Safety Council, Quality and Safety Council, and Security Safety Team.

## **B006**

**Friday, October 5, 2012 10:45 am - 11:45 am**

Breakout Session *Level: Intermediate*

## **Title: NIOSH Update on Development of the Occupational Health Safety Network**

**Presenters: Ahmed Gooma, MD ScD MSPH, Sara Luckhaupt, MD MPH and Susan Sprigg, BSN RN**

**Topic Overview:** With input from AOHP and other stakeholders, the National Institute for Occupational Safety and Health (NIOSH) has developed a new electronic surveillance system called the Occupational Health Safety Network (OHSN.) The goal of OHSN is to create a "common language" for occupational health and safety tracking to facilitate benchmarking and data analysis across an entire industry. The first phase of OHSN focuses on the healthcare sector. Other industry sectors may be addressed in the future. This OHSN healthcare sector module focuses on three common events that can lead to injuries or musculoskeletal disorders among healthcare personnel (HCP): injury due to patient handling and working in awkward postures (overexertion/bodily reaction injuries;) slips, trips and falls; and workplace violence. This system complements the Healthcare Personnel Safety (HPS) Component of the National Healthcare Safety Network (NHSN,) which focuses on infectious disease-related adverse events (i.e., bloodborne pathogen exposures and influenza) among HCP. Interactions with stakeholders identified that most healthcare facilities already use internal HCP

safety data collection systems to meet Occupational Safety and Health Administration (OSHA) recordkeeping requirements, but these systems are not currently meeting their needs to benchmark and integrate relevant resources to improve healthcare workers' occupational health. NIOSH has created confidential data transfer mechanisms to minimize facility effort when using OHSN and is working with major vendors to adapt their software so files containing OHSN data can be directly exported. This presentation will explain how facilities can enroll and prepare to use the system starting in December 2012.

**Objectives:**

1. Review the first module of the Occupational Health Safety Network..
2. Describe the specific health outcomes that will be tracked with this module.
3. Explain how healthcare facilities can enroll and prepare to begin using the system.

**Presenter Bios:**



**Dr Ahmed Gomaa** started his career as an orthopedic surgeon, treating occupational injuries for five years in Alexandria, Egypt before joining Tulane University to study occupational and environmental epidemiology. He completed his internal medicine training at the University of South Alabama and occupational medicine training at Harvard. Gomaa is a practicing physician and is board certified by the American Board of Preventive Medicine in Occupational Medicine. During his career at the CDC, he has worked in many environmental and occupational medicine activities, including the prevention of occupational injuries and illness in healthcare sector.

**Dr Sara Luckhaupt** joined the Surveillance Branch/ Division of Surveillance, Hazard Evaluations, and Field Studies/National Institute for Occupational Safety and Health/Centers for Disease Control and Prevention in July 2006 as an Epidemic Intelligence Service (EIS) Officer in the US Public Health Service Commissioned Corps. She received a medical degree from the Ohio State University in 2002, and completed a preventive medicine residency with a Master's Degree in Public Health at the University of Michigan in 2006. Her current duties include serving as the project officer for an occupational health supplement to the 2010 National Health Interview Survey and a project to improve the collection of industry and occupation data by cancer registries, serving as co-project officer for a project to enhance occupational health surveillance among healthcare workers, and assisting with a project to code and analyze industry and occupation data in the California Cancer Registry.



**Susan Sprigg** has worked for more than 15 years in a variety of healthcare fields, including maternal-child health, pediatrics and research. Since 2010, she has worked as a contractor with CDC/NIOSH as a public health analyst, currently working with the Surveillance Branch/Division of Surveillance, Hazard Evaluations, and Field Studies on the Occupational Health Safety Network (OHSN.) She will receive her MPH from the University of Cincinnati in 2013.

**B007**

**Friday, October 5, 2012 10:45 am - 11:45 am**

Breakout Session *Level: Intermediate*

**Title: Instituting Ceiling Lifts for Safe Patient Handling--"Winning Over the Crowd"**

**Presenter: Laura Wisa, CEASIII**



**Topic Overview:** Knowing that ceiling lifts are considered the “gold standard” of safe patient handling equipment does not necessarily mean that hospitals will embrace the technology. A large healthcare organization’s journey will be presented and will illustrate the planning, processes and metrics used to “win over the crowd.” Specific strategies, such as the use of NIOSH research, enacted state legislation, the work of recognized safe patient handling experts and clear goals, will be discussed. Strategies were aimed at senior leadership, nursing supervisors, ancillary departments and front-line healthcare workers. The use of workers’ compensation and employee injury data to show return on investment will be shared. Challenges and lessons learned will be identified.

**Objectives:**

1. Describe the methods used to gain internal support for instituting ceiling lifts.
2. List the metrics used to show return on investment for instituting ceiling lifts.
3. Review challenges and lessons learned from the process.

**Presenter Bio:**

**Laura Wisa** works as an Ergonomic Specialist at BJC HealthCare. Her work is to improve employee health by *fitting the work to the worker*, and she provides supports to three hospitals, two long term care units and other BJC offices in the northern region. Her work is accomplished through equipment, environment, tasks and personnel. These components are used to: evaluate, design and control work spaces and processes; alleviate physical stress and reduce potential injury; and improve comfort. She is also a member of the Council of Occupational Health Professionals and is a Certified Ergonomic Specialist Level III.

**B008**

**Friday, October 5, 2012 2:00 pm - 3:00 pm**

Breakout Session *Level: Intermediate*

**Title: Reducing Needlestick Injuries and the Cost of Workers’ Compensation: The Sinai Story**

**Presenter: Jan Lepinski, MSN RN CIC**

**Topic Overview:** There are 384,000 needlesticks to healthcare workers in the United States each year, carrying the risk of HIV, hepatitis and other serious diseases. The cost of treatment is \$3,000 per needlestick, even without disease transmission cost, and the cost to hospitals is \$258 million per year. Much effort has focused on reducing needlesticks in the operating room, but little has been done outside the operating room. Studies have found that the most frequent cause of needlestick is from suturing now that sharps containers are in wide use. Suturing is commonly performed in emergency departments, clinics, and on medical and surgical floors. To reduce the incidence of needlestick injuries, the Sinai Health System has initiated a three pronged approach: a program to remove straight needles from all surgical procedure trays; a video education program on suture safety for attending physicians, residents and students; and a focused review and remediation of all needlesticks. The presentation will discuss the incidence and causes of needlestick injuries, means to reduce the incidence and one institution’s struggle to reduce needlestick injuries.

**Objectives:**

1. Report the incidence of needlestick injuries.
2. Describe techniques to reduce needlestick injuries.
3. Review one institution’s challenge to reduce needlesticks.

**Presenter Bio:**

**Jan Lepinski** is the Director of the Infection Prevention and Control Department at Sinai Health System in Chicago, Illinois. She received her BSN from The Ohio State University and worked as a critical care nurse in the U.S. Army for 14 years, and in civilian nursing for another six years before entering the field of Infection Prevention and Control. She has practiced in that field for the last 19 years, and also held positions as an Occupational Health Nurse and Workman's Compensation Coordinator for five of those years. She returned to school after 31 years, and was awarded her MSN from Loyola University in Chicago with a specialty in Population Based Infection Control and Environmental Safety. She continues to serve Loyola as a clinical preceptor in the program. Lepinski is a member of APIC, INS, SHEA, and the American Society for Professionals in Patient Safety. She co-chairs the Sharps Safety Committee at Sinai Health System.

**B009**

**Friday, October 5, 2012 2:00 pm - 3:00 pm**

Breakout Session *Level: Intermediate*

**Title: Identifying the Need, Implementing and Sustaining a Safe Patient Handling Program**

**Presenter: Mary Bliss, RN COHN**



**Topic Overview:** With several states incorporating laws regarding safe patient handling, it is more important than ever for facilities to take a serious look at how to incorporate and sustain a safe patient handling program. This enthusiastic and energizing session will take an in-depth look at how one facility identified the need for a safe patient handling program, devised methods for implementation, and made the journey to success, knowing that "it is not just about the equipment, it is about the program!" This presentation will also show how the facility met its goals for a successful program, showed a return on investment and is maintaining momentum for continued success. Attendees will gain the strategies, knowledge base and enthusiasm needed to implement successful safe patient handling

programs at their facilities.

**Objectives:**

1. Identify the need for a safe patient handling program.
2. Explain how to implement the process for a safe patient handling program.
3. Discuss successful outcomes of a safe patient handling program.
4. Review sustaining the momentum for continued success of the safe patient handling program.

**Presenter Bio:**

**Mary Bliss** is a Certified Occupational Health Nurse. She has been employed at Methodist Medical Center in Peoria, IL since October 1987. Methodist is a central Illinois hospital with approximately 3,000 employees, including staff at 52 off-site facilities throughout central Illinois. As Coordinator, she oversees the operations of Employee Health Services at Methodist, ensuring that all new hires meet the requirements of local, state and federal governing agencies. She also manages the workers' compensation program for the hospital and the 52 off-site locations. She has been a member of AOHP for approximately 15 years and has held the offices of Vice President and President for the Illinois based chapter. She currently serves on the National Board of Directors of AOHP as Region 3 Director. Her experience with AOHP, and the knowledge gained through attending several AOHP Annual National Conferences, has enabled her to initiate and sustain a successful safe patient handling program at her facility. Due to the success of this program, she has presented at several conferences, including: three safe patient handling conferences in Illinois; the AOHP chapter meetings in Illinois and Indiana; Magnet Consortium; Safe Patient/Resident/Client Handling Conference at the Northern Illinois University in Naperville, IL; Safe Lifting and Moving in Health Care: Focus on Injury Prevention,

Continuing Education Institute of Illinois through the University of Illinois; and the 2011 AOHP Annual National Conference.

## **B010**

**Friday, October 5, 2012 2:00 pm - 3:00 pm**

Breakout Session *Level: Intermediate*

### **Title: Strategies to Designing Age-Friendly Health Care Environments**

**Presenter: Ken Scott, MPH**

**Topic Overview:** Despite widespread awareness that the healthcare workforce is “aging” along with the US population as a whole, few employers are taking proactive steps to prepare for the demographic changes underway. Healthcare organizations should consider how they can adapt their work environments and wellness programs to support an “age-diverse” workforce.

This presentation will include a description of what it means for a population to age, highlighting compelling demographic changes that will have broad implications for the healthcare sector and the country as a whole. Attendees will learn practical “age-friendly” strategies that healthcare organizations can consider adopting to anticipate changes. The suggested strategies will be particularly beneficial for older healthcare workers, but also have the potential to benefit all healthcare workers. After all, everyone is aging from the moment they are born.

Organizations that plan ahead for these significant demographic changes have the potential to thrive. With some additional steps to ensure their health, safety and productivity, older workers can contribute significantly to their organizations by offering the skills and experience they have been developing throughout their careers.

#### **Objectives:**

1. Describe what it means for a population to age.
2. Explain why it will be important to design age-friendly healthcare organizations.
3. Discuss a variety of work environment and wellness strategies to ensure the health, safety and productivity of all workers – regardless of age.

#### **Presenter Bio:**

**Ken Scott** is the Outreach Director of the NIOSH-funded Mountain & Plains Education and Research Center. He works with a broad group of stakeholders to promote safe and healthy work environments. He is also a PhD student in the Colorado School of Public Health’s epidemiology program. Scott is interested in helping organizations prepare for higher numbers and a higher proportion of older workers. He is a native of Colorado and a graduate of the University of Washington’s Department of Environmental and Occupational Health Sciences, where he earned a Master’s of Public Health Degree. He is also proud to have received an honorary AOHP membership for 2012.

## **B011**

**Friday, October 5, 2012 2:00 pm - 3:00 pm**

Breakout Session *Level: Basic*

### **Title: Violence Prevention - Not Violence - Should be Part of Your Job**

**Presenter: Daniel Hartley, EdD**



**Topic Overview:** Violence against healthcare workers is an issue in almost every US healthcare setting but remains difficult to quantify, in part, because of underreporting. Accounting for underreporting, researchers have estimated non-fatal assaults against healthcare professionals to be as high as 100,000 incidents per year. Reporting and documenting circumstances surrounding all non-physical and physical violent incidents is one of the first steps in preventing future incidents. Reporting procedures should protect employee confidentiality while allowing facility security or safety staff to learn the root cause of the incidents. Incident investigations need to uncover the facts without blaming the victim for the client's assault. OSHA

has provided workplace violence prevention guidelines for the healthcare industry that include a written program, employee participation, hazard identification, safety and health training, hazard prevention and reporting.

NIOSH teamed with a group of experts including, an AOHP representative, to develop an on-line training course that focuses on prevention of violence against healthcare workers. The course includes: discussions of each element from the OSHA guidelines; video case studies of real-life violent incidents; discussions of lateral and patient violence; prevention strategies; de-escalation techniques; reporting procedures; and much more violence related information.

**Objectives:**

1. Describe the impact that underreporting has on preventing violence against healthcare workers.
2. List three of the elements included in the OSHA workplace violence prevention guidelines.
3. Define lateral and patient violence in terms of the perpetrator.

**Presenter Bio:**

**Dr Daniel Hartley** has been with the National Institute for Occupational Safety and Health (NIOSH) for 14 years. He has been the workplace violence prevention coordinator for almost 10 years. He works in the NIOSH Division of Safety Research in Morgantown, WV. His current workplace violence prevention efforts include projects related to the prevention of violence against healthcare workers, prevention of violence against pharmacists and retail violence prevention.

**B012**

**Friday, October 5, 2012 2:00 pm - 3:00 pm**

Breakout Session *Level: Intermediate*

**Title: The Role of Health Promotion in Reducing Employee Injuries**

**Presenters: Denise Knoblauch, BSN RN COHN-S/CM and Phyllis J Edwards, BSN RN COHN**

**Topic Overview:** The housekeeping departments of medical centers frequently experience high injury rates compared to other departments. In one organization, wellness data review reported more than two thirds of the housekeeping department staff were either overweight or obese. Literature review supported a relationship between obesity and injuries. This research was conducted over one year with nutritional education presented at each department meeting, and included 24 percent (n = 48) of the housekeeping department who completed both pre- and post-intervention personal wellness profiles (PWP.) Comparison of the self reported pre- and post-PWP results shows an increase in nutritional and fitness status, a decrease in the use of sick days, a decrease in alcohol use, a decrease in blood pressure, a better weight status, and an improvement in doing well overall. Work-related injuries decreased by 12 percent.

This research study demonstrates that nutritional education sessions are effective in improving nutritional knowledge. Even though the BMI was not lowered significantly, there was evidence that the employees were paying attention to the nutrition education sessions by the results of the post-PWP. Changing health behaviors is never a quick process, but the researchers believe that a continuation of this program with this particular group of employees could show significant improvements in their health status over several years.

**Objectives:**

1. Recognize risk factors noted in personal wellness profiles which were used to develop a nutritional education plan.
2. Discuss the impact of nutritional education on wellness behaviors of housekeeping employees.
3. Review the impact of nutritional education on occurrence of work-related injuries.

**Presenter Bios:**



**Denise Knoblauch** is a Case Manager in Occupational Health with more than 20 years as an occupational health professional in healthcare. She began her career as a lone Employee Health nurse in a small rural hospital and transitioned to an urban medical center which provides occupational health services to medical center employees and 500 companies. She has experience as a staff nurse, infection control nurse, clinic coordinator and case manager. She developed the case manager model in her department. In her current position, she facilitates communication and return to work issues for medical center and employer groups. An active AOHP member on the local and national levels, Knoblauch fills many leadership roles, including current co-chair of

the Continuing Education Committee and co-instructor for *Getting Started on the Road*. She also presents on many occupational health related topics nationally, regionally and locally, and is co-researcher of a nursing research project focusing on reducing injuries via nutritional education in the housekeeping department. She is a board certified occupational health nurse specialist and case manager from ABOHN.



**Phyllis Edwards** is currently Assistant Patient Care Manager for an urban medical center occupational office practice which provides comprehensive occupational services to medical center employees as well as external companies. She has more than 15 years in occupational health and safety. She has experience as a staff nurse, disability case manager and 6 Sigma Black Belt. Edwards is currently completing a research project for the medical center housekeeping department. She is also completing her master's degree in nursing. She is a practiced presenter on a variety of occupational health related topics. She is a certified occupational health nurse.

**B013**

**Friday, October 5, 2012 3:10 pm - 4:10 pm**

Breakout Session *Level: Basic*

**Title: Can't Take it Anymore? Stress, Burnout and Compassion Fatigue**

**Presenter: Barbara McCarthy, MSED BSN RN COHN**



**Topic Overview:** Health caregivers, especially those in occupational health, are at high risk for burnout, job-related stress and compassion fatigue. Find out the differences, what signs and symptoms you should be aware of, how it can affect you or your employees, and what you should do if you suspect you or someone else has it. We don't need to leave a profession we love to save our sanity. Be aware of special stressors healthcare workers face, and how we can save ourselves.

**Objectives:**

1. Identify the difference between stress and burnout.
2. Define compassion fatigue, stress and burnout, and how they are different.
3. List three signs and symptoms of each and when to refer for professional help.

**Presenter Bio:**

**Barbara McCarthy** has been a nurse for 36 years, having worked in many specialties and positions related to and in occupational health. She was an instructor for former President Clinton's initiative on HIV education in federal agencies. She is a past presenter for the American Association of Occupational Health Nurses and the Association of Occupational Health Professionals in Healthcare at national, state and local levels on topics such as safe patient handling, employee wellness, sleep, and care of employees with bariatric surgery. She is currently the Manager of Occupational Health for Albemarle Health in Elizabeth City, NC. She is a registered nurse and holds a Master's of Science in Health Education from Virginia Tech.

**B014**

**Friday, October 5, 2012 3:10 pm - 4:10 pm**

Breakout Session *Level: Intermediate*

**Title: Developing Effective Policies & Procedures for Your Safe Patient Handling Program**

**Presenter: Kent Wilson, CIE CSPHP**



**Topic Overview:** This presentation will walk participants through the difficult process of developing a user friendly and practical safe patient handling policy. Attendees will learn what key tools to incorporate into a successful policy that will drive compliance and positive outcomes. From writing roles and responsibilities of all management levels to dependency definitions and proper algorithms, this presentation will cover all of the basic components of a quality policy. Participants will be encouraged to bring examples and discuss aspects of their current policies so they can return with real and beneficial solutions.

**Objectives:**

1. Describe the key components of a clear, concise and consistent policy.
2. Identify the appropriate use of dependency descriptors.
3. Explain the basic rules of developing usable patient handling algorithms.
4. Clarify the role and proper application of activity, compliance and outcome measures.

**Presenter Bio:**

**Kent Wilson** has performed ergonomic and safety evaluations for dozens of healthcare facilities around the country. He is a Certified Ergonomist who takes an active role in the development of regulatory standards. He is a full member of the Human Factors and Ergonomics Society, The National Safety Council and The American Industrial Hygiene Association, as well as an active participant on their Ergonomic and Healthcare committees. Wilson is the President of the Association of Safe Patient Handling Professionals.

**B015**

**Friday, October 5, 2012 3:10 pm - 4:10 pm**

Breakout Session *Level: Intermediate*

**Title: TB – What's Everyone Still Coughing About?**

**Presenter: Karen Karwowski, MSN RN Ed CHSP**



**Topic Overview:** According to the World Health Organization (2009,) there were 9.4 million new cases of tuberculosis (TB) worldwide, which included 1.1 million cases among people with HIV. In addition, 1.7 million people died from TB, including 380,000 with HIV – this equals 4,700 deaths per day. One-third of the world’s population is infected with TB. These statistics are quite sobering and are indicative that tuberculosis is not a disease of the past, but one that continues to be very much present, particularly in Asia, Russia and Africa. With a global economy and borders that are much more flexible, the concerns of TB have become a universal medical issue that all healthcare entities need to combine resources to treat and manage. This presentation reviews the background of tuberculosis and provides

epidemiology information from around the world and closer to home. The guidelines for TB testing of healthcare providers, according to the Centers for Disease Control and Prevention (CDC,) are reviewed, along with the positive and negative issues of TST versus IGRA testing. TST will be reviewed further for staff certification and state reviews in this area.

**Objectives:**

1. Identify one historical fact surrounding tuberculosis.
2. Recall one epidemiological fact surrounding tuberculosis.
3. Recognize one Centers for Disease Control and Prevention requirement for tuberculosis testing in healthcare settings.
4. List one positive and one negative concern related to Tuberculin Skin Test versus Interferon Gamma Release Assay testing.

**Presenter Bio:**

**Karen Karwowski** is the Nurse Manager of Employee Health and Safety for Henry Ford Hospital and Health Network and West Bloomfield Hospital, which employs approximately 20,000 of the 25,000 employees of the health system throughout southeastern Michigan. Employee Health and Safety provides pre-placement and annual screening, work-related injury treatment and management, BBP needlestick/splash and communicable disease management, antineoplastic surveillance examinations, for cause and HPRP drug and alcohol screening, and wellness supportive activities for employees. Karwowski has been an RN for more than 24 years in various hospital and in-patient sub-acute settings including behavioral and geriatrics. She has worked in many capacities that include Staff Nurse, Charge Nurse, Clinical Coordinator, Inservice Director, Director of Nursing, Corporate Nurse, and Nurse Manager. She is certified by the State of Michigan as a Master Train-the-Trainer and TST instructor and provides courses throughout the state. In addition, she works as a part-time NCLEX-RN instructor for RN graduates preparing for their board examination. She has just become a Board Certified Healthcare Safety Professional.

**B016**

**Friday, October 5, 2012 3:10 pm - 4:10 pm**

Breakout Session *Level: Basic*

**Title: Health and Wellness in a Hospital Setting Non-Incentivized**

**Presenter: Curtis Chow, FNP PA-C COHN-S CEES**

**Topic Overview:** This presentation will review a case study to show the effectiveness of a fully-funded health and wellness initiative for three hospitals encompassing 2,200+ employees. It will demonstrate the process of rolling out a novel benefit, the management needed to create and sustain the program, collaboration needed with the a provider of health and wellness services and the results of participation. The session will conclude with a discussion about best practice approaches to health and wellness initiatives.

**Objectives:**

1. Identify the purpose of implementing a health and wellness initiative.
2. Discuss the facts and statistics of one system, population and service area.
3. Identify challenges to implementing a health and wellness project.
4. Discuss recommendations for those embarking on health and wellness initiatives.

**Presenter Bio:**

**Curtis Chow** is an Employee Health Coordinator for Mercy Medical Center in Redding, CA. He is a dual-licensed Nurse Practitioner/Physician Assistant who is also certified as a COHN-S and ergonomist. He works at a hospital-based Employee Health clinic, treating employees for injuries, addressing infection control issues, and leading in safe patient handling, industrial ergonomics, and health and wellness. Chow has an intensive and critical care registered nurse background. His primary interests lie in preventive and pain management medicine using a scientific-based foundation in conjunction with the latest medical techniques. He has strong commitment to community service and a mission to provide excellent healthcare to the underserved.

**B017**

**Friday, October 5, 2012 3:10 pm - 4:10 pm**

Breakout Session *Level: Intermediate*

**Title: Occupational Health Nursing 2010 Practice Analysis Report**

**Presenter: Ann M Lachat, BSN RN FAAOHN COHN-S/CM**



**Topic Overview:** The primary purpose of this practice analysis was to confirm the knowledge, skills and activities currently required for the proficient practice of occupational health nursing as reflected by the tasks performed. A valid and reliable survey instrument was developed by a practice analysis committee of subject matter experts. The survey contained 20 demographic questions and 136 nursing task statements. An e-mail invitation to participate in the Web-based survey containing a link to the survey instrument was then distributed to 8,720 occupational health nurses in the United States and Canada. After reducing the survey sample for undeliverable e-mails and addresses (n=2401,) 6,319 surveys remained. Respondents returned 2,594

surveys, for a total response rate of 41 percent.

Decision rules were developed to determine which tasks were appropriate for inclusion in the examinations for certified occupational health nurses (COHN,) certified occupational health nurse specialists (COHN-S) and certified case management (CM) examination blueprints. The revised examination blueprints were used to refine the ABOHN certification examinations.

**Objectives:**

1. Describe the development and methodology of the survey.
2. Provide and discuss informational data of the survey.
3. Describe the decisions used to develop American Board for Occupational Health Nurses test specifications.

**Presenter Bio:**

**Ann M Lachat** is the Chief Executive Officer of the American Board for Occupational Health Nurses, Inc. (ABOHN,) with headquarters in the Chicago, IL area. ABOHN is the sole certifying body for occupational health nurses in the United States. She has been the Director of Employee Health to multiple industries, including CBS Television and Radio and has directed the Case Management and Claims Department for a national insurance company. She currently directs the credentialing process of the COHN, COHN-S, Case Management and Safety Management credentials and the daily operations of the American Board for Occupational Health Nurses, Inc. Lachat is Past President of the Illinois State Association of Occupational Health Nurses, Past President of the

Chicago Illinois Association of Occupational Health Nurses, and has been awarded the Schering Illinois Occupational Health Nurse of the Year, National AAOHN Excellence in Education Award, Crain's Chicago Publication Employee of the Year Award and was honored as a Fellow in the American Association of Occupational Health Nurses.

## **C001**

**Saturday, October 6, 2012 7:45 am - 8:45 am**

General Session *Level: Intermediate*

### **Title: AOHP Court Rides Again**

**Presenters: Walter Newman, MD, Barbara Brown, MPH MSN RN COHN-S/CM and Curtis Chow, FNP PA-C COHN-S CEES**

**Topic Overview:** *Back by Popular Demand!* AOHP COURT RIDES AGAIN will be very similar in format to the presentation offered at the AOHP 2011 Annual National Conference in Minneapolis, MN.

"All rise" as AOHP Court is called to order! Two AOHP members will serve as "attorneys." This court will examine three to four new litigated cases involving hospitals and healthcare organizations, with particular emphasis on termination for marijuana use with a cannabinoid card, declination of immunization, and other impairment challenges seen in the healthcare environment. The entire audience will serve as jurors, and by vote will determine the fate of the employees and hospitals involved. After the jury vote is rendered, the honorable presiding judge will explain the decisions as rendered in federal court. AOHP Court will undoubtedly be provocative, educational and entertaining.

#### **Objectives:**

1. Review and understand current legal concepts of impairment and disability.
2. Properly evaluate when to accommodate or not accommodate an employee with disabilities.
3. Examine fitness for duty in the healthcare environment for employees using psychotropic medications.

#### **Presenter Bios:**

AOHP Court's presiding judge is the (very) Honorable **Dr Walter Newman**, an alumnus of Stanford University and the The University of California, San Francisco School of Medicine. He is a member of the AOHP Northern California Chapter and is Adjunct Associate Professor of Medicine, Stanford University. He serves as consultant or medical director for numerous employers in the San Francisco Bay Area and is a member of the ACOEM House of Delegates. He is President-Elect of the Western Occupational and Environmental Medical Association ([www.woema.org](http://www.woema.org).)



**Barbara Brown**, Esq. (Attorney) is an MSN MPH RN COHN-S/CM. When not defending her hospital clients in AOHP Court, "Attorney" Brown serves as Occupational Health Program Manager for the Solano County Health and Social Services Department in northern California.

**Curtis Chow**, Esq. (Attorney) is an FNP PA-C COHN-S CEES. "Attorney" Chow, when not appearing as senior counsel for AOHP Court, serves as Employee Health Coordinator for Mercy Medical Center in Redding, CA.

## **C002**

**Saturday, October 6, 2012 8:50 am - 10:20 am**

1.5-hour General Session *Level: Intermediate*

**Title: Mandatory Flu Vaccination Program: To Be or Not To Be?**

**Presenters: Beverly Hagar, BSN RN COHN-S, Hilary M Babcock, MD MPH, William G. Buchta, MD MS MPH, and Melanie Swift, MD FACOEM**

**Topic Overview:** Infection prevention and control experts recognize that vaccination is an effective tool in preventing the transmission of influenza, and it is important to patient safety and quality of care. For many years, the Centers for Disease Control and Prevention (CDC), along with many other organizations, has recommended influenza vaccination for healthcare workers. But, even though the evidence supports the fact that influenza vaccine is effective, cost efficient and successful in reducing morbidity and mortality, healthcare worker compliance rates nationwide under voluntary vaccination policies remain at just 44 percent. Discussion has ensued about mandating influenza vaccination, which would dramatically improve vaccination rates and could thereby reduce the transmission of influenza to at risk patients or residents. An intense debate continues as to the appropriateness of mandating influenza vaccines for healthcare workers. This presentation will review the pros and cons of mandatory healthcare worker vaccination, including ethical implications. The session will conclude with a panel discussion presented by four experts in this field.

**Section I – 30 min**

**Mandatory Influenza Vaccination of Healthcare Personnel: Pro**

**Presenter: Hilary M Babcock, MD MPH**

**Topic Overview:** This presentation will provide an overview of the evolution of strategies to improve influenza vaccination rates among healthcare personnel, culminating in the implementation of mandatory vaccination programs at multiple facilities across the United States. The rationale for a mandate and an overview of some of the ethical arguments will be presented, in addition to the experience of several facilities/healthcare systems with current mandatory programs in place.

**Objectives:**

1. Discuss the rationale for mandatory influenza vaccination programs.
2. Describe the implementation of a mandatory influenza vaccination program.
3. Explain the impact of mandatory influenza vaccination programs.

**Section II – 30 min**

**Who Does Your Flu Shot Protect? The Facts about Indirect Benefits to Patients**

**Presenter: Melanie Swift, MD FACOEM**

**Topic Overview:** At the national, state, local and facility levels, people are debating whether healthcare workers should be required to take an annual influenza vaccine. Many acute care hospitals have already established policies making influenza vaccination a condition of employment. Driving this is the assumption that increasing the rate of healthcare worker vaccination will improve patient outcomes, from hospital-acquired influenza infection to pneumonia to mortality. But, is this assumption correct? Making rational policy decisions, communicating clear risks to workers and to patients, and weighing the limitations of personal autonomy against the ethical obligations of healthcare workers, all depend upon the answer to that question. We will explore what is known, and what remains unknown, about the impact of healthcare worker vaccination on patient safety.

**Objectives:**

1. Review the current evidence regarding indirect benefits of healthcare worker vaccination to patients.
2. Quantify and compare the risk of healthcare-associated influenza in different care settings.
3. Evaluate the pros and cons of mandatory influenza vaccination policies.

### Section III – 30 min

#### Panel Discussion

**Presenters: Beverly Hagar, BSN RN COHN-S, Hilary M Babcock, MD MPH, William G. Buchta, MD MS MPH and Melanie Swift, MD FACOEM**

#### Presenter Bios:



**Beverly Hagar** is the current Supervisor for Virginia Mason’s Employee Health Program. She has been a registered nurse since 1978 and received her BSN from the Intercollegiate Center for Nursing Excellence through Washington State University. Hagar is a Certified Occupational Health Nurse Specialist, past Secretary and President of the Pacific Northwest AOHP Chapter and current Region 1 Director for AOHP. She has been involved in the mandatory influenza vaccination program at Virginia Mason since its inception and has spoken at multiple venues including the CDC-National Immunization Conference, the Canadian CDC and the National Foundation for Infectious Diseases. She was a member of the faculty that developed the “Immunizing Healthcare

Personnel Against Influenza—Best Practices” toolkit with the NFID and is co-author of the article “Mandatory Influenza Vaccination of Healthcare Workers: A 5-Year Study,” published in the September 2010 Infection Control and Hospital Epidemiology Journal.



**Dr Hilary Babcock** is originally from Dallas, TX. She received her undergraduate degree from Brown University in Rhode Island and her medical degree from the University of Texas Southwestern Medical Center at Dallas in 1994. She completed her internal medicine residency at Barnes-Jewish Hospital in St Louis, MO, where she also served as chief resident. She stayed at Washington University in St Louis for her Infectious Diseases fellowship and then joined the Infectious Diseases division faculty there. She is currently an Assistant Professor in the division. She completed a Master’s of Science Degree in Public Health from St Louis University in 2006. She is currently serving as the Medical Director for the Infection Prevention and Epidemiology Consortium of BJC HealthCare in St Louis, as well as the Medical Director for Occupational Health (Infectious Diseases) for Barnes-Jewish and St Louis Children’s Hospitals.



**Dr. William G. Buchta** attended medical school at the University of Wisconsin and received training in family medicine and occupational medicine at the Medical College of Wisconsin. After four years of primary care practice at Hickam Air Force Base in Hawaii, he began the occupational medicine program at the Skamp Clinic, LaCrosse, WI, in 1992. He then became Medical Director of the Occupational Health Service at the Mayo Clinic in Rochester, MN, in 2001. Buchta was Chair of the American College of Occupational and Environmental Medicine’s (ACOEM) Medical Center Occupational Health Section from 2004 to 2008 and has served on the ACOEM Board of Directors since 2008. He was elected chair of the International Commission on Occupational Health (ICOH) Scientific Committee on Occupational Health for Healthcare Workers in March 2012.



**Dr Melanie Swift** is the Director of the Vanderbilt Occupational Health Clinic in Nashville, TN. The clinic provides prevention, surveillance and treatment to more than 23,000 faculty and staff. The clinic administers the annual flu vaccination program, among other immunization programs. In 2011, Vanderbilt set a Guinness World Record for most

vaccines delivered in a day by conducting Flulapalooza, a mass vaccination drill utilizing seasonal flu vaccine, in which 12,850 flu shots were given in an eight-hour period. This event garnered Vanderbilt a 2012 National Influenza Vaccine Summit Award. Swift earned her MD from UT Memphis and completed an Internal Medicine residency at Brown University. She is a board-certified internist, Past President of the Tennessee College of Occupational and Environmental Medicine, and is a Tennessee delegate to the American College of Occupational and Environmental Medicine (ACOEM.) Vice Chair of ACOEM's Medical Center Occupational Health Section, Swift was the lead author in drafting ACOEM's guidance document on Prevention of Influenza in Healthcare Workers. She was a participant in the 2010-2011 Healthcare Personnel Influenza Vaccine Working Group for the National Vaccine Advisory Committee, which drafted HHS recommendations for achieving national healthcare worker influenza vaccine goals.

### **C003**

**Saturday, October 6, 2012 10:35 am - 11:35 am**

General Session *Level: Advanced*

#### **Title: 2012 Legislative Update**

**Presenter: Stephen A Burt, MFA, BS**



**Topic Overview:** The amount of introduced legislation in the 112th Congress that can impact daily activities in occupational health is staggering. Occupational health plays a pivotal role in the ongoing safety of the work environment, and it has become even more essential for the Occupational Health Department to know and understand potential changes in the regulatory environment caused by the passage of newly introduced legislation. Secretary of Labor Hilda Solis has stated that "... there is a new sheriff in town." OSHA has become an enforcement agency, and the regulatory agenda presented contains initiatives which include infectious disease regulations and injury/illness prevention plans. This general session will review the pertinent and germane bills introduced in the 112th Congress and give highlights into the reasons behind the issues.

#### **Objectives:**

1. Recognize which new legislation introduced into the 112th Congress may impact occupational health.
2. Describe the issues behind the newly introduced legislation and the potential for passage.
3. Identify strategies to address departmental changes brought on by the newly introduced legislation.
4. Review OSHA's upcoming regulatory agenda and initiatives which may impact the Occupational Health Department.

#### **Presenter Bio:**

**Stephen A Burt** is currently President and CEO of Healthcare Compliance Resources, an affiliate of Woods Rogers Consulting, a company developing and delivering strategic solutions to today's healthcare regulatory compliance problems. From 1981 to 1994, he was the Corporate Director of Environmental Health for Carilion Healthcare System (Roanoke, VA,) responsible for OSHA, EPA and TJC compliance, and was awarded the prestigious American Hospital Association's Phoenix Award. During this time, he was non-legislative appointee to the Joint Legislative Administrative Review Commission (JLARC.) From 2006 to 2008, he served as the Corporate Administrator of Employee Safety for Inova Health System in Falls Church, VA, with responsibility in Employee Health and OSHA compliance. Burt conducts more than 50 full-day OSHA, HIPAA and Employee Health seminars per year for the University of North Carolina, Duke University, East Carolina University, Association of Occupational Health Professionals in Healthcare (AOHP,) the Virginia Hospital and Healthcare Association, and the American Hospital Association, among others. He currently serves as Executive Vice President of AOHP and is the Chair of the Government Affairs National Committee.

**C004**

**Saturday, October 6, 2012 11:40 am - 12:40 pm**

General Session *Level: Intermediate*

**Title: Engaging a New Generation of Employees in Healthcare: Exploring How to Use Social Media to Improve Employee Health Communication**

**Presenter: Liliana Tenney, MPH**



**Topic Overview:** “The times, they are a changin’.” With the rise of social media and a new generation of workers entering the healthcare field, there is a need to address new communication methods that engage employees, encourage conversation and promote collaboration with Employee Health. Integrating innovative strategies into existing communication infrastructure can lend itself to improvements in the way information is delivered so that it is understood, creates a sense of community and motivates change. Social media is not only creating a more adaptable way to communicate; it is also playing an important role in shaping workplace culture and helping shift away from the traditional hierarchical model. This session will focus on giving an overview of effective

tools for employee health professionals to use to reach employees in an effective manner. The goal of the session is for individuals to leave feeling confident that they can implement social media tools within their organizations.

**Objectives:**

1. Understand the relevance of social media as applied to the healthcare setting.
2. Recognize key elements of social media and communication best practices.
3. Integrate social media and new communication tools into existing methods.
4. Identify your audience and the differences that exist among individuals adopting social media.

**Presenter Bio:**

**Liliana Tenney** received her Master’s of Public Health Degree from the Colorado School of Public Health, University of Colorado campus, and is a Professional Research Assistant in the Department of Environmental and Occupational Health at the Colorado School of Public Health. Tenney is the Assistant Director for Continuing Education for the NIOSH-funded Mountain and Plains Education and Research Center. Her research interests include workplace wellness programs and their relationship to workplace injuries and workers’ compensation claims. Before pursuing her MPH and working at the Mountain and Plains ERC, Tenney developed a strong background in marketing and social media with her work in health promotion and wellness.