



SEPTEMBER 11 -14, 2013

Discover the
Magic *in AOHP*
AOHP 2013 National Conference





Dear AOHP members, colleagues and friends,

Hello, and welcome to Orlando! As occupational health professionals, we work hard every day, helping those who help others to stay healthy and well. But, it's also important for us to focus on our own well-being, and the AOHP Annual National Conference is just the place for us to take a break and re-energize.

AOHP was founded in 1981 with a mission to provide members with professional growth through education, and we are proud to be continuing this important tradition for the 32nd year. Thank you for your commitment to participate in this preeminent event, one of the country's largest conferences for occupational health professionals in healthcare.

I hope you discover many magical opportunities to learn, collaborate, network and have fun at this year's conference. Refresh, renew and revive yourself through dynamic educational programming provided by occupational health experts, and then relax and unwind at one of the Walt Disney World theme parks or other amazing Orlando attractions. Enjoy the exchange of successful ideas, experiences and research practices in the poster session, and explore the innovative, helpful products and services offered by our vendors in the exhibition hall. Network with your peers and earn continuing education hours in a wide variety of content areas during the event to help advance your practice.

It has been an honor to serve as this year's National Conference Chair, and I am grateful to all of the volunteers who have helped to build such a strong, informative educational program, complemented by a variety of other activities designed for both professional and personal growth. Together, our community of AOHP leaders, committed attendees, expert speakers and supportive vendors are working to advance the profession of occupational health.

Discover the Magic in AOHP!

Carla Stevens, BSN, RN
2013 AOHP National Conference Chair



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WALT DISNEY World® Resort

WHY Attend the conference?

...The education, the networking and the location.

- Enhance your work practice
- Stay updated on current laws and regulatory issues
- Gain knowledge from industry leaders
- Return to work motivated with new ideas
- Discover the Magic of Disney and AOHP!

WHO Should Attend?

- Occupational health nurses and physicians
- Employee health professionals
- Infection control practitioners
- Industrial hygienists
- Safety officers
- Human resource administrators
- Risk managers
- Hospital administrators
- Case managers
- Other interested individuals

WHEN and WHERE is the Conference?

Discover the MAGIC in AOHP!

September 11-14, 2013

**Hilton Orlando
Lake Buena Vista,
Orlando, FL**

WHAT are the Benefits?

...Grow as a professional with up-to-date knowledge of the expanding scope of occupational health.

- Gather pertinent, useful information
- Nearly 40 dynamic educational sessions
- CEUs in a wide variety of practice areas
- Network on a national level
- Interact with experienced speakers
- Share challenges and successes with peers

ORLANDO



It's all about the FUN in Orlando, Florida!

There has never been a better time to attend a meeting in Orlando. With the fast-paced world we all live in, when you attend a conference, you want a destination that will offer a little R&R - a place where a spouse or friend can find entertainment while you're networking and learning. Orlando offers that great opportunity. Once the meeting is adjourned, a world of **thrilling attractions, championship golf courses, world-class spas, superb restaurants, captivating museum exhibitions and performing arts**, and more than **1,200 retail shops** await you. Whether you're looking for a quick getaway between business sessions or an all-day excursion for your accompanying family or friends, Orlando offers something for every schedule and every interest.

Start planning your visit to Orlando. Families, couples, single travelers or friends will find unique experiences that ensure every visitor an unforgettable vacation. Search **theme parks** from Walt Disney World® Resort and Universal Orlando® Resort to SeaWorld® Orlando and Legoland® Florida. Explore the area's attractions, arts and culture, shopping, spas, golf, dining, outdoor adventures and nightlife to build your perfect itinerary. Purchase **discount attraction tickets**, discover upcoming **Orlando events** and find discounts with a free **Orlando Magicard**.

Visit <http://aohp.orlandomeetinginfo.com> for more information. This Web site is customized for AOHP National Conference attendees, so take time to browse and plan a special visit to Orlando.

DISNEY MEETING & CONVENTION TICKETS DISCOUNT OFFERED TO AOHP CONFERENCE ATTENDEES

Disney Meeting & Convention Tickets offer **pre-arrival savings of 10%** on multi-day (two days or longer) tickets and **include a**

complimentary bonus visit to an additional Disney Experience at any one of the following (more details on the custom Disney Ticket Microsite: <http://www.mydisneymeetings.com/aohp/>)

- *Disney's Typhoon Lagoon Water Park*
- *Disney's Blizzard Beach Water Park*
- *DisneyQuest® Indoor Interactive Theme Park*
- *ESPN Wide World of Sports Complex with 30 minutes of game play at the PlayStation® Pavilion*
- *Disney's Winter Summerland or Disney's Fantasia Gardens Miniature Golf Courses (before 4:00 pm)*
- *A round of golf at Disney's Oak Trail Golf Course*

The site also contains partial-day tickets: after 2:00 pm and after 4:00 pm tickets are exclusive to meeting attendees and their families.

The custom Disney Ticket Microsite <http://www.mydisneymeetings.com/aohp/> will enable attendees, as well as accompanying friends and family members, to individually purchase these specially priced Disney Meeting & Convention Tickets. The ticket prices listed reflect applicable discounts and include tax. Since these tickets are not available for purchase at theme park ticket windows, attendees must purchase them through this custom Web site. Make sure you receive your tickets before you leave home!



In addition, the free Orlando Magicard® offers great savings on a variety of area attractions, restaurants and shopping ([see restrictions](#).) Make your next visit to Orlando easy and economical by using the Magicard!

Ways to get a Magicard

1. [Print a Magicard](#) online now.
2. [Pick up a Magicard](#) during your visit to Orlando at the Official Visitor Center.

TRANSPORTATION

No matter where you're coming from, Orlando is the perfect choice for domestic or international travel. Orlando International Airport (MCO) offers more flights to more places than any other airport in Florida. In fact, MCO provides non-stop service to more major U.S. destinations than most other cities in the country. More than 800 flights bring about 70,000 passengers through the award-winning Orlando International Airport every day. The airport is also a short distance from many attractions, meeting facilities and hotels.

Learn more about [Orlando International Airport](#).

Airport Shuttle Discount Offered to AOHP Conference Attendees

As the primary ground transportation concessionaire at Orlando International Airport, Mears Transportation Group offers online reservations for transportation between the airport and your Orlando hotel. You can book transportation with the shared ride shuttle services or with an exclusive luxury vehicle. Shuttle services are provided in either a late-model 11 passenger shuttle van or a motor coach.

Attendees can print a discount coupon ([download here](#)) and take it to one of the four Mears kiosks located on the transportation level (Level One) at either end of the rental car counters when purchased on site.

The discount is also available online at <https://secure.mearstransportation.com/default.asp?referrer=450580050>

Attendees can make reservations, pay and then **print the confirmation**. This includes a bar code which you **must take to any of the Mears kiosks** located on Level One at either end of the rental car counters. Once you **scan the confirmation** at the Mears counter, you will **receive a two-part ticket** for the shared ride shuttle; one for arrival, and one for departure. Call the day before to schedule your pick-up. Instructions and contact information are included on the ticket.

Parking

A discounted parking rate is offered by the Hilton Orlando Lake Buena Vista Resort to conference attendees.
Self parking: \$5 Valet parking: \$10

Car Rentals

AOHP is pleased to announce that, through special arrangement with **Dollar Rent A Car**, we are able to extend a **Special Car Rental Offer** ([download flyer here](#)) to attendees of the **AOHP 2013 National Conference in Orlando**.



For car rental reservations, book online at dollar.com, or call 1-800-800-4000. Use the corporate discount code #CA0036 when booking.

Pick up your vehicle at the airport (counters on both A and B concourses.) You can also pick up your car at the Wyndham Resort, which is directly across from the Hilton Orlando Lake Buena Vista (our conference hotel.) A quick one-minute walk will get you to the Dollar Rent A Car counter there.

<http://www.dollar.com/Locations/LocalSites/orlando.aspx?LocationID=MCO&corpdiscntr=CA0036>

For further information, please contact Ric Castro, Local Sales and Marketing Manager for Dollar Rent A Car, at 407-583-8026 (Office) or 407-701-4411 (Cell.)

Public Transportation

International Drive's convenient "I-RIDE" Trolley makes getting about in Orlando a breeze. With 78 convenient stops scheduled every 20 minutes, it's easy to reach the Orange County Convention Center, hotels, restaurants and shopping destinations. Use the area's exclusive and convenient I-RIDE Trolley service, and discover how this wonderful, cost-saving amenity takes the parking and driving hassles out of your vacation as you cruise the Drive in charming style.

WEATHER

The average temperature in Orlando in September is: Low – 72°F; High – 89°F.

AOHP National Conference attendees are encouraged to visit <http://aohp.orlandomeetinginfo.com> for more information.

CONFERENCE ESSENTIALS

WHO SHOULD ATTEND?

- Occupational Health Nurses and Physicians
- Employee Health Professionals
- Infection Control Practitioners
- Industrial Hygienists
- Safety Officers
- Human Resource Administrators
- Risk Managers
- Hospital Administrators
- Case Managers
- Other Interested Individuals

YOUR MAIN CONFERENCE REGISTRATION FEE INCLUDES:

- Dynamic Educational Sessions
- Welcome Reception with Exhibitors
- Continental Breakfast on Thursday and Friday with Exhibitors
- Continental Breakfast on Saturday
- Luncheon with Exhibitors on Thursday
- Annual Meeting and Luncheon on Friday
- Refreshment Breaks
- Final Conference Program Syllabus CD
- Entrance to the Exhibit Hall
- Solution Series with Vendors
- Continuing Education Credits
- Continuing Medical Education Credits

SPONSORING ORGANIZATION

The Association of Occupational Health Professionals in Healthcare (AOHP) is a national association with nearly 1,000 members who serve as leaders in championing the vital role of occupational health professionals in healthcare today. Through active involvement at local, state and national levels, AOHP has become the defining authority and leading advocate for occupational health and safety in healthcare, representing tens of thousands of healthcare workers throughout the nation. AOHP promotes the health, safety and well-being of healthcare workers through: advocacy; occupational health education and networking opportunities; health and safety advancement through best practice and research; and partnering with other invested stakeholders. Founded in 1981, AOHP is governed by a board of directors consisting of elected officials, including regional directors.

EXHIBIT HALL

Meet representatives from the companies that manufacture the products and services you use most often. For those companies wishing to display, please contact Annie Wiest at AOHP Headquarters at 724-935-1531 or e-mail info@aohp.org for an Exhibitor Prospectus.

EARN CONTINUING EDUCATION CREDITS

The Association of Occupational Health Professionals in Healthcare is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

Continuing Nursing Education Contact Hours (CNE)

A request for continuing education is under review by ANCC accredited provider Association of Occupational Health Professionals in Healthcare (AOHP).

All pre-conference workshops, general sessions and breakout sessions have been applied for as Continuing Nursing Education Contact Hours. Nurses can earn contact hours depending on session (i.e., pre-conference, general and breakout) attendance. Each nurse should claim only those hours of credit that he/she actually spends in the educational activity. Partial credit will not be granted for any session, nor will any credit be given until that individual session has been completed.

The pre-conference workshops, available on Wednesday, September 11, offer a maximum of 8.0 contact hours. The main conference agenda offers a maximum of 17.0 contact hours.

Case Management Hours (CCMC)

This program has been submitted to The Commission for Case Manager Certification (CCMC) for approval to provide board certified case managers with 25.0 clock hours. Continuing education units will be given for each individual session of the conference. Attendance for the entire individual session is required to obtain credit for that session. Partial credit will not be granted for any session, nor will any credit be given until that individual session has been completed.

Continuing Medical Education (CME)

The conference has applied for Prescribed CME credits from the American Academy of Family Physicians.

Verification of Participation

Continuing Education Credit will be given to those individuals who have viewed the entire presentation and returned the session evaluation and verification of session attendance. The number of contact hours accumulated will depend on the number of sessions the attendee chooses to attend. The entire lecture, breakout session or workshop must be attended to receive credit for continuing education. No credit will be given before the completion of the individual session, nor for partial attendance. A certificate will be awarded to the participant who meets the criteria.

Verification of Attendance

For those attendees who do not require continuing education credits, but wish to verify their attendance, a Verification of Attendance certificate is available upon request – post conference.

Disclosure AOHP acknowledges the operational requirements of credentialing organizations. The sponsors of continuing education activities and the speakers at these activities disclose significant relationships with commercial companies whose products or services are discussed in educational presentations. Disclosure of a relationship is not intended to suggest or condone bias in any presentation, but is made to provide participants with information that might be of potential importance to their evaluation of a presentation. Each speaker has completed a Declaration Form. The forms will be available at the conference.

CONFERENCE HOTEL

The AOHP 2013 Annual National Conference will be held at:

HILTON ORLANDO LAKE BUENA VISTA in the Walt Disney World® Resort

1751 Hotel Plaza Boulevard, Lake Buena Vista, FL 32830 USA
hiltonorlandolakebuenavista.com



The Hilton Orlando Lake Buena Vista in the Walt Disney World Resort is an exceptional hotel, ideally situated next to the Downtown Disney® Marketplace, Downtown Disney® West Side and Cirque de Soleil. Benefit from complimentary transportation to and from Disney theme parks and enjoy Disney's exclusive Extra Magic Hours benefit — providing longer fun and shorter queues. This official Walt Disney World® hotel is minutes away from Orlando's most popular theme parks, such as the Magic Kingdom®, Disney's Animal Kingdom®, Epcot®, Disney's Hollywood Studios® and Disney's water parks. Visit Sea World and Universal Studios, or shop at the Mall at Millenia and Premium Outlets.



**** Special offer to AOHP 2013 Annual National Conference participants:**

- Complimentary high-speed wireless Internet access in all guest sleeping rooms and public space (not including meeting areas) for those who make reservations under the AOHP group rate.
- Discounted parking rate: Self \$5; Valet \$10.
- Complimentary shuttle bus service for attendees and guests to and from Disney theme parks, water parks and Downtown Disney.

Hilton Orlando Lake Buena Vista is offering the following special room rate for all AOHP 2013 National Conference participants. The room rate is per guest room, per night.

\$139/night/Single and Double
\$159/night/Triple
\$179/night/Quad

Hotel room rates are subject to applicable state and local taxes. These guest room rates will be offered by the hotel seven days

prior to and seven days after the meeting dates, subject to availability of guest rooms at the time of reservation. In the event that you need to check out prior to the reserved check-out date, make sure to advise the hotel at or before check in of any change in the scheduled length of stay. If not, the hotel will charge you an "Early Departure Fee" of one night's room and tax.

RESERVATIONS

To secure your reservations, please call the hotel's reservation line at 1-800-782-4414. You must identify yourself as part of the *Association of Occupational Health Professionals in Health-care (AOHP) 2013 National Conference* to receive the special group rate. You can also use the group code "AOH" to get the special group rate.

If you plan to arrive late, let the hotel know when you make your reservation. If your flight is delayed, inform the hotel as soon as possible to secure your booking.

Online Hotel Reservations

<https://resweb.passkey.com/go/ahop2013nationalconference>



Cut-Off Date

The cut-off date for hotel reservations is **August 21, 2013**. Reservation requests received after the cut-off date will be based on availability at the hotel's prevailing rates. If AOHP's block of reserved rooms is filled prior to the cut-off date, attendees will be required to pay prevailing rates.

Check-In/Check-Out

Rooms will be available at 4:00 pm on arrival day; check-out time is 11:00 am. All guests arriving before 3:00 pm will be accommodated as rooms become available. The hotel Guest Services Department can arrange to check baggage for those arriving early when rooms are unavailable and for guests attending functions on departure day. Any attendee wishing special consideration for late check-out should inquire at the hotel front desk on the day of departure. AOHP will provide a secure baggage holding area on Saturday, September 14 from 7:00 am to 12:00 pm for attendees.

For more information about the conference hotel, please visit the Web site at http://www.aohp.org/pages/education/conference_site.html.

CONFERENCE REGISTRATION

Main conference registration does not include pre-conference workshops. All registrants must pay in full before attending any sessions, events or workshops. Complete the AOHP Conference Registration Form and mail, along with payment, to:

AOHP

109 VIP Drive, Suite 220

Wexford, PA 15090

Fax: 724-935-1560

Please do not fax the Registration Form if payment is by check. Payment must accompany the Registration Form. Only registration with credit card payment can be faxed for processing.

Pre-registration for the conference is encouraged.

STUDENT RATE

\$210 (Main Conference Thursday to Saturday)

Students are defined as full-time (minimum of nine credit hours) and must submit registration by mail or fax with payment and student ID.

GROUP DISCOUNT

Receive a 15% discount on main conference registration when a minimum of five employees from the same organization register at the same time. Must submit by mail or fax with payment.

REFUNDS

A refund of all registration fees, less 20 percent, will be made when a written request is received by **August 19, 2013**. No refunds will be made after this date. Registration substitutions may be made if requested in writing before Friday, September 6, 2013.

PRE-CONFERENCE WORKSHOP

AOHP reserves the right to cancel the pre-conference workshops if the minimum registration is not met. Any change in workshop selection must be sent to AOHP Headquarters in writing by August 19, 2013 to avoid a \$25 administrative charge.

OHN REVIEW COURSE

Submit your registration before August 1, 2013.

The course will be cancelled if we do not achieve the minimum number of participants by this date.

CONFERENCE SYLLABUS

Your main conference registration fee will include the conference syllabus in CD format. If you would like to have a notebook syllabus as well, it will be available at the discounted price of \$48 for conference registrants. Place your order prior to the conference. An additional syllabus CD can be ordered at a discounted price of \$15 for conference registrants. The notebook syllabus will be distributed onsite at the registration desk.

If you are unable to attend the conference and would like to have a copy of the syllabus CD, the cost is \$20 for members and \$30 for non-members.

GUESTS

Guests of AOHP conference registrants may register in advance or at the AOHP registration area to obtain a badge for admittance to the AOHP exhibit hall only. The fee includes admittance to the activities/meals listed below. All guests must be registered to enter the hall and must be accompanied by a registered conference attendee at all times during their visit.

GUEST MEAL TICKET

(for family member or guest of registrant)

\$20 Welcome Reception (Wednesday)

\$10 Breakfast each day (Thursday, Friday or Saturday)

SPECIAL REQUESTS

If you are aware of any disability that might prevent you from participating in any part of this conference, please call AOHP Headquarters at 800-362-4347 so that we may work with you to make the necessary arrangements to allow your full participation. Also, please notify Headquarters if you have any dietary restrictions.

REGISTRATION DESK OPEN HOURS

Tuesday, September 10, 2013:	4:00 pm to 5:00 pm
Wednesday, September 11, 2013:	7:00 am to 5:00 pm
Thursday, September 12, 2013:	6:45 am to 5:00 pm
Friday, September 13, 2013:	7:00 am to 4:30 pm
Saturday, September 14, 2013:	7:00 am to 1:00 pm

JOIN AOHP

If you are not a member, the non-member main conference registration fee will include 2014 AOHP membership. The membership year is January 1 through December 31, 2014. Please complete the enclosed Membership Application and return it along with your Registration Form. Your membership will be activated at the completion of the conference, providing you with an additional three free months of membership for the balance of 2013.

As an AOHP member, you will enjoy the following benefits:

- A subscription to the *Journal of the Association of Occupational Health Professionals in Healthcare*, AOHP's quarterly publication.
- A subscription to the quarterly e-newsletter *Making a Difference...*
- A subscription to the monthly AOHP e-Bytes.
- A subscription to the AOHP *Listserv*.
- Networking and educational opportunities sponsored by regional and local affiliates.
- Continuing education opportunities through local chapters and annual conference events.
- Leadership opportunities on chapter and national levels.
- Government affairs updates.
- Access to employment opportunities on a national level.
- Reduced member rate on AOHP education programs and publications.

For additional information, please visit our Web site at www.aohp.org, contact AOHP Headquarters by telephone at 800-362-4347 or e-mail info@aohp.org.

POSTER PRESENTATIONS OVERVIEW

The 2013 Conference Committee reviewed several posters for the AOHP 2013 National Conference. The selected posters will be open for viewing from Wednesday, September 11 at 6:00 pm until Friday, September 13 at 11:00 am. Stop by the poster session and see how these presenters have successfully implemented a program or taken an innovative idea and turned it into a reality.

2013P001

A Pilot Nurse Peer Vaccination Program Improves Flu Vaccination Rates

Keqin Qian, MSN CRNI NP-C and Melanie Swift, MD FACOEM

Vanderbilt Occupational Health Clinic, Nashville, TN

The Vanderbilt Occupational Health Clinic's (OHC) influenza vaccination campaign for 2012-2013 ended successfully and achieved a historically high vaccination rate. Despite all the effort utilized in the past, vaccination rates haven't been so great, especially among nurses. This year, OHC launched a pilot Peer Vaccination Program (PVP) for the purpose of providing greater convenience for nurses who couldn't leave their units. The PVP utilized designated nurses throughout Vanderbilt to offer influenza vaccines to their coworkers. The pilot program went well, and the peer vaccinators helped give more than 1,300 influenza vaccines to their peers!

2013P002

Case Managing the Injured Caregiver

Margo Bostrom, BSN RN CCM, William Gahr, Jill Markowitz, MSN CRNP and Paul Terpeluk, DO MPH MA

Cleveland Clinic, Cleveland, OH

Workers' Compensation at a large midwestern tertiary care center identified a need for a coordinated hospital-based return to work program for occupationally injured employees.

A case manager interfaces with the Occupational Health medical team and oversees a modified duty return to work program (MDRTWP) promoting earlier workforce re-entry. Weekly conversations with the employee provide support and assistance with appointments. The injured employee is accountable to attend therapy, often progressing more rapidly. Pertinent medical information allows claims to quickly progress. Quality assurance for workers' compensation for OSHA compliance has improved. Employee satisfaction and engagement has increased as employees have quickly returned to work.

2013P003

Clowning Around with Employee health

Beverly Graves, BSN RN

Eau Claire Cooperative Health Centers, Inc., Columbia, SC

In my practice, especially in trainings, I found that I needed a new, creative approach. I tried clowning to liven up the topic of OSHA training. "Curly Q" showed up at training classes and got immediate attention. She helped the employees look forward to their training instead of dreading it. Because Curly Q was so popular in OSHA training, she now shows up to cheer a lackluster day, spread some happiness or just make us laugh. Clowning has been fun for me and the employees. It is inexpensive to start. I just bought a wig from a local novelty shop and got some "wild and wooly" clothing from the local Goodwill. I have discovered a whole different side of myself, and the employees grin when they see me coming!

2013P004

Creating Respiratory Protection Competencies for Occupational Health Nurses

MaryAnn Gruden, MSN CRNP NP-C COHN-S/CM, Debra Novak, RN DSN, Paxson Barker, PhD MS RN, Barbara Burgel, PhD RN COHN-S FAAN, Candace Burns, PhD ARNP, Annette Byrd, MPH RN, Kim Gordon, MSN MA RN COHN-S FAAOHN, Ann Lachat, BSN RN FAAOHN COHN-S/CM, Lisa Pompeii, PhD COHN-S, Mary Gene Ryan, MPH BSN COHN-S/SM FAAOHN, Deborah Taormina, MSN NP-BC COHN-S

Allegheny General Hospital, Pittsburgh, PA

The Institute of Medicine (IOM) report *Occupational Health Nurses (OHNs) and Respiratory Protection: Improving Education and Training* (2011) outlined seven recommendations to improve the competency of OHNs in respiratory protection. An advisory board was convened in December 2011, with stakeholder representation from the CDC/NIOSH/NPPTL, AAOHN, AOHP, ABOHN, ANA and the IOM Standing Committee on Personal Protective Equipment for Workplace Safety and Health. Based on the results of the 2012 survey of OHNs, the advisory board appointed a team to develop respiratory protection competencies and educational products to educate nurses at all levels about respiratory protection. This poster will outline the progress to date in the development of the competencies.

2013P005

Data Collection on Ortho/Neuro Unit To Determine Correct Bed To Ceiling Lift Ratio

Laura Wisa, PTA CSPHA CEAS III

BJC Corporate Health, St Louis, MS

Data were collected on an Ortho/Neuro unit in a large metropolitan hospital where 50 percent coverage of ceiling lifts were

installed. Due to point prevalence study results, the coverage for med/surg was determined to be 50 percent. Data collection selection included: hospital acquired pressure ulcers; quarterly staff focus groups; staff survey; patient survey; monthly lift count; retention of staff; workers' compensation patient handling injuries; and documentation reviewed to address culture change. Data were collected for one year prior to install and for one year post install.

2013P006

Developing and Implementing a Comprehensive Safe Patient Handling Program at Mayo Clinic Florida

*Deb Harrison, DNP RN NEA-BC, Kathy Coley, BSN RN and Alyssa Yoder, MSN RN ONC CNRN
Mayo Clinic Florida, Jacksonville, FL*

Background: Mayo Clinic Florida (MCF) patient and employee injuries are a large health, staffing and financial burden. Direct and indirect costs associated with employee injuries from 2005-2009 were \$1.3-\$2.7 million. This included healthcare, wages, lost time, legal fees, administrative time and employee replacement. In addition, if a patient is injured in a preventable fall, there are additional costs of \$9,113-\$13,507, (Physical Therapy, 2009) according to Medicare. The National Institute for Occupational Safety and Health states that employees should not lift more than 35 lbs in providing patient care and should not push or pull greater than 20 percent of their body weight. The epidemic of obesity is further compounding the issue by adding to employee injury and by making it impossible for some patients to obtain healthcare due to access issues. As evidence supporting safe patient handling (SPH) grows, unions and state legislatures are moving to pass laws that protect healthcare workers and patients.

Objective: To develop and implement a comprehensive SPH program at MCF, which would decrease OSHA (Occupational Safety and Health Administration) reportable injuries and DART (Days Away and Restricted Time) by 20 percent in 2012, and to increase awareness and reporting of injuries.

Conclusion: The SPH program at MCF has provided an effective set of tools and supportive measures for decreasing employee injuries.

2013P007

Does A Mandatory Influenza Masking Policy Program Sustain Results?

*Tammie Garbera, LPN
Geisinger Health System, Danville, PA*

Influenza (the flu) is a contagious respiratory illness caused by the Influenza viruses. It can cause mild to severe illness, and at times lead to death. Older people, and young children with certain health conditions, are at high risk for serious flu complications. The best way to prevent the flu is by getting

vaccinated each year. Research has now led to the development of an anti-viral medicine, Tamiflu, to treat flu symptoms. But, flu season still comes every year, and with it comes the threat of another pandemic virus like H1N1. Getting health-care workers to vaccinate on a voluntary basis has been difficult; finding a way to increase the statistics was a long hard process, including many hours of brainstorming.

Our health system recognizes that vaccination is the most effective way to protect employees and patients from influenza, but many employees refuse to be vaccinated. We implemented a formal masking policy to help prevent the spread of influenza by requiring un-vaccinated healthcare workers to wear masks. Statistics obtained and analyzed from Health Services Electronic Medical records confirm sustainability and increased compliance. These statistics are inclusive to all employees and show a 90 percent or greater vaccination rate.

2013P008

Ergonomics: A Proactive Approach to OR Innovation, Surveillance and Redesign

*Wilma Traugber, MSN RN-BC and Melanie Swift, MD
FACOEM
Vanderbilt Occupational Health Clinic, Nashville, TN*

Vanderbilt University Medical Center has 83 operating rooms (OR.) The overall ergonomic well-being of OR staff and OR design should be continually addressed to minimize injury risks and to keep technology current. A focus group, led by the Vanderbilt Occupational Health Clinic (VOHC,) recognized that one-time fixes are not likely to provide lasting benefit. This group reviewed the information gathered by VOHC and prioritized four areas of concern: lighting; visual systems; slips, trips and falls; and patient handling. Based on the evaluation findings, VOHC developed a comprehensive report of recommendations and best practices for future OR innovation, surveillance and redesign.

2013P009

Implementing Respiratory Protection Programs: Examples, Strategies, and Innovative Approaches from the Field

*Barbara Braun, PhD, Debra Novak, RN DSN, Brette A. Tschurtz, BA and Hasina Hafiz, MPH
The Joint Commission, Oakbrook Terrace, IL*

The Joint Commission and Centers for Disease Control and Prevention (CDC,) National Institute for Occupational Safety and Health (NIOSH,) National Personal Protective Technology Laboratory (NPPTL) have collaborated to develop a new educational monograph designed to assist hospitals in implementing their respiratory protection programs (RPPs.) The monograph features examples, strategies and a variety of implementation approaches which were solicited from the field and vetted through an eight-member Technical Expert Panel. The monograph is part of a cluster of research activi-

ties spearheaded by NPPTL/NIOSH around respiratory protection programs and will be available for free download from The Joint Commission Web site.

2013P010

Improving Coworker Safety through Implementation of SPHM Program

*Colleen Burgio, RN COHN-S, Leigh Craft, MPH MSN RN, ONC and Teresa Warren, BSN MSSG RN CCRN
St. Joseph's Candler, Savannah, GA*

This poster will present details of the development and implementation of a successful Safe Patient Handling and Movement program, including documented results of injury reduction for St. Joseph's Candler, a magnet facility with two hospitals and more than 3,600 coworkers.

The program included a focus on several things:

- To achieve a "No Lift" work environment in all Patient Care settings
- Change Healthcare Culture
- Anticipating the Needs of the Future:
 - ✦ Aging Workforce/ Patient Population
 - ✦ Bariatric Patients
- Implement a System Wide SPHM Program with a Phase-in approach with equipment/training

St. Joseph's Candler has reduced coworker injuries by 50 percent in less than two years, in addition to conducting a Gap analysis and planning to implement additional equipment to further reduce injuries.

2013P011

Patient Handling Program Post Implementation: A Two Year Survey of Caregivers Injured While Manually Lifting Patients.

*Mamie Williams, MPH MSN FNP-BC and Melanie Swift, MD FACOEM
Vanderbilt Occupational Health Clinic, Nashville, TN*

Safe patient handling program development and implementation best practices abound in nursing literature. The Joint Commission and The American Nurses Association have weighed in on patient handling programs by developing patient handling standards. An assessment of patient handling programs post implementation, specifically effectiveness and impact on caregivers, is warranted. At Vanderbilt University Medical Center, a two-year assessment of caregivers injured while manually lifting patients despite a fully implemented safe patient handling program was completed. Respondents (n=116) were interviewed to determine perceived barriers to, as well as recommendations for, compliance with patient handling equipment use.

2013P012

Perceived Stress and Workplace Psychosocial Risk Factors: The Impact on Uruguayan Health-Care Professional's Health Related Quality of Life

*Micaela Reich, PhD, Maira Castro, RN, Giannella Cozzo, BPSy and Zoraida Fort, PhD
Universidad Católica del Uruguay, Montevideo, Uruguay*

Previous studies have demonstrated an increased impact on the healthcare professional's health related quality of life (HRQoL,) as they are exposed to specific work-related stressors and risk factors. This study reports on perceived stress, psychosocial risk, and HRQoL of Uruguayan Public Health emergency nurses and physicians.

We collected data from a sample of 200 Uruguayan healthcare professionals. Measures included: PSS; MOS-SF-12v2; ISTAS. Preliminary analyses have been conducted: frequencies; descriptors; mean differences; and correlations for scales items.

ANOVAs showed important gender, occupation and profession-based differences in HRQoL.

Results have implications for group-based tailored psychoeducational programs that specifically address this population's mental health and psychosocial needs.

2013P013

Reducing Needlesticks: Engaging the End User

*Joan Kowalczyk, BA/BSN RN CIC, Nancy Newman, Lucy Stinard, BSN RN, Linda Kleinhenz, MBA RN CEN COHN-S/CM, Jill Markowitz, MSN CRNP and Paul Terpeluk, DO MPH MA
Cleveland Clinic, Cleveland, OH*

In January 2012, the Product Evaluation Committee of a large midwestern tertiary care center recommended a Safety Syringe Committee investigate safer insulin and heparin needles. Members included Supply Chain, enterprise wide Occupational Health, Environmental Health & Safety, and nurse managers. Vendors were selected for a product trial on nursing units based on needlestick injury rate and participant interest. Users provided feedback via an on-line survey. The committee analyzed survey data and presented results to the Product Evaluation Committee. A vendor was selected based on survey results. Needlestick injuries declined during the product trial on the pilot units. Conversion to the selected product occurred in 2013.

2013P014

Thermal Stress On Occupational Health In Micro And Small Sized Industries of Punjab - Pakistan

Muhammad Salman Butt

Lund University Sweden, Lund, Sweden

Heat stress and related illnesses are more liable to develop among workers because of prolonged working hours and high metabolic rates under increased ambient temperature. A cross-sectional study on eight small and medium sized entrepreneurs in Punjab-Pakistan showed that the mean age of workers was 28.6 ± 10.5 years working for 8.8 ± 1.5 hours a day at a metabolic rate of 165-230 W/m² (ISO 7243 exertion level) with 0.5-2 hours rest. Results of this study revealed that workers are liable to have heat stress and related illnesses because of longer working hours, limited rest duration and high wet bulb globe temperature (indoor) exposure values.

pital reacted quickly to anticipate and mediate problems for patients, visitors and staff coping with the fires and smoke.

Departments were affected in unanticipated ways with air handling issues. Public Health recommended N95 masks for the very high particulate counts. Employee Health provided emergency training to several hundred people on fit testing and wearing N95 respirators. Staff were challenged by personal, respiratory issues, school and daycare closures and fire proximity issues. The community worked together to control panic and anxiety in this time of crisis. While our Employee Assistance Program usage was only slightly elevated, many employees requested consultation from employee health about how the fires and smoke had impacted them personally.

2013P015

Where there is Fire, there is Smoke and Smoke and Smoke

*Rosanne Gence, RN, Employee Health Coordinator
Central Washington Hospital, Wenatchee, WA*

In September 2012, lightning strike fires and windy weather set off a chain reaction of concerns for the Wenatchee Valley area. For weeks, the fire and smoke issues were profoundly problematic for humans and animals alike. Public health bulletins cautioned the local air quality as severely compromised, and hospitals, nursing homes, schools and businesses were impacted. Potential and actual loss of property, the unpredictable nature of multiple fires and smoke presence made life difficult for thousands of people. Central Washington Hos-

2013P016

Workplace needs in emergency departments – perceptions of health care workers

*Liya Lin, PhD Candidate MS RN, Cordia Chu, PhD, Professor
and David Bromwich, PhD
Griffith University, Brisbane, Australia*

The nature of work demands and conditions poses significant threats to occupational health and safety (OHS) among healthcare workers (HCWs) in emergency departments (EDs.) For an effective approach to risk reduction and health improvement, consideration of specific needs from the perceptions of HCWs is required. A cross-sectional study was conducted for interviews and focus group discussions. Three major themes emerged, including: the threat of violence from patients and their family members; work-related stress; and effectiveness of OHS management. These findings contribute to the program design and considerations regarding workplace health and safety for workers in EDs.



**Register for the
Conference Online at:
<https://www.aohp.org/Conference2013>**

SPECIAL EVENTS & HELPFUL INFORMATION

FRIDAY ANNUAL BUSINESS MEETING AND AWARD LUNCHEON

Join us at the annual business meeting and award luncheon on Friday, September 13 from 11:45 am to 1:45 pm. This luncheon meeting is included in your main conference registration. This special event recognizes winners of AOHP individual and chapter awards. Celebrate with the award winners and hear the latest news from AOHP board members. To attend, please make sure to check "I will attend" on the Registration Form.

WEDNESDAY OPENING RECEPTION

The reception will be held Wednesday, September 11 in the exhibit hall at the Hilton Orlando Lake Buena Vista. The event will start at 6:00 pm and will end at 8:00 pm. Discover new products, mingle with exhibitors and learn about new companies geared to make your professional life easier. Don't miss this opportunity to meet with the exhibitors, enjoy a few hours of networking, savor the munchies and have fun. This reception is sponsored by the Hilton Orlando Lake Buena Vista.

"SOLUTION SERIES" IN EXHIBIT HALL

The AOHP 2013 Conference Committee is offering an opportunity for exhibitors to demonstrate their products and services. The "Solution Series" will feature short (10-15 minute) sessions in a designated area of the exhibit hall for exhibitors to present and share their expertise directly with the conference attendees in a more controlled setting. The "Solution Series" will allow exhibitors the opportunity to tailor a professional presentation that meets the attendees' specific needs and interests. Come join us and learn more!

SCAVENGER HUNT

We will have a scavenger hunt during Wednesday, Thursday and Friday exhibit hours. The winner of the scavenger hunt will receive a free main conference registration for the AOHP 2014 National Conference in New Orleans.

THE NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH (NIOSH)

invites you to a special meeting scheduled for Thursday, September 12 from 1:00 – 1:25 pm during AOHP 2013 National Conference. Learn the answers to all of your questions about the NIOSH Occupational Health Safety Network (OHSN.) With input from AOHP and other stakeholders, NIOSH has developed the first modules of this secure, electronic surveillance system, which uses existing data to eliminate the need for double data entry. The current modules focus on: slips, trips and falls; musculoskeletal disorders related to patient handling; and workplace violence. Gain valuable insight on uploading your existing data, viewing the benchmarking capabilities and using the output graphs.

HELPFUL INFORMATION

- Before you travel, plan ahead.
Visit <http://aohp.orlandomeetinginfo.com> for more information.
- Let the hotel know if you will be arriving late when you make your hotel reservation. If your flight is delayed, inform the hotel as soon as possible to secure your booking.
- Take your expensive jewelry/valuables with you or put them in the hotel safe. Don't leave them in your room.
- View the agenda ahead of time. Make sure you know when and where the sessions/events will be held, and be prompt as a courtesy to the speaker and other attendees.
- Meeting rooms in the hotel are often too cold or too warm. Dress in layers, and bring sweaters/shawls and socks with you.
- There are restaurants and shopping areas within walking distance from the hotel. Make sure you bring a pair of comfortable walking shoes.
- Remember to bring lots of business cards. You will need the business cards for networking, exhibitors and door prize drawings.
- Relax, enjoy and have fun!

Important Dates

Early Bird Deadline: August 9, 2013

Hotel Group Rate Cut Off Date: August 21, 2013

**OHN Review Course (September 9 – 11, 2013):
Submit registration by Aug 1, 2013**

SPONSORS & EXHIBITORS

**Special thanks
to the following
organizations
that sponsored
our 2013 National
Conference:**

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Educational Grant
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*Agenda At-a-Glance
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As of May 14 2013

DISCLOSURE: Any and all commercial products or services displayed or advertised at the AOHP 2013 National Conference do not constitute endorsement by AOHP.

CONFERENCE COMMITTEE

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AMERICAN BOARD FOR OCCUPATIONAL HEALTH NURSES, INC.

DEMONSTRATE YOUR OCCUPATIONAL HEALTH EXPERTISE THROUGH CERTIFICATION

If you meet the criteria for any of the following exams and you seek a way to demonstrate your occupational health expertise, strengthen your occupational health qualifications, and/or enhance your employment marketability, consider taking an exam to earn a valuable American Board for Occupational Health Nurses, Inc. (ABOHN) credential!

Do you meet the COHN or COHN-S examination eligibility requirements?

Eligibility requirements for the COHN examination are:

- Active licensure as a registered nurse (RN), or an international equivalent; **and**

In the past five years:

- 3,000 hours of experience in occupational health nursing; **or**
- the completion of a certificate program in occupational health for academic credit.

Additional eligibility requirements necessary for the COHN-S examination are:

- Bachelor's degree or higher (it does not have to be a nursing degree); **and/or**
- the completion of a Master's degree level of education with a concentration in occupational health.

If you hold an active core certification, do you meet the Case Management (CM) examination eligibility requirements?

- 10 contact hours of case management related continuing education earned during the previous five years.

The ABOHN Safety Management (SM) credential was developed to provide certified OHNs with a mechanism that may be used to:

- Enhance their professional development;
- Demonstrate their safety role proficiencies; and
- Expand their safety related career opportunities.

If you hold an active core certification, do you meet the SM examination eligibility requirements?

- Current employment in a position that requires a minimum of 25% of the time, or 10 hours per week, to be spent conducting safety activities;
- 50 safety related contact hours of continuing education earned during the preceding five years; and
- 1,000 hours of safety related work experience during the preceding five years.



ABOHN offers its examinations throughout the year at more than 180 sites throughout the country. All ABOHN's examinations are computer based.

To learn more about ABOHN's credentials, visit our website at <https://www.abohn.org>. Here you can learn how to apply to take an exam or how to prepare for an exam, download a free examination handbook, purchase a certification self-assessment test (CSAT) and download an application.

What are the associated expenses?

• COHN/COHN-S Application Fee	\$150
• COHN/COHN-S Exam Fee	\$400
• Case Management Application Fee	\$150
• Case Management Exam Fee	\$250
• Safety Management Application Fee	\$150
• Safety Management Exam Fee	\$400

ABOHN RECEPTION

ABOHN invites certified and non-certified OHNs to attend our annual reception at the AOHP National Conference to honor certified occupational health nurses on September 13th at 6:00 pm in the Narcissus/Orange Blossom room of Hilton - Walt Disney World Hotel. Please join us to celebrate certified occupational nurses' outstanding achievements.

2013 MEMBERSHIP APPLICATION

TAX ID:
95-2741452



ASSOCIATION
OF OCCUPATIONAL
HEALTH PROFESSIONALS
IN HEALTHCARE

Thank you for your interest in the Association of Occupational Health Professionals in Healthcare (AOHP). The information you provide will be added to the AOHP membership database. Include either your business or home address, wherever you prefer association mailings to be sent.

Please complete and mail or fax this form with payment to: AOHP Headquarters,
109 VIP Drive, Suite 220, Wexford, PA 15090 Fax: 724-935-1560

Please list the AOHP member who invited you to join:

Last Name: _____ First Name: _____ MI: _____

Credential: _____ Employer: _____

Title: _____ Dept: _____

Employer Address: _____

City: _____ State: _____ Zip: _____ ☐ Check here if you don't want your information on the AOHP online Membership Directory.

Mailing Address (if different from Employer Address): _____

City: _____ State: _____ Zip: _____ Email: _____

Home Ph: _____ Work Ph: _____ Fax: _____

Is your hospital accredited? ☐ Yes ☐ No

If yes, by whom: _____

How did you hear about us? ☐ Internet ☐ Employer

☐ Direct Mailing ☐ Press Release ☐ LinkedIn

☐ FaceBook ☐ Twitter ☐ Other: _____

MEMBERSHIP STATUS*:

☐ Active: \$125 (may vote and hold office) (membership starts from Oct 1 2013 to Dec 31 2014)

☐ Student: \$50 – must enclose copy of valid student I.D.

(*Minimum 9 credit hours related to occupational health; non-voting and may not hold office)

☐ Retired: \$25 (previous active AOHP member; now non-working and retired; nonvoting and may not hold office)

The membership year is January 1 through December 31, 2014. By joining now, you get 15 months for the price of 12 months.

METHOD OF PAYMENT

☐ Check (make payable to AOHP) Mail to: AOHP Headquarters, 109 VIP Drive, Suite 220, Wexford, PA 15090

☐ Credit Card: ☐ Visa ☐ MasterCard ☐ American Express ☐ Discover

Card Number _____ Exp. Date _____ Cardholder Name _____ 3 or 4 Digit Security Code _____

Card Billing Address _____ City _____ State _____ Zip _____

Contact Name and phone number if there are questions about credit card _____

Select Local Chapter: You MUST indicate your choice of chapter. If in doubt, please choose the closest chapter in your region. These are the states currently represented in each chapter. This does not mean this is the chapter you must join. You have the choice of which chapter you would like to join. Please visit http://www.aohp.org/pages/about_aohp/region_map.html to view the region map.

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☐ CA, Northern
Northern CA

☐ CA, Southern
Southern CA, HI, NV

☐ Pacific Northwest, WA
AK, ID, MT, OR, WA

REGION 2

☐ Heart of America-KS City
AR, KS, MO, OK

☐ Houston Area
TX

☐ Rocky Mountain
AZ, CO, NE, NM, UT, WY

☐ Wisconsin
MN, ND, SD, WI

REGION 3

☐ Illinois
IA, IL

☐ Michigan
MI, OH

☐ Midwest States
IN, KY, TN

☐ Virginia
VA, WV

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Central PA

☐ PA Eastern
Eastern PA

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AL, LA, MS

☐ Florida
FL

☐ Georgia
GA

☐ North Carolina
NC

☐ South Carolina
SC

Join an AOHP National Committee.

Learn more at http://aohp.org/pages/about_aohp/aohp_committees.html.

☐ Finance ☐ Research ☐ National Conference ☐ Technology

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You will receive a membership card once your application has been processed. Thank you for your support.

The 2014 Annual Conference will be held on Sept 10 -13
at the Sheraton New Orleans Hotel in New Orleans, LA

September 11-14, 2012

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REGISTRATION FORM

PART 1

AOHP National Conference 2013
September 11 -14 ★ Orlando, FL

Must submit both part 1 and 2 for registration.

Last Name	First Name	AOHP Member ID # (if applicable)
Credential	Name (as you prefer it to appear on your badge)	
Employer	Department (if applicable)	
Street Address	Preferred Mailing address	☐ Home ☐ Work
City/State/Zip		
Daytime Phone	E-mail Address*	

*Registration confirmation will be sent via e-mail only. ☐ Please check here if you don't want your email address included in the attendee list.

BREAKOUT SESSIONS

To better prepare for your attendance, you must select your Breakout Session choices.
Refer to program agenda for selection.

FRIDAY SEPTEMBER 13, 2013

10:40 am – 11:40am (Please choose one)

- ☐ B003- Ergonomic Standards to Benefit Both Healthcare Workers & Patients
- ☐ B004- Managing FMLA So It Doesn't Manage You!
- ☐ B005- Injury Prevention- SPH & Movement Best Practices
- ☐ B006- OSHA in Healthcare
- ☐ B007- NIOSH's Update on OHSN

1:50 pm – 2:50 pm (Please choose one)

- ☐ B008- Developing Effective Policies & Procedures for SPH Program
- ☐ B009- Prescription Drugs in Healthcare Workers
- ☐ B010- Work-Related Injuries-Lessons Learned from OT Practice
- ☐ B011- Reducing Needlestick Injuries
- ☐ B012- Active Shooter-Healthcare: Readiness & Response

3:00 pm – 4:30 pm (Please choose one)

- ☐ B013- Toolkits & Educational Approaches for Improving Sharps Safety
- ☐ B014- Solutions for Surviving and Complying This Flu Season
- ☐ B015- OSHA Enforcement on Recordkeeping
- ☐ B016- Diversion of Controlled Substances from Healthcare Workplace
- ☐ B017- Identifying, Investigating & Responding to Diversion

FRIDAY, SEPTEMBER 13 - ANNUAL BUSINESS MEETING AND AWARD LUNCHEON

(For conference attendee only, included in your main conference registration, no additional charge)

Please check one:

- ☐ I will attend ☐ I will not attend

GUEST MEAL TICKET (for family or guest of registrant)

- ☐ \$20.00 Welcome Reception (Wednesday Evening)
☐ \$10.00 Breakfast each day (☐ Thursday ☐ Friday ☐ Saturday)

Guest Name for Badge: _____

Guest Name for Badge: _____

BECOME A MEMBER TODAY AND TAKE ADVANTAGE OF THE MEMBER RATES!

A one-year membership to AOHP is available to those paying a non-member main conference registration fee.
Please complete membership application on page 18.

CANCELLATION/REPLACEMENT POLICY

Refunds, less a 20% processing fee per registrant, will be granted for cancellations received in writing on or before Monday, August 19, 2013. **No refunds will be made after this date.** Registration substitutions may be made if requested in writing before Friday, September 6, 2013. AOHP reserves the right to cancel/change any general session, pre-conference workshop and breakout session. All applicable refunds will be issued following the close of the conference. Refunds will not be given for no-shows.

REGISTRATION FORM

PART 2

Register for the Conference Online at:

<https://www.aohp.org/Conference2013>

Must submit both part 1 and 2 for registration.

REGISTRATION FEES

Your current membership will be verified upon receipt. Students are defined as full-time students (minimum of 9 credit hours). Must submit registration by mail or fax with payment and student ID.

	Postmarked on or Before Aug. 9, 2013	Postmarked After Aug. 9, 2013	On-Site Registration
MAIN CONFERENCE (Thursday – Saturday)			
Member	☐ \$445	☐ \$570	☐ \$605
Non-Member	☐ \$570	☐ \$695	☐ \$730
Student	☐ \$210	☐ \$210	☐ \$280
DAILY FEES (Thursday or Friday)			
Member	☐ \$230	☐ \$280	☐ \$305
Non-Member	☐ \$280	☐ \$330	☐ \$355
Student	☐ \$110	☐ \$110	☐ \$145
SATURDAY			
Member	☐ \$130	☐ \$135	☐ \$180
Non-Member	☐ \$155	☐ \$180	☐ \$205
Student	☐ \$70	☐ \$70	☐ \$90

If daily fee selected, indicate day(s) you will attend:

☐ Thursday ☐ Friday ☐ Saturday

☐ I would like to order a 2013 Conference Notebook Syllabus at \$48, the discounted price for conference registrants only.

☐ I would like to order an additional 2013 Conference CD Syllabus at \$15, the discounted price for conference registrants only.

TOTAL CONFERENCE FEE: \$ _____

METHOD OF PAYMENT

☐ Check (payable to AOHP) ☐ Visa ☐ MC ☐ AmEx ☐ Discover

Card Number _____ Exp. Date _____

Cardholder Name _____ 3 or 4 digit security code _____

Card Billing Address _____

City _____ State _____ Zip _____
(Note: Credit card cannot be processed without legible, complete and correct credit card address.)

Contact Name and phone number if there are questions about credit card

Remit payment with Registration Form to:

AOHP, 109 VIP Drive, Suite 220, Wexford, PA 15090

Payment must accompany registration form. There will be a \$25 charge for returned checks. **DO NOT fax this form if payment by check.**

Only registration form with credit card payment can be faxed for processing. Fax: 724-935-1560 *Registration confirmation will be sent via e-mail only.

Payment must accompany registration form. Questions about Registration? Please call AOHP Headquarters 800-362-4347 or email info@aohp.org.

OHN REVIEW COURSE (September 9 – 11, 2013) Submit registration by Aug 1. Course will be cancelled if minimum participation not achieved.

	Postmarked on or Before Aug. 9, 2013		Postmarked After Aug. 9, 2013	
OHN Review Course (2 ½ day)	Member	NonMember	Member	NonMember
	☐ \$599	☐ \$659	☐ \$689	☐ \$759

NO On-site
Registration will be accepted

WORKSHOPS (Wednesday, September 11, 2013) AOHP reserves the right to cancel any Pre-conference Workshop if the minimum registration is not met. To avoid a \$25 administrative charge, any change in workshop selection must be sent to AOHP Headquarters in writing by August 19, 2013.

No meal service provided at any pre-conference workshops.

	Postmarked on or Before Aug. 9, 2013			Postmarked After Aug. 9, 2013			On-site Registration		
	Member	NonMember	Student	Member	NonMember	Student	Member	NonMember	Student
W001 – Getting Started (8 hour workshop)	☐ \$295	☐ \$335	☐ \$135	☐ \$400	☐ \$440	☐ \$135	☐ \$425	☐ \$465	☐ \$185
W002 – Practical Guide for SPH Program (4 hour workshop)	☐ \$125	☐ \$145	☐ \$65	☐ \$175	☐ \$245	☐ \$65	☐ \$200	☐ \$220	☐ \$95
W003 – Disruptive Behavior in Healthcare (4 hour workshop)	☐ \$125	☐ \$145	☐ \$65	☐ \$175	☐ \$245	☐ \$65	☐ \$200	☐ \$220	☐ \$95
W004 – Workers' Compensation Claims (2 hour workshop)	☐ \$75	☐ \$90	☐ \$35	☐ \$100	☐ \$125	☐ \$35	☐ \$135	☐ \$155	☐ \$65
W005 – Job Descriptions, Functions & Forms (2 hour workshop)	☐ \$75	☐ \$90	☐ \$35	☐ \$100	☐ \$125	☐ \$35	☐ \$135	☐ \$155	☐ \$65
W006 – Promoting Employee & Patient Safety (2 hour workshop)	☐ \$75	☐ \$90	☐ \$35	☐ \$100	☐ \$125	☐ \$35	☐ \$135	☐ \$155	☐ \$65
W007 – Six Steps to Employee Accident Investigation (4 hour workshop)	☐ \$125	☐ \$145	☐ \$65	☐ \$175	☐ \$245	☐ \$65	☐ \$200	☐ \$220	☐ \$95
W008 – A Comprehensive Update on TB Screening (4 hour workshop)	☐ \$125	☐ \$145	☐ \$65	☐ \$175	☐ \$245	☐ \$65	☐ \$200	☐ \$220	☐ \$95
W009 – Design a Hazardous Drug Medical Surveillance Program (2 hour workshop)	☐ \$75	☐ \$90	☐ \$35	☐ \$100	☐ \$125	☐ \$35	☐ \$135	☐ \$155	☐ \$60
W010 – Enhance Your Case Management Services (2 hour workshop)	☐ \$75	☐ \$90	☐ \$35	☐ \$100	☐ \$125	☐ \$35	☐ \$135	☐ \$155	☐ \$60
W011 – Employee Wellness Program (2 hour workshop)	☐ \$75	☐ \$90	☐ \$35	☐ \$100	☐ \$125	☐ \$35	☐ \$135	☐ \$155	☐ \$60
W012 – "How to" Manual for Ensuring Staff Well-Being (2 hour workshop)	☐ \$75	☐ \$90	☐ \$35	☐ \$100	☐ \$125	☐ \$35	☐ \$135	☐ \$155	☐ \$60

AGENDA AT A GLANCE

MONDAY-WEDNESDAY September 9 – 11, 2013 OHN Review Course

Sept 9, Mon 9:00 am – 5:30 pm
 Sept 10, Tue 8:30 am – 5:30 pm
 Sept 11, Wed 8:30 am – 2:00 pm

Occupational Health and Safety Principles & Nursing Certification Review

Lunch not included

WEDNESDAY September 11 – Pre-conference Workshops

8:00 am
 – 5:30 pm
 (8-hour WS)

Workshop W001 Basic Getting Started in Occupational/Employee Health

Lunch not included

Denise Knoblauch, BSN RN COHN-S/CM, Delynn Lamott, MS RN COHN-S and Christine Pionk, MS RN COHN-S

8:00 am
 – 12:10 pm
 (4-hour WS)

Workshop W002 Advanced A Practical Guide for Developing, Maintaining and Enhancing Your Safe Patient Handling Program

Catherine Gouvin, OTR/L CHT CSPHP and Kent Wilson, CIE CSPHP

Workshop W003 Advanced Disruptive Behavior in Healthcare: Zero Tolerance!

Stephen A. Burt

8:00 am – 10:00 am
 (2-hour WS)

Workshop W004 Intermediate Workers' Compensation Claims – Are They Real or Fraudulent?

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

Workshop W005 Intermediate Putting it All Together: Job Descriptions, Essential Job Functions and Physical Requirements Forms per Job

Richard I. McCandless, EdD PT CEES CSFA CSPHP

10:15 am – 12:15 pm
 (2-hour WS)

Workshop W006 Advanced Promoting Employee and Patient Safety through Fitness for Duty Drug Testing and Recommended Post-Exposure Prophylaxis

Jay D. Harper, MD MPH and Jean Davis, EdD FNP CNS

1:15 pm – 5:25 pm
 (4-hour WS)

Workshop W007 Advanced Six Steps to Effective Employee Accident Investigation

Stephen A. Burt

Workshop W008 Intermediate Eager for IGRA? A Comprehensive Update on Tuberculosis Screening Approaches

Wendy Thanassi, MD MA, Scott W. Lindquist, MD MPH and Curtis Chow, FNP PA-C

1:15 pm – 3:15 pm
 (2-hour WS)

Workshop W009 Intermediate Designing a Hazardous Drug Medical Surveillance Program

Lee S. Newman, MD and Adrienne Wolf, MPH

Workshop W010 Intermediate Enhance Your Case Management Services by Partnering with Others

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

3:30 pm – 5:30 pm
 (2-hour WS)

Workshop W011 Basic Employee Wellness...How to Develop a Successful and Creative Program

JoAnn Shea, MS ARNP COHN-S, Shelly Scamardo, BS and Bethany Brown, BSN RN

Workshop W012 Basic Taking Care of Ourselves While We Take Care of Others: In Search of the How-To Manual for Ensuring Staff Well-Being

Lori Schwartz, PhD

6:00 pm – 8:00 pm

Reception at Exhibition Hall

THURSDAY September 12 – General Sessions

7:15 am – 7:50 am

BREAKFAST with Exhibitors

7:50 am – 8:10 am

Welcome

National Conference Chair Carla Stevens, BSN RN
 AOHP Executive President Dee Tyler, RN COHN-S FAAOHN

8:10 am – 9:40 am (1.5-hour GS)	Geoff Kelafant Memorial Lecture: KEYNOTE SPEAKER A001 <i>Intermediate</i> Dollars & Sense: Making the Business Case for Optimizing Hospital Safety Performance Deirdre McCaughey, PhD MBA
9:40 am – 10:05 am	BREAK and Visit Exhibitors (Door Prize Drawing)
10:05 am – 11:05 am (1-hour GS)	A002 <i>Intermediate</i> The Occupational Health Professional's Guide to Total Worker Health™ L. Casey Chosewood, MD
11:10 am – 12:10 pm (1-hour GS)	A003 <i>Advanced</i> Occupational Hazardous Drug Exposures Among Healthcare Workers Thomas H. Connor, PhD
12:15 pm – 12:55 pm	Solution Series at Exhibition Hall Visit Exhibitors
12:55 pm – 1:35 pm	Lunch Box will be available at the Exhibition Hall (Door Prize Drawing)
1:00 pm – 1:25 pm	OHSN Meeting
1:35 pm – 3:05 pm (1.5-hour GS)	A004 <i>Intermediate</i> Improving Patient and Worker Safety: Implications for Occupational Health Professionals MaryAnn Gruden, MSN CRNP NP-C COHN-S/CM, Bobbi Jo Hurst, BSN RN COHN-S SGE, Kerry Eaton, MS RN, Eileen Storey, MD MPH and Barbara I. Braun, PhD
3:10 pm – 4:10 pm (1-hour GS)	A005 <i>Intermediate</i> Ethical and Practical Issues in Healthcare Worker Influenza Vaccination Amy J. Behrman, MD
4:15 pm – 5:15 pm (1-hour GS)	A006 <i>Intermediate</i> BBP Exposure Prevention: U.S. Incidence, Effective Actions & EXPO-STOP Survey Results Linda Good, PhD RN COHN-S and Terry Grimmond, FASM BAgSc GrDpAsEd
	DINNER ON YOUR OWN

FRIDAY

September 13 – General & Breakout Sessions

7:15 am – 8:00 am	BREAKFAST with Exhibitors (Door Prize Drawing) Tables for Regions to meet and greet
8:00 am – 9:00 am (1-hour GS)	B001 <i>Intermediate</i> The Test and Threat Era of Hepatitis C: Expanding the Individual and Public Health Benefits of HCV Treatment John W. Ward, MD
9:05 am – 10:05 am (1-hour GS)	B002 <i>Advanced</i> Multi-Faceted Solutions for Changing Opioid Practice Kathryn L. Mueller, MD MPH FACOEM
10:05 am – 10:40 am	Break – Last Visit with Exhibitors

RECEIVE A **15% DISCOUNT** WHEN A MINIMUM OF 5 EMPLOYEES FROM THE SAME ORGANIZATION REGISTER AT THE SAME TIME.
MUST SUBMIT BY MAIL OR FAX WITH PAYMENT.

10:40 am – 11:40 am (1-hour BO)	B003 <i>Intermediate</i> Using Ergonomic Standards to Benefit Both Healthcare Workers and Patients Sandra Swan, MS RN COHN-S/CM CSPHP	B004 <i>Advanced</i> FMLA - Managing FMLA So It Doesn't Manage You! JoAnn Shea, MS ARNP COHN-S	B005 <i>Basic</i> Injury Prevention Through Safe Patient Handling and Movement Best Practices Amber Perez, LPN BBA/M CSPHA	B006 <i>Basic</i> OSHA in Healthcare: Have We Finally Got Their Attention? Scott Harris, PhD MPH	B007 <i>Intermediate</i> NIOSH's Update on the Occupational Health Safety Network Ahmed Gomaa, MD ScD MSPH, Sara Luckhaupt, MD MPH and Susan Sprigg, BSN RN
11:45 pm – 1:45 pm	LUNCH – Annual Business Meeting and Luncheon				
1:50 pm – 2:50 pm (1-hour BO)	B008 <i>Intermediate</i> Developing Effective Policies & Procedures for Your Safe Patient Handling Program Kent Wilson, CIE CSPHP	B009 <i>Intermediate</i> Prescription Drugs in Healthcare Workers: A Guide for Screening and Prevention Peter P. Greaney, MD	B010 <i>Intermediate</i> Work-Related Injuries in Healthcare – Lessons Learned from Occupational Therapy Practice Andrea Dyrkacz, OT Reg(Ont) and Lonita Mak, OT Reg(Ont)	B011 <i>Intermediate</i> Reducing Needlestick Injuries from Active Safety Devices: A Passive Safety-Engineered Device Trial Ashleigh Goris, MPH BSN RN CIC and Nancy Gemeinhart, MHA RN CIC	B012 <i>Intermediate</i> Active Shooter – Healthcare: Readiness and Response Lisa B. Pryse, CHP, CPP
3:00 pm – 4:30 pm (1.5-hour BO)	B013 <i>Intermediate</i> Look Sharp, Without Getting Stuck-Toolkits and Educational Approaches for Improving Sharps Safety Leslie S. Zun, MD MBA, Mary J. Ogg, MSN RN CNOR and Donna A. Ford, MSN RN-BC CNOR	B014 <i>Intermediate</i> Don't Be "Blue," Let's Talk Flu - Solutions for Surviving and Complying This Flu Season Beverly Hagar, BSN RN COHN-S, Delynn Lamott, MS RN COHN-S, Desaree Vina, RN CPSO CHSP and Patricia Kinman, MSN FNP-BC	B015 <i>Intermediate</i> OSHA's Enforcement Crackdown on Recordkeeping: Special Emphasis and Common Misunderstandings Stephen A. Burt	B016 <i>Advanced</i> Diversion of Controlled Substances from the Healthcare Workplace - A Multi-Victim Crime Keith H. Berge, MD and Kevin R. Dillon, PharmD RPh	B017 <i>Advanced</i> How We Care for Our Own: Identifying, Investigating and Responding to Diversion Nichole L. Capitanio, LISW-S CEAP, and Susan I. Wilson, RN CCRN
4:40 pm – 5:30 pm	National Committee Information Meetings 1) National Conference Committee 4) Technology Committee 2) Government Affairs Committee 5) Research Committee 3) Continuing Education Committee 6) Finance Committee				
6:00 pm	Reception for COHNs, non-COHNs and those sitting for examination Hosted by ABOHN				



SATURDAY September 14 – General Sessions	
7:15 am – 7:45 am	BREAKFAST Secured room available for luggage
7:45 am – 8:45 am (1-hour GS)	C001 Basic <i>Making Magic Happen: Worksite Wellness, a Key Building Block to Improving Health and Productivity of the National Workforce</i> Lee Newman, MD MA FCCP FACOEM and Liliana Tenney, MPH
8:50 am – 10:20 am (1.5-hour GS)	C002 Advanced <i>You Can't Train Away Needlestick Injuries- Strategies for Driving Sustained Needlestick Injury Reductions</i> Doris L. Dicristina, MS BSN RN COHN-S/CM and T. Warner Hudson, MD FACOEM FAAFP
10:20 am – 10:35 am	BREAK
	REMINDER: Checkout & Luggage to Secure Area by 11:00
10:35 am – 11:35 am (1-hour GS)	C003 Advanced <i>Workplace Violence – Being Safe at Work is Everyone's Right</i> Karen Karwowski, MSN BSN RN Ed CHSP
11:40 am – 12:40 pm (1-hour GS)	C004 Basic <i>The Other End of the Stethoscope</i> Marcus Engel, MS
12:40 pm – 12:50 pm	CLOSING and EVALUATIONS

**REMINDER: CHECKOUT & LUGGAGE
TO SECURE AREA BY 11:00 AM**

DISCLOSURE

Any and all commercial products or services displayed or advertised at the AOHP 2013 National Conference do not constitute endorsement by AOHP.



OHN REVIEW COURSE

OCCUPATIONAL HEALTH AND SAFETY PRINCIPLES & NURSING CERTIFICATION REVIEW

SEPTEMBER 9 - 11, 2013

EARLY BIRD DISCOUNT

IF REGISTERED AND PAID BY AUGUST 9, 2013

Member: \$599

Nonmember: \$659

FEES IF REGISTERED AND PAID AFTER AUGUST 9, 2013

Member: \$689

Nonmember: \$759

Sept 9, Mon 9:00 am – 5:30 pm

Sept 10, Tue 8:30 am – 5:30 pm

Sept 11, Wed 8:30 am – 2:00 pm

State of the art information in the field of occupational and environmental health and safety; Comprehensive workbook/resource manuals and classroom materials; Test taking techniques and strategies for examination preparation; Written tests prior, during, and at conclusion of seminar; Participative lectures.

Management/Coordinator/Consultant Functions:

Provide advice and manage Occupational Health and Safety Programs, services and staff

Clinical Functions In OHN Practice:

Clinical care, environmental relationships, counseling, client advocacy, and change agent

Advisor/Educator Functions In OHN Practice:

Health protection, health promotion, health education, and research

WHO SHOULD ATTEND?

Designed For Nurses Who Are:

- Employed full or part-time in the field of Occupational Health
- Preparing for American Board for Occupational Health Nurses Certification Exam: COHN or COHN-S
- Considering entering Occupational Health Nursing field; Setting up Occupational Health Programs

Valuable Information For:

- Case Managers • Risk Managers • Safety Consultants • Physicians
- Workers' Compensation Claims Personnel
- Directors/Administrators of Occupational Health Facilities

FACULTY

Annette B. Haag, MA, RN, COHN-S/CM, FAAOHN

President, Annette B. Haag and Associates, Past president of the

American Association of Occupational Health Nurses, Trustee for the American Society of Safety Engineers Foundation. With over 40 years of experience, she is nationally and internationally recognized in the field of health and safety.

ACCREDITATION

Provider approved by the California Board of Registered Nursing, Provider #9971 for 22.5 contact hours.

A confirmation letter and pretest will be emailed to you prior to the event. *Bring completed pretest to class.*

CONTACT

Annie Wiest at AOHP Headquarters

724-935-1531 • info@aohp.org

LUNCH NOT INCLUDED. Submit your registration before August 1, 2013. The course will be cancelled if we do not achieve the minimum number of participants by this date.



ADDITIONAL RESOURCES SUGGESTED FOR THE COHN/ COHN-S CERTIFICATION EXAM

- AAOHN Core Curriculum for Occupational and Environmental Health Nursing, 3rd edition (bring to class)
- AAOHN Core Curriculum Study Guide, 3rd edition (out of print; bring to class if you have a copy)
- AAOHN Journal and Workplace Health and Safety Case Management Reference, 2nd edition
- ABOHN Certification Self Assessment Test (CSAT)

To Order:

AAOHN—800-241-8014 / www.aaohn.org

ABOHN—888-842-2646 / www.abohn.org

CONFERENCE ABSTRACTS

W001 September 11, 2013
Wednesday 8:00 am - 5:30 pm

8-hour Workshop (Lunch is not included.)

– Level: Basic

Title: Getting Started in Occupational/Employee Health

Presenters: *Denise Knoblauch, BSN RN COHN-S/CM, Delynn Lamott, MS RN COHN-S and Christine Pionk, MS RN COHN-S*

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. Formulate strategies to utilize health teaching in infection prevention and control, and safety.
6. Assess 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.

Speaker Bios:

Denise Knoblauch is a Case Manager in Occupational Health with more than 20 years of experience 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, and 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-



B

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 focused on reducing injuries via nutritional education in the housekeeping department. She is a board certified Occupational Health Nurse Specialist and Case Manager from ABOHN.

Delynn Lamott is currently employed as a Total Quality Manager overseeing Infection Control and Associate Health at Mount Carmel New Albany Surgical Center. She has more than 10 years of experience in occupational/employee health, including the start-up and development of the WorkWell Jackson Center for Occupational Medicine. She has co-authored and authored six articles in the AOHP Journal and has presented at several past AOHP national conferences for "Getting Started in Employee Health," "Success Story: Implementing Change in the Pre-Employment Process" and "Maximizing Your Leadership Skills." Lamott was President of the Michigan AOHP Chapter and Region 3 Director for AOHP from 2006 - 2010.



Christine Pionk has worked in a hospital occupational health setting as a Nurse Practitioner for 22 years. Her responsibilities include evaluation and treatment of work related injuries/illnesses and evaluation of selected primary care injuries/illnesses. She has been a member of several committees, including the Infection Control Committee and Sharps Task Force. She also precepts graduate nursing students in the Primary Care Nursing Program. Providing care for the caregivers continues to be an extremely rewarding role!



W002 September 11, 2013
Wednesday 8:00 am - 12:10 pm

4-hour Workshop – Level: Advanced

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

Presenters: *Catherine Gouvin, OTR/L CHT CSPHP and Kent Wilson, CIE CSPHP*

Topic Overview: This workshop will offer recommendations and advice from qualified professionals experienced in implementing and sustaining a Safe Patient Handling program (SPH) from the perspectives of the employer, consultant and vendor. Discussion will be targeted to 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,

A

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 planning, implementing and sustaining a Safe Patient Handling (SPH) program.
2. Articulate key elements to include in SPH policy and procedure.
3. Conduct reliable and valid risk assessments and control selections.
4. Identify practical next steps to address existing SPH challenges.

Speaker Bios:

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 in-patient 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 past President of the Association of Safe Patient Handling Professionals.



**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.*

W003 September 11, 2013
Wednesday 8:00 am - 12:10 pm
4-hour Workshop – Level: Advanced

A

Title: Disruptive Behavior in Healthcare: Zero Tolerance!

Presenter: Stephen A. Burt, BS

Topic Overview: Healthcare leaders and caregivers have known for years that intimidating and disruptive behaviors are a serious problem. Verbal outbursts, condescending attitudes, refusing to take part in assigned duties and physical threats all create breakdowns in the teamwork, communication and collaboration necessary to deliver patient care. The Institute for Safe Medication

Practices found that 40 percent of clinicians have kept quiet or remained passive during patient care events rather than question a known intimidator. The Joint Commission requires hospitals and other organizations to have a code of conduct that defines disruptive behavior and a process to address such behavior. The new Standard is coded LD.03.01.01, EP 4, EP 5, and became effective January 1, 2009. Unfortunately, many hospitals are struggling to comply with these new mandates. EP 4 states “The hospital/organization has a code of conduct that defines acceptable and disruptive and inappropriate behaviors.” EP 5 stipulates that “Leaders create and implement a process for managing disruptive and inappropriate behaviors.”

Objectives:

1. Review the 10 elements of performance for The Joint Commission Standard for disruptive behavior.
2. Explain the negative effects that undesirable behavior can have on healthcare.
3. Develop legal strategies and a workable process to address issues of disruptive behavior at any level.

Speaker Bio:

Stephen A. Burt is 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, as Corporate Director of Environmental Health for Carilion Healthcare System (Roanoke, VA,) he was responsible for OSHA, EPA and Joint Commission compliance and was awarded the prestigious American Hospital Association's Phoenix Award. During this time, he served as non-legislative appointee to the Joint Legislative Administrative Review Commission (JLARC.) Most recently, he served two years as the Corporate Administrator of Employee Safety for Inova Health System in Falls Church, VA, with responsibility in employee health and for OSHA compliance. Burt conducts more than 30 full-day OSHA, HIPAA and employee health seminars annually for the University of North Carolina, Duke University, East Carolina University, Association of Occupational Health Professionals in Healthcare, the Virginia Hospital and Healthcare Association, and the American Hospital Association, among others. He is a member of the Government Affairs National Committee and is the Past Executive Vice President of AOHP.



W004 September 11, 2013
Wednesday 8:00 am - 10:00 am
2-hour Workshop – Level: Intermediate

I

Title: Workers' Compensation Claims – Are They Real or Fraudulent?

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

Topic Overview: Workers' compensation claims can be viewed in a very negative way. About 80 percent of claims are real, and

approximately 20 percent are fraudulent. Claims management is critical in the process to determine compensability. Fraudulent claims are on the rise in organizations today, and administrators are looking to the occupational health professional for education and guidance on how to identify current fraudulent claims and how to avoid future ones. Participants will have some “take-aways” from the class to implement within their workplaces.

Objectives:

1. Recognize three issues resulting in fraudulent workers' compensation claims.
2. Identify “red flags” of fraudulent claims.
3. List two areas the occupational health professional can utilize to prove a fraudulent claim.

Speaker Bio:

Barb Maxwell is a well known speaker and subject matter expert at the local, state and national levels for occupational health professionals in numerous professional organizations. She currently oversees the operations of 15 acute care facility Occupational/Employee Health departments, as well as 10 free-standing Company Care clinics. She is Past President of FSAOHN, Inc. and is a fellow through AAOHN. Maxwell received her RN from St. Luke's Hospital School of Nursing, Kansas City, MO, and her bachelor's degree 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*.



W005 September 11, 2013
Wednesday 8:00 am - 10:00 am
2-hour Workshop – Level: Intermediate

I

Title: Putting It All Together: Job Descriptions, Essential Job Functions and Physical Requirements Forms per Job

Presenter: Richard I. McCandless, EdD PT CEES CSFA CSPHP

Topic Overview: Imprecise or inexact job descriptions can be detrimental to the employer. Employers must be able to list essential job functions for each job description, as well as to identify and acknowledge physical requirements for each job so that expectations can be properly communicated or tested upon hire or return-to-work. This presentation will take participants through the process of: performing a Job/Safety Analysis; developing a list of Essential Job Functions sentences; designing an appropriate Physical Requirements Form; and identifying Essential and Nonessential Job Functions matches.

Objectives:

1. Recognize the importance of a Job/Safety Analysis per job.
2. Understand the importance of and the ability to write Essential Job Functions (EIF) sentences.

3. Illustrate how to tailor a Physical Requirements Form to fit the specific job.
4. Analyze how to Match/ No-match EIF specifics to the Physical Requirements Form.

Speaker Bio:

Dr. Richard I. McCandless, a practicing Physical Therapist for 45 years, is also a Certified Ergonomic Evaluation Specialist, Certified Specialist in Functional Assessment and a Certified Safe Patient Handling Professional. He holds an Advanced Safety Certificate from the National Safety Council and has been an Accident and Illness Prevention Service Provider for the U.S. Department of Labor for four years. McCandless is a Retired Associate Professor from Slippery Rock University, Retired USAR Lieutenant Colonel/Army Medical Specialist Corps and holds a Doctorate in Higher Education from the University of Pittsburgh.



W006 September 11, 2013
Wednesday 10:15 am - 12:15 pm
2-hour Workshop – Level: Advanced

A

Title: Promoting Employee and Patient Safety through Fitness for Duty Drug Testing and Recommended Post-Exposure Prophylaxis

Presenters: Jay D. Harper, MD MPH and Jean Davis, EdD FNP CNS

Topic Overview: Effective medication management is vital to protecting employees and promoting high quality patient care. This three-part presentation will review key areas for occupational/employee health professionals to address related to medication management, including drug diversion and post-exposure prophylaxis. With the increasing prevalence of drug diversion in healthcare workers, a comprehensive Fitness For Duty drug testing policy can help to deter diversion and provide appropriate, timely interventions when diversion is identified. New guidelines from the U.S. Public Health Service provide updated recommendations for the management of blood and body fluid exposures and post-exposure prophylaxis. The workshop will conclude with a question and answer session and panel discussion led by all three speakers.

Session I: Drug Diversion in Healthcare Workers: Understanding and Controlling the Risks to Patients (40 min)

Presenter: Jay D. Harper, MD MPH

Topic Overview: Drug diversion is being recognized with increasing frequency in healthcare workers who have unobserved access to prescription-type addictive substances. Addicted healthcare workers who are diverting drugs from the workplace pose risks to themselves, patients, co-workers and employers. A system incorporating a multidisciplinary approach should be in place to deter any diversion and intervene when it occurs. Part of

this approach is a comprehensive Fitness For Duty drug testing policy which includes reasonable suspicion criteria, procedures for drug and alcohol testing, EAP (employee assistance program) and follow-up issues such as last-chance agreements and/or licensing agents reporting. A recently recognized issue is the transmission of hepatitis C virus from HCV infected healthcare workers to patients through drug diversion.

Objectives:

1. Describe the elements of a Fitness For Duty policy.
2. Discuss methods to observe and deter drug diversion.
3. Explain urine drug testing for healthcare workers.
4. Understand the implications of a positive (Hepatitis) HCV healthcare worker involved in diversion.

Speaker Bio:

Dr. Jay Harper is the Medical Director for Employee Health at UPMC, a 55,000 employee hospital system with 20 academic, community and specialty hospitals. He is board certified in Occupational Medicine and was formerly the Clinical Director of Occupational and Environmental Medicine at the University of Pittsburgh Occupational Medicine Residency Program. He has worked exclusively in employee health for the past 10 years. He has worked as a certified Medical Review Officer for more than 15 years and has been extensively involved with both federally regulated and non-regulated drug testing during that time.

Session II: Updated Guidelines for the Management of Occupational Exposures to HIV and Recommendations for Post-Exposure Prophylaxis (40 min)

Presenter: *Jay D. Harper, MD MPH*

Topic Overview: U.S. Public Health Service guidelines for the management of occupational exposures to bloodborne pathogens were last published in 2001, with an update for management of exposures to HIV and treatment recommendations provided in 2005. New guidelines for HIV post-exposure prophylaxis have been published in 2013. This presentation will include a discussion of these changes and provide a review of the HIV PEP guidelines in general. Topics will include new medication recommendations, discussion of unknown sources, PEP use in pregnancy, rapid HIV tests and the “window period.” Increased emphasis on follow-up for those taking PEP, addressing side effects and toxicity, and the determination to continue medications with unknown sources, will also be discussed. Illustrative cases will be utilized throughout the presentation.

Objectives:

1. Examine the 2013 guidelines for HIV post-exposure prophylaxis (PEP).
2. Understand reasons for the changes recommended in the 2013 guidelines.
3. Discuss issues which have been clarified in the new guidelines.

Speaker Bio:

Dr. Jay Harper is the Medical Director for Employee Health at UPMC, a 55,000 employee hospital system with 20 academic, community and specialty hospitals. He is board-certified in Occupational Medicine and was formerly the Clinical Director of Occupational and Environmental Medicine at the University of Pittsburgh Occupational Medicine Residency Program. He has worked exclusively in employee health for the past 10 years and provides medical management for bloodborne pathogen exposures for UPMC employees.

Session III: Post-Exposure Prophylaxis (PEP): The Latest Guidelines and Evidence (30 min)

Presenter: *Jean Davis, EdD FNP CNS*

Topic Overview: This presentation provides information on changes in recommended post-exposure prophylaxis for employees exposed to patients' blood or body fluids. The new CDC guidelines for post-exposure prophylaxis after a blood or body fluid exposure will be presented. Defined levels of exposure will be reviewed. Post-exposure follow-up lab work recommendation changes for HIV, HBV and HCV exposure monitoring will be presented. Additionally, the timing and lab work to monitor for specific prophylactic medications will be discussed.

Objectives:

1. Identify the latest guidance for treating the blood or body fluid exposed employee.
2. Recognize the first line treatment options for the blood or body fluid exposed employee and what baseline labs are needed to initiate those options.
3. Review the recommended lab work post-exposure and post-initiation of prophylactic medications, as well as the timing of each.

Speaker Bio:

Dr. Jean Davis is a Nurse Practitioner and Clinical Nurse Specialist in full-time employee health practice. Her expertise in the area of community health, including occupational health, is based on her clinical nurse specialist master's preparation in community health from Rutgers University, as well as her years of clinical practice and teaching in this specialty. Applying the latest and best evidence to her clinical practice, she provides optimal care for her employees exposed to blood and/or body fluids. Primary prevention is of utmost importance, so she also has served on committees to determine the optimal equipment to prevent exposures and advocates for the manufacture and use of safer sharps in healthcare.



Session IV: Group Discussion, Q&A (10 min)

W007 September 11, 2013
Wednesday 1:15 pm - 5:25 pm
4-hour Workshop – Level: Advanced

A

Title: Six Steps to Effective Employee Accident Investigation

Presenter: Stephen A. Burt

Topic Overview: At the completion of this workshop, participants will be able to utilize a six-step process to develop an effective employee accident investigation program that will help to identify root causes, prescribe appropriate corrective measures, and implement performance metrics to ensure a safer workplace. By learning the basic elements of an accident investigation, participants will understand investigation strategy, witness questioning, evidence gathering, critical decision points and effective, legal documentation.

Objectives:

1. Utilize a six-step process for an effective employee accident investigation program to ensure a safer workplace.
2. Understand investigation strategy, witness questioning, evidence gathering, critical decision points and effective, legal documentation.
3. Investigate employee accidents using root cause analysis to eliminate work-related factors and potentially reduce future injuries and workers' compensation claims.

Speaker Bio:

Stephen A. Burt is 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, as Corporate Director of Environmental Health for Carilion Healthcare System (Roanoke, VA,) he was responsible for OSHA, EPA and Joint Commission compliance and was awarded the prestigious American Hospital Association's Phoenix Award. During this time, he served as non-legislative appointee to the Joint Legislative Administrative Review Commission (JLARC.) Most recently, he served two years as the Corporate Administrator of Employee Safety for Inova Health System in Falls Church, VA, with responsibility in employee health and for OSHA compliance. Burt conducts more than 30 full-day OSHA, HIPAA and employee health seminars annually for the University of North Carolina, Duke University, East Carolina University, Association of Occupational Health Professionals in Healthcare, the Virginia Hospital and Healthcare Association, and the American Hospital Association, among others. He is a member of the Government Affairs National Committee and is the Past Executive Vice President of AOHP.



W008 September 11, 2013
Wednesday 1:15 pm - 5:25 pm
4-hour Workshop – Level: Intermediate

I

Title: Eager for IGRA? A Comprehensive Update on Tuberculosis Screening Approaches

Presenters: Wendy Thanassi, MD MA, Curtis Chow, FNP PA-C and Scott W. Lindquist, MD MPH

Topic Overview: This three-part workshop will provide a comprehensive review of Interferon Gamma Release Assays (IGRAs.) In the first session, participants will examine the specific use and interpretation of IGRAs, including advantages and challenges that exist in screening healthcare workers. The magnitude of tuberculosis prevalence in the United States will be highlighted in the second session, as well as the technological advances that have created more efficient and accurate screening techniques. The final session discusses the practicality of adopting IGRAs into public health and into the practice of preventive health medicine.

Session I: Screening Healthcare Workers Using IGRAs – Case Studies and Recent Findings (75 min)

Presenter: Wendy Thanassi, MD MA

Topic Overview: This presentation reviews the specific use and interpretation of Interferon Gamma Release Assays (IGRAs) in healthcare workers. Topics covered will include the nature of screening low-risk populations using IGRAs, how IGRAs compare to the skin test, and the advantages and challenges that exist in screening healthcare workers.

Objectives:

1. Review use of IGRAs in healthcare workers.
2. Compare cases from occupational health TB screenings.
3. Discuss recent data and next steps.

Speaker 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.



Session II: Current Modalities in Tuberculosis Screening of HCP (60 min)

Presenter: Presenter: Curtis Chow, FNP PA-C

Topic Overview: This presentation will define the magnitude of tuberculosis prevalence in the United States and the local area of presentation. Participants will then discuss current diagnostic modalities for Latent Tb infection and its treatment. Specific to

California, discussion will focus on the current CDPH screening recommendations and guidelines. Finally, real world screening as done at Dignity Health North State service area will be highlighted. The presenter will demonstrate what screening methods are used at Mercy Medical Center, Redding vs. traditional Tb screening. Now, laboratory personnel play a key role in Tb screening. Of importance to laboratory personnel is the collection method of testing using IGRA, the process of testing and the importance of quantifying the results to the ordering practitioner.

Objectives:

1. Review the epidemiology of tuberculosis infection in the United States and worldwide.
2. Understand interferon gamma release assays and their advantages and disadvantages.
3. Explain the implementation process of interferon gamma release assay testing and its usefulness in "real-world" application.
4. Report the CDC 2010 "Updated Guidelines for Using Interferon Gamma Release Assays to Detect M. tuberculosis Infection."
5. Discuss test result interpretation and treatment options.

Speaker 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.



Session III: Public Health and Preventive Medicine Adoption of Interferon Gamma Release Assays (IGRAs) (75 min)

Presenter: *Scott W. Lindquist, MD MPH*

Topic Overview: This presentation reviews the practicality of adopting IGRAs into Public Health and the practice of preventive health medicine. The presentation reviews existing guidelines, the feasibility of using IGRAs, cost effectiveness, and current concerns about available testing methods.

Objectives:

1. Review existing guidelines for use of IGRAs.
2. Review feasibility of ordering IGRAs.
3. Illustrate existing cost-effectiveness data for IGRAs.
4. Discuss current concerns regarding IGRAs.

Speaker Bio:

Dr. Scott Lindquist is completed his medical training at the University of Washington School of Medicine, a residency in pediatrics at the University of North Carolina at Chapel Hill and an Infectious Disease Fellowship at Baylor College of Medicine in Houston, TX. He holds a Master of Public Health from the Harvard School of Public Health.



Lindquist has drawn upon this broad background to focus upon underserved populations and infectious diseases. He has combined all the aspects of his training as a Health Officer/Director of Health for the Kitsap County Health District since 2001. In addition, he serves as a pediatrician and public health officer at the Port Gamble S'Klallam Tribal Medical Clinic, where he has worked one day each week since 2001. He also serves as the Tuberculosis Medical Consultant for the Washington State Department of Health, a position he has held since 2002. An advocate in the early adoption of Interferon Gamma Release Assays (IGRAs) into public health practice, Lindquist has extensive public health experience with the implementation of IGRAs in diagnosis, contact investigation and employee infection control practices.

Session IV: Panel Discussion and Q&A (30 Min)

W009 September 11, 2013
Wednesday 1:15 pm - 3:15 pm
2-hour Workshop – Level: Intermediate

I

Title: Designing a Hazardous Drug Medical Surveillance Program

Presenters: *Lee S. Newman, MD and Adrienne Wolf, MPH*

Topic Overview: The CDC and NIOSH recommend that health-care facilities establish hazardous drug medical surveillance programs. However, there is little practical guidance on how to set up such a program. In addition, when reviewing drug package inserts for the hazardous pharmaceuticals on NIOSH's list, there is little to no information regarding the chronic low level effects of these drugs on healthcare workers. To that end, material safety and data sheets historically do not contain a standard quality of information. The globally harmonized system (GHS) is intended to standardize the type of information contained on new safety data sheets (SDS.) A systematic review of the drugs contained on NIOSH's list reveals that, despite the standardization, these new SDS still do not provide consistent information. These are some of the barriers occupational health professionals may have already experienced in trying to develop a hazardous drug medical surveillance program. In this workshop, the presenters will help participants overcome these barriers by discussing how to use available resources, as well as how to utilize a systematic, practical approach to identify potential risks that will allow for the development and implementation of a hazardous drug medical surveillance program.

Objectives:

1. Understand the risks hazardous drugs pose to healthcare workers.
2. Evaluate research methods and the systematic approach used to identify the potential risks of hazardous chemicals for healthcare workers.
3. Assemble the framework for developing a hazardous chemical medical surveillance program in practice.
4. Conclude how to use available resources when implementing a hazardous drug surveillance program.
5. Recognize how to implement a hazardous chemical medical surveillance program in practice.

Speaker Bios:

Dr. Lee Newman is one of the nation's leading experts in the fields of occupational and environmental medicine and pulmonary medicine. He co-founded Axion Health to improve occupational health and safety practice by developing advanced technology that enhances practice workflow and provides clinical decision support for practitioners. In addition to his role at Axion Health, Newman conducts research and teaches medical students, graduate students, post-doctoral trainees, and is a popular lecturer and visiting professor at major international university medical schools. He has more than 25 years of experience in the design, conduct and evaluation of medical surveillance programs for occupational hazards.



Adrienne Wolf is Manager of the Medical Content and Configuration Department at Axion Health. She is responsible for the day-to-day operations of the department and works in collaboration with the Chief Medical Officer to create and maintain all medical content contained in the system. Wolf received her Master's in Public Health from the Colorado School of Public Health and sits on the board for the Colorado Society for Public Health Education as the Advocacy Chair.



W010 September 11, 2013
Wednesday 1:15 pm - 3:15 pm
2-hour Workshop – Level: Intermediate

I

Title: Enhance Your Case Management Services by Partnering with Others

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

Topic Overview: In dealing with today's plummeting economy, employers are challenged with reducing expenditures while maintaining revenues. With rightsizing, downsizing, out-sourcing and reduction in workforce, employers are challenged to scrutinize each employment position "under a microscope" to see where cuts can be made to save money. Unfortunately, the occupational

health professional's position is one of the first positions employers look to cut. Occupational health professionals can partner with other professionals to enhance their case management skills and have positive outcomes on their claims that will impact the organization's bottom line.

Objectives:

1. Differentiate between medical case management and vocational case management.
2. Define three steps in the case management process.
3. List three case management best practices and the impact of assistance from others.
4. Identify three professionals the case manager can partner with, and describe each of their roles.
5. Recognize opportunities where partnering with other professionals will enhance a positive outcome.

Speaker Bio:

Barb Maxwell is a well known speaker and subject matter expert at the local, state and national levels for occupational health professionals in numerous professional organizations. She currently oversees the operations of 15 acute care facility Occupational/Employee Health departments, as well as 10 free-standing Company Care clinics. She is Past President of FSAOHN, Inc. and is a fellow through AAOHN. Maxwell received her RN from St. Luke's Hospital School of Nursing, Kansas City, MO, and her bachelor's degree 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*.



W011 September 11, 2013
Wednesday 3:30 pm - 5:30 pm
2-hour Workshop – Level: Basic

B

Title: Employee Wellness...How to Develop a Successful and Creative Program

Presenters: JoAnn Shea, MS ARNP COHN-S, Shelly Scamardo, BS and Bethany Brown, BSN RN

Topic Overview: This workshop will provide information on development and implementation of a successful Employee Wellness Program, including preparing proposals and developing employee wellness incentive programs linked to benefits. The speakers will provide an overview of the Tampa General Employee Wellness services and programs, budget, administrative support and employee participation.

Objectives:

1. Identify three methods to increase employee participation in wellness programs.
2. Describe how an Employee Wellness Program linked to a benefits plan can provide a return on investment.
3. Define three methods to improve health awareness among employees.

Speaker Bios:

JoAnn Shea has been in the employee health field since 1986 and has managed the Employee Health Department at Tampa General Hospital, a 1,000 bed Level 1 Trauma Center, for 26 years. She is responsible for oversight of the Employee Wellness Program and has implemented innovative programs to improve employee health awareness and reduce healthcare costs.



Shelly Scamardo, Wellness Educator, has practiced in the wellness field for more than 10 years and has been employed at Tampa General Hospital since 2011. She is a certified health coach and has extensive experience in health promotion development.

Bethany Brown has been a Wellness Educator at Tampa General Hospital since 2010. She is a fitness trainer and health coach and provides consultation to hospital employees on disease management and weight loss.

W012 September 11, 2013
Wednesday 3:30 pm - 5:30 pm
2-hour Workshop – Level: Basic

B

Title: Taking Care of Ourselves While We Take Care of Others: In Search of the How-To Manual for Ensuring Staff Well-Being

Presenter: Lori Schwartz, PhD

Topic Overview: Many healthcare professionals find their work gratifying and rewarding. At the same time, however, they face many inherent stressors and challenges that may affect their well-being. Demands on time and abilities continue to increase, while resources continue to decrease. Ever-expanding job descriptions are the norm. Morale, job satisfaction and professional development issues abound. Job stress may be spilling over into personal lives.

Without needed support and adaptive coping strategies, professional caregivers may experience a myriad of potential negative outcomes (e.g., stress, burnout, diminished morale, poor teamwork, job dissatisfaction, professional development issues.) Employers, in turn, may contend with absenteeism, turnover and productivity issues. On-site support services may be one of the best ways to ensure staff well-being. They can help minimize barriers typically associated with seeking support and help maximize peer support, group cohesiveness, morale and teamwork. Yet, few employers offer such programs, citing concerns about confidentiality, job evaluations, interference with job responsibilities, limited time and resources, and lack of institutional support.

A model staff support program designed for a multidisciplinary hospital staff addressed these issues – and it was worth it! Turnover, conflict, absenteeism and perceived burnout decreased, while perceptions of well-being, morale, teamwork and job satisfaction were enhanced. The challenges and benefits associ-

ated with creating and implementing the program, as well as the program's components and services, will be described. This interactive workshop also will help participants develop practical ideas for cost-effective, on-site staff support services tailored to their own workplaces.

Objectives:

1. Identify stressors and challenges inherent in healthcare for professional caregivers.
2. Recognize potential negative outcomes that may result from such stressors and challenges without needed support and adaptive coping strategies.
3. Describe a model on-site staff support program, including specific services offered and the challenges and benefits associated with creating and implementing the program.
4. Develop practical ideas for creating and implementing on-site staff support services in the workplace

Speaker Bio:

Dr. Lori Schwartz received her Doctorate in Psychology from Penn State University. For nearly 30 years, she has provided direct care, consultation, training and workshops in mental health centers, hospitals and community-based programs. Much of her work has focused on individuals and families impacted by chronic illness and/or disabilities and their caregivers. Schwartz provided a comprehensive staff support program for a large, multidisciplinary hospital staff for 12 years and consults with agencies creating such programs.



A001 September 12, 2013
Thursday 8:10 am - 9:40 am

1.5-hr Keynote Presentation – Level: Intermediate

I

Title: Dollars & Sense: Making the Business Case for Optimizing Hospital Safety Performance

Presenter: Deirdre McCaughey, PhD MBA

Topic Overview: The Institute of Medicine's report *Incorporating Occupational Information in Electronic Health Records* has called for the inclusion of occupational illness and injury data in electronic health records to help identify effective intervention strategies to improve employee health and well-being. The healthcare industry has experienced increased scrutiny on safety performance in recent years, with employee injury rates ranking among the highest of all industries in the United States, while hospitals consistently have injury rates that are two to three times higher than the national employee injury rate.

The session will describe use data from international occupational safety and health studies to show how safety training results in lower incidents of employee injury. It will: examine differences in safety perceptions between injured and non-injured employees; highlight best practices in employee safety; and point to the not-

so-surprising relationship between employee attitudes and positive organizational outcomes. Finally, employee injury and illness statistics will be linked to organizational revenues and margin to construct the business case for investing in occupational safety and health.

Occupational health professionals can use this information to better manage their organizational safety programs to align health-care employee safety with patient safety. In addition to improving the well-being of these key stakeholders and reducing costs associated with workplace injuries, organizations will identify a mechanism to help optimize key hospital performance metrics.

Objectives:

1. Define the components of a successful workplace safety training program.
2. Identify key safety performance metrics for safety dashboards.
3. Understand the link between employee safety and employee health outcomes.
4. Analyze the link between occupational injury costs to organizational revenues and margin.

Speaker Bio:

Dr. Deirdre McCaughey, the John Jones Scholar in Workers' Compensation Research, is an Assistant Professor at the Pennsylvania State University. Her PhD and MBA are from the Asper School of Business in Winnipeg, Manitoba, Canada. Prior to her academic career, McCaughey practiced as a physical therapist in a large teaching hospital in Canada, and she also spent 10 years working in management in the private sector in marketing, strategic planning and operations.



As faculty in the MHA program, she teaches health services management and the application of organizational behavior theory to healthcare workplaces in pursuit of evidence-based management. Using an occupational health and safety lens, her research involves examining organizational climate factors in healthcare institutions (e.g. safety climate, workplace training) that influence individual healthcare provider and workforce well-being (e.g. stress, burnout) and organizational outcomes (e.g. patient safety incidents, employee injury/illness rates.)

McCaughy is currently working in a research partnership with ARAMARK Healthcare to investigate occupational health and safety issues with support service workers in hospitals. The international study is in its second phase and includes safety training interventions and employee surveys to determine the efficacy and ROI of workplace safety training.

This study and her other work in occupational health and safety have received numerous award nominations, including the Academy of Management Best Paper and Academy of Management Best Theory to Practice Paper, and she has been published in journals such as *Accident Analysis and Prevention*, *The Gerontologist*, *the Journal of Applied Psychology* and *Healthcare Management Review*.

A002 September 12, 2013
Thursday 10:05 am - 11:05 am
1-hr General Session – Level: Intermediate

I

Title: The Occupational Health Professional's Guide to Total Worker Health™

Presenter: L. Casey Chosewood, MD

Topic Overview: The challenges facing the modern worker are greater than ever before. Exposures, risks and threats to health relentlessly pursue workers on the job and off, attacking from all directions. Whether physical, environmental, psychological, social, cultural, familial, community or some combination of all of these, today's exposures require swift action, a high level of professional judgment and broader perspectives. This fast-paced, example-filled presentation will challenge your current notion of what is work-related and what isn't, what really matters when it comes to health and safety interventions, and why our past approaches to lower injury and illness rates can't possibly be enough if we want to continue the gains we have made. If you want to comprehensively improve the total health of all your workers, meet the needs of the changing workplace and remain relevant in your role as the guardian of workplace health and well-being, you'll need a new strategy, new tools, new approaches and a bold willingness to say goodbye to what won't work anymore. Leave ready to take action and change the way you practice the art and science that is occupational health.

Objectives:

1. Explain the NIOSH concept of Total Worker Health™.
2. Review at least three examples of integrated worker protection and workplace health promotion interventions.
3. Identify two resources for information on integrated approaches to protecting the total health of workers.

Speaker Bio:

Dr. L. Casey Chosewood is the Senior Medical Officer for Total Worker Health™ at the National Institute for Occupational Safety and Health, part of the Centers for Disease Control and Prevention. In this role, he promotes the protection and improvement of the health and well-being of workers. From 2004 to 2009, he served as the Director of the Office of Health and Safety at CDC, safeguarding the 15,000 members of the CDC workforce as they faced the new challenges of the modern public health era. His office led CDC's safety programs, Occupational Health Services, environmental and compliance activities, and all workplace wellness and prevention initiatives. He has also served as the Medical Director of CDC's three occupational health clinics. His team has overseen a multi-faceted workplace health and wellness program providing more than 200,000 health promotion encounters, screenings and health opportunities annually. He has presented extensively on the topic of occupational safety and health, well-being and worksite health promotion. He led CDC's Healthiest Nation initiative from 2008 to 2009. Chosewood received his medical degree at the Medical College of Georgia and completed



his residency in Family Medicine at the University of Connecticut. He has been an Assistant Professor of Family and Community Medicine at Emory University School of Medicine since 1997 and is currently pursuing an MPH in Health Policy and Management from Emory University's Rollins School of Public Health. Before coming to CDC, Chosewood was the Medical Director for the Southeastern Region of Lucent Technologies.

A003 September 12, 2013
Thursday 11:10 am - 12:10 pm
1-hr General Session – Level: Advanced

A

Title: Occupational Hazardous Drug Exposures Among Healthcare Workers

Presenter: Thomas H. Connor, PhD

Topic Overview: NIOSH has identified approximately 150 hazardous drugs. Many of these are classified as antineoplastic drugs, but some are antivirals, immunosuppressants, hormonal agents and others which comprise many different classes and chemical structures. Based on patient information, many are known or suspected human carcinogens and known or suspected human teratogens. Many have adverse reproductive effects, and many are genotoxic. While there is limited evidence of cancer associated with occupational exposure, adverse reproductive effects and genotoxic effects such as chromosomal damage have been reported in healthcare workers. Numerous studies from the United States and around the world have demonstrated that workplaces are contaminated with these drugs to varying degrees. Several “marker” drugs have been shown to be taken up by healthcare workers, either dermally or by inhalation. This is evidenced by the measurement of these drugs in the urine of workers. Therefore, NIOSH, OSHA and many other organizations recommend reducing exposure as low as possible. This is achieved through the use of engineering controls, work practices and personal protective equipment. The large number of diverse hazardous drugs makes recommendation for such things as PPE, cleaning and medical surveillance very challenging because a single approach does not cover all drugs and various exposure scenarios.

Objectives:

1. Identify characteristics of hazardous drugs.
2. Interpret risks associated with hazardous drugs.
3. List who is exposed to hazardous drugs.
4. Evaluate methods to reduce exposure to hazardous drugs

Speaker Bio:

Dr. Thomas Connor received his doctoral degree from the University of Texas Medical Branch. He was a member of the faculty of the University of Texas School of Public Health in Houston for 20 years. He is currently a Research Biologist in the Division of Applied Research and Technology at NIOSH. He was a primary contributor to the NIOSH Alert on Hazardous Drugs and is responsible for updating the list of hazardous drugs in the alert.



Connor was awarded the 2008 ASHP Board of Directors' Award honoring non-pharmacists for their contribution to the practice of pharmacy and the International Society of Oncology Pharmacy Practitioners 2010 Achievement Award for developing the ISOPP Standards of Practice for Safe Handling of Hazardous Drugs. His research area has focused on occupational exposure to hazardous drugs in healthcare settings.

A004 September 12, 2013
Thursday 1:35 pm - 3:05 pm
1.5-hr General Session – Level: Intermediate

I

Title: Improving Patient and Worker Safety: Implications for Occupational Health Professionals

Presenters: MaryAnn Gruden, MSN CRNP NP-C COHN-S/CM, Bobbi Jo Hurst, BSN RN COHN-S SGE, Kerry Eaton, MS RN, Eileen Storey, MD MPH and Barbara I. Braun, PhD

Topic Overview: This panel of experts will discuss the recent Joint Commission monograph *Improving Patient and Worker Safety – Opportunities for Synergy, Collaboration and Innovation* and its potential impact on the practice of the occupational health professional in healthcare. Discussion will center on the development of the monograph and practical examples of high reliability safety cultures in healthcare, including an example from the monograph of an OSHA Voluntary Protection Program best practice facility.

Objectives:

1. Describe the creation and purposes of The Joint Commission's monograph on patient and worker safety.
2. Identify key elements and strategies for creating a high reliability safety culture.
3. Discuss the role of the occupational health professional in promoting a high reliability safety culture.

Speaker Bios:

MaryAnn Gruden (panel moderator) is the Manager, Employee Health Services for Allegheny General and The Western Pennsylvania hospitals, components of the West Penn Allegheny Health System in Pittsburgh, PA. She has more than 20 years of occupational health nursing experience in the healthcare setting. Her MSN is from the University of Virginia, and she is certified as a Family Nurse Practitioner and Occupational Health Nurse Specialist, Case Manager. She serves on the AOHP Executive Board as the Association Community Liaison to promote the mission and vision of AOHP with partners such as the CDC, NIOSH, OSHA, The Joint Commission and AORN.



Bobbi Jo Hurst is the Manager, Employee/Student Health and Safety at Lancaster General Health in Lancaster, PA. She has a BSN and has been certified both as a Citi-



cal Care Nurse and an Occupational Health Nurse Specialist. She is currently pursuing her MBA at Lebanon Valley College. Other occupational health nursing experience includes working at a chicken processing company. She has been at Lancaster General since 1993 and was an organizational leader in the journey for Lancaster General to become one of the first hospitals in the nation to achieve OSHA's Voluntary Protection Program (VPP) designation in 2007. In 2009, she became a Special Government Employee and works with OSHA as a surveyor for the VPP program throughout the country.

Kerry Eaton is a registered nurse with a passion for improving the quality and safety of care for patients, families and caregivers. She began her career in emergency nursing and moved to the quality leadership arena relatively quickly. She has been a nurse manager, a quality director, a risk manager, a case management director and a chief operating officer. Currently, she is the Senior Vice President and Chief Operating Officer for the Sacred Heart Health System in Pensacola, FL. Sacred Heart is part of the Ascension Health System. She also co-chairs the Ascension Health Clinical Excellence Committee.



Dr. Eileen Storey is Chief of the Surveillance Branch of the Division of Respiratory Disease Studies at the National Institute of Occupational Safety and Health. The branch: summarizes information relating to the incidence, prevalence and mortality of occupational respiratory diseases; describes patterns of specific diseases within occupations and industries; and develops methods to monitor specific working populations at risk for respiratory disease. She co-chairs the Health Care and Social Assistance Sector Council for the National Occupational Research Agenda (NORA) effort sponsored by NIOSH. Prior to joining NIOSH, Storey was on the faculty at the University of Connecticut Health Center, where she practiced occupational medicine, taught medical students and public health students, and conducted research focused on indoor environments and respiratory disease. As Chief of the Division of Occupational and Environmental Medicine, she provided oversight for the Employee Health Service and Employee Assistance Program. She completed her medical degree and an MPH at Harvard University in 1978, internal medicine training at West Virginia University in 1981, and is board certified in Internal Medicine and Occupational Medicine.

Dr. Barbara Braun is Project Director, Health Services Research, in the Division of Healthcare Quality Evaluation at The Joint Commission. In her position, she is involved with designing and implementing collaborative projects related to quality of care and multi-site infection prevention research funded by CDC and AHRQ, with partners at several academic medical centers. She is a member of the NIOSH National Occupational Research Agenda Healthcare and Social Assistance Sector Council. She has been involved in Joint Commission research,



evaluation and performance measurement activities for more than 20 years. Braun received a PhD from the University of Illinois Medical Center, School of Public Health, Chicago, IL. She is a certified green belt in Robust Process Improvement, a blended form of lean and six sigma methodologies, and an adjunct faculty member in the Master's in Healthcare Administration program at the UIC School of Public Health.

A005 September 12, 2013
Thursday 3:10 pm - 4:10 pm

1-hr General Session – Level: Intermediate

Title: Ethical and Practical Issues in Healthcare Worker Influenza Vaccination

Presenter: Amy J. Behrman, MD

Topic Overview: Healthcare workers (HCWs) are at risk for acquiring and transmitting a variety of respiratory pathogens in the workplace. Although there is widespread support among most medical organizations for vaccination programs, following national guidelines, to help reduce these risks, there is considerable ongoing disagreement on the most effective, appropriate and ethical ways to achieve high levels of immunization:

1. There is weak national and even weaker international consensus on whether or how to mandate adult vaccination programs.
2. There is ongoing disagreement among healthcare professionals about whether the benefits of specific immunizations outweigh their perceived risks to HCWs.
3. There are profound disagreements among HCWs regarding the ethical basis of vaccine mandates for adults in general and HCWs in particular.

Current immunization concerns for HCWs are now most acute for influenza given the vaccine's moderate risk reduction and need for yearly dosing in the context of ongoing seasonal morbidity and mortality, as well as the expectation of future epidemic events. However, the long history of prior vaccination issues reaching back more than 200 years can illuminate current debate in medical centers.

This general session will present the speaker's experience in transitioning to a mandatory influenza vaccination program with four years of follow-up. Discussion will include historical precedents related to vaccination, vaccine mandates and vaccine resistance, as well as comparison with recent peer institution experiences. Better understanding of ethical and practical issues in achieving high HCW vaccination rates can inform and improve medical center processes for risk reduction now and in the future.

Objectives:

1. Review the history of vaccination and vaccine resistance in the United States and internationally.
2. Describe the evolution of a healthcare worker influenza vaccination policy in a large academic health system.
3. Discuss current trends and concerns about vaccine approaches and mandates among U.S. healthcare institutions, with a focus on influenza.

Speaker Bio:

Dr. Amy Behrman is Medical Director for Occupational Medicine in the University of Pennsylvania Health System. She completed medical school and a medical residency at Penn, where she is currently an Associate Professor in the Division of Occupational Medicine. Her academic and research interests focus on occupational and nosocomial infections in healthcare providers and animal workers with particular interests in vaccine preventable diseases, tuberculosis screening, bloodborne pathogen management and vaccine mandate issues.



Terry Grimmond is an Australian microbiologist with 45 years of experience in university hospitals and industry and is an international speaker on sharps injury prevention. He serves on Sharps Container Standards in four countries, has spoken at 150 conferences in 13 countries and has received seven awards for his work.



A006 September 12, 2013
Thursday 4:15 pm - 5:15 pm

1-hr General Session – Level: Intermediate

I

Title: BBP Exposure Prevention: U.S. Incidence, Effective Actions & EXPO-S.T.O.P. Survey Results

Presenters: *Linda Good, PhD RN COHN-S and Terry Grimmond, FASM BAgGrSc GrDpAsEd*

Topic Overview: Bloodborne pathogen exposures represent one of the most potentially devastating types of occupational injuries among healthcare workers. Occupational health professionals devote a significant portion of their practice to exposures, including evaluating, treating, educating, tracking and reporting. This team-taught presentation will demonstrate to conference participants how research and evidence-based practice can inform their management of this crucial concern. The session will include updates on percutaneous and muco-cutaneous exposure incidence, best practices in exposure prevention and a special conference attendee preview report on the AOHP-sponsored Exposure Survey of Trends in Occupational Practice (EXPO-S.T.O.P.) benchmarking research study. This preview will include preliminary findings, encourage continued member support, and demonstrate AOHP's commitment to the generation of original research and position as a recognized leader in occupational health practice.

Objectives:

1. Identify current bloodborne pathogen exposure prevention initiatives.
2. Discuss examples of prevention best practice.
3. Present findings of the EXPO- S.T.O.P. survey and encourage continued support.

Speaker Bios:

Linda Good has been a leader in occupational health for 18 years and is Director of Employee Health Services for Scripps Health in San Diego, CA. She is an active member in AOHP, currently serving as Chair of the Research Committee and Editor of the AOHP *Journal's* "Ready to Research" column.



B001 September 13, 2013
Friday 8:00 am - 9:00 am

1-hr General Session – Level: Intermediate

I

Title: The Test and Threat Era of Hepatitis C: Expanding the Individual and Public Health Benefits of HCV Treatment

Presenter: *John W. Ward, MD*

Topic Overview: In the United States, an estimated 3.2 (2.7-3.9) million persons are infected with HCV, and HCV-associated disease and mortality are increasing, particularly among persons infected in the distant past (e.g., those born during 1945-1965.) Direct-acting antivirals (DAAs) have been shown to elicit a sustained virologic response (SVR) in most treated patients, reducing risk for liver cancer (~70 percent) and all-cause mortality (50 percent.) The individual and public health benefits of HCV therapy can only be realized when persons living with HCV are identified through testing and linked to appropriate care and treatment. In the United States, 45-85 percent of persons living with HCV are unaware they are infected, and a smaller proportion of HCV infected persons are in care. To improve access to HCV testing, care and treatment, the CDC now recommends a one-time HCV test for all persons born during 1945-1965. Full implementation of this intervention can identify 800,000 currently undiagnosed infections and avert 120,000 deaths. This and other HCV testing policies must be accompanied by coordinated, comprehensive implementation activities, such as community education, provider training and laboratory quality assurance. Access to care and antiviral therapy can be further expanded by revising care and reimbursement policies, integrating HCV treatment into occupational health and other clinical settings. With adequate infrastructure, the addition of HCV therapy as a prevention tool can reduce HCV disease and mortality.

Objectives:

1. Describe HCV epidemiology.
2. Review HCV testing policies.
3. Explain methods to implement HCV testing policies.

Speaker Bio:

Dr. John Ward is Director of the Division of Viral Hepatitis at the CDC in Atlanta, GA, with responsibility for planning and directing national and international research, surveillance and vaccination, and other public health programs related to prevention of viral hepatitis. Prior to his work in viral hepatitis, his experience included 14



years in the field of HIV/AIDS, conducting early studies of AIDS transmission and natural history. He has also served as Editor of the *Morbidity and Mortality Weekly Report (MMWR)*, CDC's primary health publication. Ward has authored more than 100 scientific publications and recently served as Editor for *Silent Victories*, a history of public health in the 20th century published in 2007 by Oxford University Press. He received his undergraduate degree at the University of Alabama, medical degree from the University of Alabama School of Medicine in Birmingham and completed an internship and residency in Internal Medicine at the University of Alabama Hospitals. He holds a clinical faculty appointment with the Department of Medicine, Emory University.

B002 September 13, 2013
Friday 9:05 am - 10:05 am

1-hr General Session – Level: Advanced

Title: Multi-Faceted Solutions for Changing Opioid Practice

Presenter: Kathryn L. Mueller, MD MPH FACOEM

Topic Overview: This presentation will initially provide a short review of the current opioid crisis in the United States and the factors which contributed to the problem. This will be followed by a review of current evidence-based basic principles for chronic pain treatment and appropriate management of chronic opioid, when utilized. The current status of medical treatment patterns and use of assistive devices, such as the physician drug monitoring programs (PDMP), will be discussed to provide a range of changes that need to occur in multiple segments of healthcare to encourage the best care for patients with chronic pain and those who may benefit from opioids. The session will include time for discussion of the multiple entry points for intervention, including: facilitating provider education; tracking and reimbursing providers who follow guidelines; improving PDMP access; providing patient and public education; and partnering with regulatory boards. All participants should leave the session with at least three ideas about how they can impact the problem.

Objectives:

1. Describe the opioid prescribing problem.
2. Explain current obstacles in practice and myths that prevent correction of this problem.
3. Identify strategies for resolving the crisis.

Speaker Bio:

Dr. Kathryn Mueller has served as the Medical Director for the Colorado Division of Workers' Compensation since the inception of this position in 1991. She is board certified in Occupational Medicine and was previously certified in Emergency Medicine. She is a Professor in the Department of Physical Medicine and Rehabilitation and the School of Public Health at the University of Colorado Anschutz Medical Campus, and the former developer and Director of the Student/Occupational



Health Service Clinic and Residency Director for the Occupational and Environmental Medicine Residency. In her position with Colorado Workers' Compensation, she has been in charge of the development of 10 medical treatment guidelines which are evidence-based, to the extent possible, including those on chronic pain management and chronic opioid management. Her educational efforts include directing the Colorado Level I and II accreditation courses, which focus on training and certification of doctors in impairment rating, and serving as primary faculty for the American Board of Independent Medical Examiners. Her activities with ACOEM are numerous. She is currently the President-elect and was previously Secretary/Treasurer after having been elected to two terms on the Board of Directors. She contributed significantly to the current ACOEM Occupational Practice Guidelines being used in several state workers' compensation systems. She was also co-author on several publications from the Workers' Compensation Research Institute describing current opioid management in multiple states' workers' compensation systems.

B003 September 13, 2013
Friday 10:40 am - 11:40 am

1-hr Breakout Session – Level: Intermediate

Title: Using Ergonomic Standards to Benefit Both Healthcare Workers and Patients

Presenter: Sandra Swan, MS RN COHN-S/CM CSPHP

Topic Overview: This session will discuss how the use of ergonomic standards in the healthcare setting benefits both healthcare workers and patients. The methods used to develop ergonomic standards will be described, and multiple examples will be provided, including specific workplace design standards, chair and flooring standards, safe patient handling equipment standards, ceiling lift ratio standards, and documentation and reporting standardization. An overview of the challenges and lessons learned from instituting ergonomic standards will be presented.

Objectives:

1. List the benefits to both healthcare workers and patients when ergonomic standards are in place in the healthcare setting.
2. Describe the methods used to develop ergonomic standards.
3. Review the challenges and lessons learned when instituting ergonomic standards in healthcare.

Speaker Bio:

Sandra Swan is the Manager, Occupational Health and Ergonomics, for BJC HealthCare in St. Louis, MO. She received her Bachelor of Science in Nursing from Bowling Green State University in Bowling Green, Ohio, and her Master of Science in Education from the University of Dayton in Dayton, Ohio. A licensed RN in Ohio, Illinois and Missouri, she has been a Certified Occupational Health Nurse Specialist/Case Manager since 2001. Swan is also a Certified Ergonomic Assessment Specialist



II and a Certified Safe Patient Handling Professional. She has been an RN for more than 31 years, with the last 14 years in occupational health and ergonomics in both industry and healthcare settings. She currently manages a team of ergonomic specialists at BJC HealthCare who provide injury prevention and innovative ergonomic solutions for more than 28,000 BJC HealthCare employees.

B004 September 13, 2013
Friday 10:40 am - 11:40 am
1-hr Breakout Session Level: Advanced

A

Title: FMLA - Managing FMLA So It Doesn't Manage You!

Presenter: JoAnn Shea, MS ARNP COHN-S

Topic Overview: This presentation will review the Family and Medical Leave Act regulations, provide information on recent FMLA revisions and discuss ways to resolve intermittent leave issues to healthcare organizations. FMLA case studies will be presented.

Objectives:

1. Identify three reasons an employee can take intermittent leave.
2. Recognize two new types of FMLA under the 2008 National Defense Authorization Act.
3. Discuss the requirements for medical certifications under FMLA regulations.
4. Describe a manager's responsibility for FMLA designation and referral

Speaker Bio:

JoAnn Shea has been in the Employee Health field since 1986 and has managed the Employee Health Department at Tampa General Hospital, a 1,000 bed Level 1 Trauma Center, for 26 years. She is responsible for oversight of the hospital FMLA and medical leave program and handles complex FMLA issues on a daily basis.



B005 September 13, 2013
Friday 10:40 am - 11:40 am
1-hr Breakout Session - Level: Basic

B

Title: Injury Prevention Through Safe Patient Handling and Movement Best Practices

Presenter: Amber Perez, LPN BBA/M CSPHA

Topic Overview: This presentation will provide participants with information about work-related musculoskeletal injuries suffered by healthcare professionals and education on safe patient handling and movement solutions. Identifying the unique challenges and unaddressed risks presented by each patient population can increase the efficacy of a safe patient handling program. Elements essential for success include: equipment; mobility assess-

ments; culture change/acceptance; policy; and an integration with patient-centered initiatives.

Objectives:

1. Analyze inpatient and outpatient settings by conducting a risk assessment of these different clinical areas.
2. Review the components of injury follow-up and investigation.
3. Discuss essential elements of a safe patient handling program.

Speaker Bio:

Amber Perez is the Safe Patient Handling Specialist for Banner Health, a 22-hospital system. Through Risk Management, she leads the clinical implementation for the safe patient handling program with a goal of reducing musculoskeletal injuries in the hospitals and clinics. She began her journey in this field because of a work injury sustained four years into her career. Her injury was almost career-ending; however, after two years of spinal injections and physical therapy, along with the benefits of safe patient handling, she was able to return to work. Perez is proud to report program success with sustained decreases in patient handling related injuries. She presented at the AZ SPH conferences in 2011 and 2012, at NIOSH in 2012 and at the MN-OSHA conference in May 2013. She is published in the *Journal of Safe Patient Handling*, *AZ Nurses Association AZ NURSE Magazine*, *The Arizona Republic* and *AZ Healthcare News*.



B006 September 13, 2013
Friday 10:40 am - 11:40 am
1-hr Breakout Session - Level: Basic

B

Title: OSHA in Healthcare: Have We Finally Got Their Attention?

Presenter: Scott Harris, PhD MPH

Topic Overview: "A weak culture of worker safety" in healthcare appears to have finally succeeded in getting OSHA's attention. What did it take? For starters, the nearly 14 million healthcare workers across thousands of workplaces continue to record some of the highest injury and illness rates in the nation. Add to that estimates of perhaps a billion dollars per week in costs for these injuries and illnesses. Then, there's the emerging potential link between worker and patient safety related to the millions of healthcare-associated infections and fatalities each year. With historically few OSHA inspections and low penalties, the honor system just wasn't working.

OSHA has turned a great deal of attention to healthcare this year. Comments on an infection control Request for Information are under review, and the 2012 targeted inspection and regional and national emphasis programs may generate thousands of additional inspections focused on nursing, residential and ambulatory care facilities. Hospitals are not far behind. This presentation delivers the latest state and federal OSHA statistics, inspection findings, trends, hot topics and activities at OSHA related to healthcare.

Objectives:

1. Describe the facts behind debunked healthcare OSHA myths.
2. Summarize historical OSHA activity within healthcare.
3. Review conditions within healthcare that have led to OSHA scrutiny.
4. Discuss implications of OSHA and healthcare disconnects.

Speaker Bio:

Dr. Scott Harris is an advisory member of the ASSE Healthcare Practice Specialty and a Course Director and Advisory Board member for the North Carolina Occupational Safety and Health Education and Research Center at UNC - Chapel Hill. His experience covers 30 years of EHS management in general industry, federal and state government, consulting and university instruction. Currently the Occupational Health & Risk Management Consultant for UL PureSafety, Harris received his PhD in Environmental Science, with a specialization in Disaster and Emergency Management, from Oklahoma State University and holds degrees in Geology and Public Health from Western Kentucky University.



Objectives:

1. Understand how to join Occupational Health Safety Network (OHSN.)
2. Demonstrate OHSN tools to convert and submit data in OHSN format.
3. Review how to use the OHSN reports.
4. Demonstrate how to utilize OHSN intervention resources.
5. Describe future planned modules for OHSN.

Speaker Bios:

Dr. Ahmed Gomaa started his career as an orthopedic surgeon treating occupational injuries for five years in Alexandria, Egypt before he joined 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 tenure at the CDC and NIOSH, he worked in many environmental and occupational medicine activities, including the prevention of occupational injuries and illness in the healthcare sector.



B007 September 13, 2013
Friday 10:40 am - 11:40 am

1-hr Breakout Session – Level: Intermediate

Title: NIOSH's Update on the Occupational Health Safety Network

Presenters: *Ahmed Gomaa, 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.) OHSN has created a “common language” that allows benchmarking of occupational injury/illness rates and data analysis across an entire industry, starting with the healthcare sector. The first three OHSN modules focus on common events that can lead to injuries or musculoskeletal disorders among healthcare personnel (HCP:) patient handling and working in awkward postures; slips, trips and falls; and workplace violence. Through interactions with stakeholders, we learned 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. The system is rolling out in 2013. We will provide comprehensive training on how to enroll and participate in OHSN, and explain the benefits of participation. We will also discuss planned new modules for OHSN.

Dr. Sara Luckhaupt joined the Surveillance Branch/Division of Surveillance, Hazard Evaluations, and Field Studies/NIOSH/CDC in July 2006 as an Epidemic Intelligence Service Officer in the U.S. 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 serving as co-project officer for a project to enhance occupational health surveillance among healthcare workers.



Susan Sprigg has worked 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.



B008 September 13, 2013
Friday 1:50 pm - 2:50 pm

1-hr 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 to their workplaces with real and beneficial solutions.

Objectives:

1. Describe the key components of a clear, concise and consistent safe patient handling 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.

Speaker 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 past President of the Association of Safe Patient Handling Professionals.



B009 September 13, 2013
Friday 1:50 pm - 2:50 pm

1-hr Breakout Session – Level: Intermediate

Title: Prescription Drugs in Healthcare Workers: A Guide for Screening and Prevention

Presenter: *Peter P. Greaney, MD*

Topic Overview: The vast majority of drug users are employed, and when they arrive for work, they don't leave their addiction at the door. If your drug and alcohol program is behind the times, you may be putting your workforce at risk. Presented by an occupational healthcare physician and a forensic laboratory doctor, this session will provide employers with insight into the latest street drugs, facts about commonly abused prescription medications, and a guide for prevention and effective drug screening.

Objectives:

1. Assess the most common legal/illegal drugs abused in the workplace.
2. Examine drug screening trends/new research.
3. Develop a roadmap for a successful drug testing program.

Speaker Bio:

Dr. Peter P. Greaney is the Medical Director and company President of WorkCare™. He is board certified in Occupational Medicine and Family Practice and a specialist in Toxicology. He has been formally trained in the specialty of Occupational and Environmental Medicine at the Southern Occupational Health Center at the University of California, Irvine, where he is currently a faculty member. He is also on the clinical faculty of the University of Southern California and on staff at a number of Southern California hospitals, where he consults on emergency toxicology cases. He founded Greaney Medical Group, an occupational healthcare facility, in Anaheim, California, in 1984, and he simultaneously developed a medical consulting practice which is now separately organized as WorkCare™. He provides consultation to private companies, public agencies, insurance carriers and the legal profession on toxic, environmental and other occupational induced injuries/illnesses. Greaney has retainers to serve as medical director for more than 30 different national companies, including biotechnology, chemical, oil and gas, manufacturing, engineering, geotechnical and hazardous material. He has established medical surveillance and OSHA compliance programs for more than 200 employers and union trust funds. He has also established post-offer medical standards for a variety of state, county and local governments, including making recommendations for effective employee health programs. He has acted as an expert witness and Agreed Medical Examiner in complex workers' compensation and toxic tort cases.



B010 September 13, 2013
Friday 1:50 pm - 2:50 pm

1-hr Breakout Session – Level: Intermediate

Title: Work-Related Injuries in Healthcare – Lessons Learned from Occupational Therapy Practice

Presenters: *Andrea Dyrkacz, OT Reg(Ont) and Lonita Mak, OT Reg(Ont)*

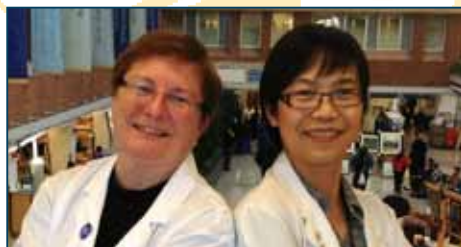
Topic Overview: This presentation will disseminate the findings of the first national study investigating work-related injuries in occupational therapy practice and will increase the awareness of workplace hazards, strategies for risk mitigation, and the potential for inter-professional collaboration to create safer workplaces for all healthcare providers. Of the 600 respondents to the 2009 electronic survey of English-speaking members of the Canadian Association of Occupational Therapists, 55.7 percent reported at least one injury episode. Survey results showed that injured occupational therapists tended to minimize the extent and impact of their injuries by underreporting incidents and continuing to work after injury. These behaviors may contribute to a failure to recognize the reality of work-related injuries in occupational therapy practice and thereby limit the development of profession-specific, risk-minimization strategies. The findings of this study are applicable to other healthcare providers, as the risks faced by OTs are not unique to their discipline alone.

Objectives:

1. Recognize how occupational therapists are injured in the workplace, who is most likely to be injured, and how the practice of occupational therapy in Canada contributes to those injuries.
2. Identify how work-related injuries to occupational therapists mirror those of other healthcare providers.
3. Describe the strategies occupational therapists recommend to minimize workplace injuries in clinical practice.
4. Evaluate how those recommendations can inform the practice of other healthcare disciplines.

Speaker Bios:

Andrea Dyrkacz works in University Health Network's Krembil Neurosciences Program, with a special focus in the area of spinal cord pathology. She is actively involved in post-professional education, particularly in the integration of internationally educated occupational therapists into the Canadian clinical context, and in the education of occupational therapist and physiotherapist assistants. She also is active in inter-professional research, with current studies in the areas of neurosurgical oncology, nursing education and wound care.



Lonita Mak works as an occupational therapist in University Health Network's Hand Program at Toronto Western Hospital. She has been a Certified Hand Therapist since 1998 and maintains an appointment at the University of Toronto's Faculty of Occupational Science and Occupational Therapy, where she is actively involved in clinical teaching related to splinting, hand therapy, and upper extremity structure and function. She has a particular interest in research that answers questions related to improving the practice of occupational therapy across clinical contexts.

Dyrkacz and Mak recently completed the first large study of work-related injuries in occupational therapy practice in conjunction with Carol Heck. Their study has been presented at numerous conferences, including the profession issue forum in the Canadian Association of Occupational Therapists, where the need for a position statement on safety is indicated. They also participated in the panel presentation at the UHN Research Day, themed "creating and sustaining care environments which support healthy staff and the provision of quality of care." The study was published in the *Canadian Journal of Occupational Therapy* in 2012.

Topic Overview: Four medical nursing divisions and one intensive care unit at a 1,250-bed teaching hospital participated in a safety engineered device (SED) trial between May 2011 and January 2012 to provide a comparison of needlestick injury (NSI) rates with the use of active subcutaneous SED and passive subcutaneous SED. The active SED requires a deliberate activation of the safety feature to re-sheath the needle, while the passive SED is designed to automatically retract the needle into the barrel of the syringe once the medication is delivered. Passive SED significantly reduced the NSI rate. This breakout session will report on the methods used in the study to evaluate the incidence of needlestick injuries among healthcare workers, as well as results and conclusions, including introducing a safety device that significantly reduces the risk of exposure to bloodborne pathogens.

Objectives:

1. Compare needlestick injury rates with the use of active and passive safety engineered devices.
2. Identify a safety device that significantly reduces the risk of exposure to bloodborne pathogens.
3. Define the benefits of passive safety engineered devices.

Speaker Bios:

Ashleigh Goris holds bachelor's degrees in Biology from Saint Louis University and in Nursing from Chamberlain College of Nursing, and she earned her Master's Degree in Public Health from Saint Louis University with an Epidemiology concentration. She has more than eight years of experience in infection prevention and hospital epidemiology, and she works at BJC HealthCare in Saint Louis, MO, as an Infection Prevention Consultant in Occupational Health and Emergency Preparedness.



Nancy Gemeinhart is the Program Director, Occupational Health Services for BJC HealthCare in St. Louis, MO. She earned a Diploma of Nursing at the Western Pennsylvania Hospital School of Nursing, Pittsburgh, PA, a Bachelor of Science in Nursing at Maryville University, St. Louis, MO, and a Master's of Science in Health Care Management at Lindenwood University, St. Charles, MO. A Registered Nurse in the state of Missouri, Gemeinhart has been certified in infection control and epidemiology since 1995. She is the leader of the Council for Occupational Health Professionals for BJC HealthCare. In her current role, Gemeinhart's responsibilities include injury and illness prevention for the 28,000 BJC HealthCare employees. For the past ten years, she has led the annual influenza immunization program for the organization and facilitated the development and implementation of the current influenza immunization policy, making influenza immunization a condition of employment for all employees at BJC HealthCare. She has more than 15 years of experience in the assessment and management of occupational exposures to blood and body fluids and manages the BJC Body Substance Post-Exposure 24/7 Hotline. Gemeinhart is an active member of APIC, AOHP and AAOHN and participates on several regional and state committees for emergency preparedness, pandemic preparedness and antiviral distribution. She is a well-known author and lecturer.

B011 September 13, 2013
Friday 1:50 pm - 2:50 pm

1-hr Breakout Session – Level: Intermediate

Title: Reducing Needlestick Injuries from Active Safety Devices: A Passive Safety-Engineered Device Trial

Presenters: *Ashleigh Goris MPH BSN RN CIC and Nancy Gemeinhart, MHA RN CIC Reg(Ont)*

B012 September 13, 2013
Friday 1:50 pm - 2:50 pm

1-hr Breakout Session – Level: Intermediate

Title: Active Shooter – Healthcare: Readiness and Response

Presenter: Lisa B. Pryse, CHPA CPP

Topic Overview: As we analyze risks in healthcare, the active shooter situation may be classified as a “low frequency, high impact” event. Because of this classification, it is imperative that we continuously seek and retrieve information on industry standard/best practice policies, procedures and training. Homeland Security has certainly given the public a good basis with which to begin our planning and training. Healthcare is a very unique entity for numerous reasons. Thus, our planning and training for staff must be specific to our environment. Healthcare staff members are not only responsible for their own safety, but for the safety of those patients assigned to their care. This presentation gives an overview of mitigation strategies appropriate for a healthcare environment to include planning, recognizing the signs of potential violence and managing the consequences of an active shooter event. Additionally, the history of active shooter situations and lessons learned are discussed as well.

Objectives:

1. Describe how to manage the consequences of an active shooter incident.
2. Define “Active Shooter” and what is unique about the healthcare environment.
3. Describe key elements of having a written plan and communicating it in advance.

Speaker Bio:

Lisa Pryse currently serves as the President of Healthcare Services and Chief of Company Police with Old Dominion Security in Richmond, VA. She also currently serves on the ASIS International Healthcare Council and holds the office of President of the International Association of Healthcare Security and Safety (IAHSS.) Prior to this position, Pryse was the system Chief of Police and Public Safety for Eastern Virginia Medical School in Norfolk, VA. Before moving to the Virginia area, she served as the Campus Police and Public Safety Chief for WakeMed Health and Hospitals in Raleigh, NC for more than 18 years. She also served as the Director of Protective Services at Rex Healthcare in Raleigh, NC for five years. She began her law enforcement career with the City of Raleigh Police Department. Her professional experience includes administrative responsibility for: University and Hospital Campus Police and Environment of Care Safety Programs, Emergency Communications Centers, Local and Regional Disaster and Incident Command Planning, Transportation Services, Food and Nutrition Services, and Data Processing. Pryse obtained her undergraduate degree from Western Carolina University and completed graduate coursework from Pfeiffer



University. She is a Certified Protection Professional (CPP) and a Certified Healthcare Protection Administrator (CHPA.)

B013 September 13, 2013
Friday 3:00 pm - 4:30 pm

1.5 hr Breakout Session – Level: Intermediate

Title: Look Sharp, Without Getting Stuck - Toolkits and Educational Approaches for Improving Sharps Safety

Presenters: Leslie S. Zun, MD MBA, Mary J. Ogg, MSN RN CNOR and Donna A. Ford, MSN RN-BC CNOR

Topic Overview: There is a high incidence of needlesticks in healthcare, and reducing the risk of sharps injuries for all healthcare workers is critical to ensuring patient and healthcare worker safety. During this three-part presentation, participants will gain valuable education and training in suture safety to reduce needlestick injuries and will recognize the benefits of collaborating with perioperative registered nurses to identify potential sharps hazards, leading to the development and implementation of best practices to prevent sharps injuries and reduce bloodborne pathogen exposure. A review of the AORN Sharps Safety Toolkit will be featured in discussing how to implement a successful Sharps Safety Program through a partnership between Employee Health and Perioperative Services. The session will conclude with a panel discussion led by the speakers and incorporating questions and answers from participants.

Session I: Employee Education for Suture Safety Outside the Operating Room (35 min)

Presenter: Leslie Zun, MD, MBA

Topic Overview: There is a high incidence of needlesticks in the healthcare environment. Studies have found that suturing was one of the most frequent causes of needlestick injuries. There is almost no educational material directed at suturing and proper suture technique. Suturing is performed in many settings, not only in the surgical suite, but also in emergency departments and clinics, and on medical and surgical floors. This presentation and accompanying video are designed to help prevent needlestick injuries from occurring by providing the rationale to reduce needlestick injuries related to suturing, other means for wound closure besides suturing, gloving, proper technique to suture and appropriate use of procedure trays. This presentation also includes the most current procedure for employee needlesticks. A discussion of best practices for reducing needlesticks will complement this session.

Objectives:

1. Discuss the incidence of needlestick injuries.
2. Evaluate techniques to reduce needlestick injuries.
3. Review proper suture procedure.

Speaker Bio:

Dr. Leslie S. Zun is the Chairman of the Department of Emergency Medicine at Mount Sinai Hospital in Chicago, IL and Chairman and Professor, Department of Emergency Medicine at the Rosalind Franklin University of Medicine and Science/Chicago Medical School in North Chicago, IL. His background includes a medical degree from Rush Medical College and a business degree from Northwestern University's J.L. Kellogg School of Management. He is board certified in Emergency Medicine by the American Board of Emergency Medicine. Zun served as chief operating officer and acting chief executive officer for a 200-bed hospital in Chicago. His research interests include healthcare administration, violence prevention and behavioral emergencies. His publications have addressed the administration of the hospitals and emergency departments, physicians' bonus and incentive plans, and quality improvement topics. He has presented his research and lectured on these topics both nationally and internationally. He is a board member of the American Academy of Emergency Medicine and American Association for Emergency Psychiatry and is active in many specialty organizations. Zun is a Medical Review Officer and responsible for employee health.



sibilities include providing professional, technical and management consultative services regarding perioperative nursing practice to AORN members, specialty assemblies, the Board of Directors, national committees and healthcare organizations. She is responsible for creating products and education materials that support the perioperative professional's safe workplace practice. Ogg has authored several recommended practices, including Sharps Safety in the Perioperative Setting, Managing the Patient Receiving Moderate Sedation/Analgesia Recommended Practice, Electrosurgery and Lasers. She managed the development of AORN toolkits for sharps safety, surgical smoke evacuation, workplace safety, and safe patient handling and movement in the perioperative setting.



Donna A. Ford is a Nursing Education Specialist, Division of Surgical Services, Department of Nursing, and an Assistant Professor of Nursing, College of Medicine, Mayo Clinic, in Rochester, MN. She has served on numerous AORN national committees and is currently serving her third year as Chair of the AORN National Clinical Nursing Practice Committee, which developed the AORN Sharps Safety Toolkit. Ford is certified in perioperative nursing and nursing professional development and has published and presented nationally on the topic of sharps safety. She is a member of AORN, the Association of Nursing Professional Development and Sigma Theta Tau.



Session II: Sharps Safety: Making It Stick! (35 min)

Presenters: *Mary J. Ogg, MSN RN CNOR and Donna A. Ford, MSN RN-BC CNOR*

Topic Overview: Reducing the risk of sharps injuries for all perioperative team members is a critical element to ensuring patient and workplace safety in today's environment. This presentation will provide insights into how to successfully collaborate and implement a Sharps Safety Program with the Employee/Occupational Health and Perioperative Services departments utilizing the AORN Sharps Safety Toolkit. Additional information will include:

- Methods to overcome the challenges of non-committed team members.
- Facility checklists to ensure readiness for an OSHA survey for sharps safety compliance.
- Tips for adapting existing toolkit educational presentations to meet individual hospital needs.
- Suggestions for maximizing the benefits of the components of the AORN Sharps Safety Toolkit.

Objectives:

1. State current trends in sharps injury statistics with perioperative team members.
2. Describe ways to use the AORN Sharps Safety Toolkit when implementing a successful Sharps Safety Program.
3. Identify techniques to ensure success with sharps safety.

Speaker Bios:

Mary J. Ogg is a Perioperative Nursing Specialist at the Association of periOperative Registered Nurses (AORN.) Her respon-

Session III: Panel Discussion, Q&A (20 min)

B014 September 13, 2013
Friday 3:00 pm - 4:30 pm

1.5-hr Breakout Session – Level: Intermediate

Title: Don't Be "Blue," Let's Talk Flu - Solutions for Surviving and Complying This Flu Season

Presenters: *Beverly Hagar, BSN RN COHN-S, Delynn Lamott, MS RN COHN-S, Desaree Vina, RN CPSO CHSP and Patricia Kinman, MSN, FNP-BC*

Moderator: *Lee Newman, MD MA FCCP FACOEM*

Topic Overview: This presentation on innovative methods of promoting flu vaccinations to healthcare workers includes three sessions, followed by a panel discussion and time for questions and answers from participants. The first session highlights Virginia Mason Medical Center, which became the first vertically integrated healthcare organization in the United States to implement a mandatory influenza vaccination program for its employees. Challenges faced during the implementation process will be shared, as well as the success experienced by the program during the past four years. The second session will explore the decision by Mount Carmel Health System to require all employees to receive a flu

vaccine as a condition of employment. The system's policy will be reviewed, in addition to strategies to evaluate exemptions, compliance and participation. The third session will feature efforts by Vanderbilt University and Medical Center to implement a large-scale, employer-based immunization clinic, Flulapalooza, which delivered more than 14,000 flu vaccines in a single day. The presenter will explain how the event served as a drill for the facility's emergency preparedness plan for mass vaccination using the Hospital Incident Command System.

Session I: Mandatory Influenza Vaccination: Survival Tips from the Trenches (25 min)

Presenter: *Beverly Hagar, BSN RN COHN-S*

Topic Overview: In 2005, Virginia Mason Medical Center became the first vertically integrated healthcare organization in the United States to implement a mandatory influenza vaccination program for its employees. Being the first had its share of challenges! The speaker will discuss the "pearls and pitfalls" of implementing a mandatory program and give practical advice on how to manage the process. She will discuss the hurdles Virginia Mason faced while implementing its program, including union issues and vaccine shortages. A mandatory vaccination program is not only feasible; it can result in extremely high vaccination rates, and can be successfully sustained and improved over the course of several years.

Objectives:

1. Identify at least three "pearls and pitfalls" when implementing a mandatory influenza vaccination program.
2. Review rationale for implementation of a mandatory influenza program.
3. Define long range success measures.

Speaker Bio:

Beverly Hagar has been a Registered Nurse since 1978 and received her BSN from the Intercollegiate Center for Nursing Excellence through Washington State University. Prior to working at Virginia Mason, she worked in occupational health at Highline Hospital & Pacific Medical Center and has a background in emergency nursing and specialty clinic management. She is a Certified Occupational Health Nurse Specialist, past Secretary and President of the Pacific Northwest AOHP Chapter and current Region 1 Director. Hagar has been involved with the mandatory influenza vaccination program at Virginia Mason since its inception and has spoken at multiple venues regarding the mandate, 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 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*. Virginia Mason was awarded the CDC National Influenza Vaccine Summit award for its Healthcare Worker Immunization Campaigns in 2007 and 2010.



Session II: Surviving the First Year of Requiring Flu Vaccines as a Condition of Employment (25 min)

Presenters: *Delynn Lamott, MS RN COHN-S and Desaree Vina RN CPSO CHSP*

Topic Overview: Mount Carmel Health System implemented a policy in September 2012 that required all employees to receive a flu vaccine as a condition of employment. All employees were required to receive flu vaccine by December 15, 2012, unless they received a medical or religious exemption. A committee was formed to review documentation of requests for exemption.

This presentation will discuss the wording of the policy, which made expectations very clear to employees, as well as minimized legal challenges. Discussion will also feature how medical and religious exemptions were evaluated, as well as strategies to track employee compliance, activities to increase employee vaccination rates, ways to keep managers informed of employee compliance, and how to deal with employees in opposition to receiving the flu vaccine.

The presentation will conclude with the outcome for employees who chose not to receive their flu shot and did not receive an exemption. Lessons learned during the first year of implementing this policy, as well as possible recommendations to change for next year, will also be highlighted.

Objectives:

1. Review how to write a policy that minimizes legal challenges.
2. Restate three strategies to increase compliance rates.
3. Explain three components to consider when allowing and evaluating medical and religious exemptions.
4. Demonstrate two strategies for dealing with employees who do not wish to comply with this policy.

Speaker Bios:

Delynn Lamott is currently employed as a Total Quality Manager overseeing Infection Control and Associate Health at Mount Carmel New Albany Surgical Center. She has more than 10 years of experience in occupational/employee health, including the start-up and development of the WorkWell Jackson Center for Occupational Medicine. She has co-authored and authored six articles in the AOHP Journal and has presented at several past AOHP national conferences for "Getting Started in Employee Health," "Success Story: Implementing Change in the Pre-Employment Process" and "Maximizing Your Leadership Skills." She is Past President of the Michigan AOHP Chapter and was Region 3 Director for AOHP from 2006 - 2010.



Desaree Vina is currently employed as the System Manager of Health Service for the Mount Carmel Health System. She has more than 13 years of infection prevention,



employee health and safety quality experience. She was part of the H1N1 planning for the health system in 2009, successfully driving the process for vaccination of more than 5,200 employees during a 45-day period. Vina has held several positions on the Board of Directors for her local chapter of APIC (Association for Professional in Infection Control and Epidemiology,) including President.

Session III: Flulapalooza! (25 min)

Presenter: *Patricia Kinman, MSN FNP-BC*

Topic Overview: On October 12, 2011, Vanderbilt University and Medical Center conducted a mass vaccination event titled "Flulapalooza." The event served as a drill for the facility's emergency preparedness plan for mass vaccination in the event of a pandemic or other biological emergency using the Hospital Incident Command System in a single site closed point-of-dispensing model.

During a single day at one site, 14,082 flu vaccines were delivered, with 12,850 given during an eight-hour period, breaking the existing Guinness World Record. A CDC researcher on large-scale dispensing and emergency response was on hand at Flulapalooza and declared this an excellent model for a closed point-of-dispensing.

This experience serves to illustrate the importance of flexibility and contingency planning utilizing an Emergency Operations Center and Incident Command System. Lessons learned and best practices for planning, communication, optimizing patient flow, documentation and maintaining environment of care will be shared.

Objectives:

1. Identify elements which help to optimize patient through-put in a mass vaccination clinic.
2. Demonstrate how to select and train vaccinators for a mass vaccination event.
3. Analyze how to leverage marketing options for a mass vaccination event.

Speaker Bio:

Patricia Kinman earned a Master of Science Degree in Nursing from Vanderbilt School of Nursing and a Bachelor of Science in Nursing from Berea College in Kentucky. She is an Instructor in Clinical Nursing at Vanderbilt School of Nursing and has maintained certification as a Family Nurse Practitioner from the American Nurses Credentialing Center since 1980. Kinman supervises the Occupational Health Clinic nurse practitioners and manages clinical operations, and she is responsible for Occupational Health Clinic quality assurance and environment of care issues.



Session IV: Panel Discussion (15 min)

Moderator: **Dr. Lee Newman** is a Professor in the Department of Environmental and Occupational Health, Colorado School of Public Health (CSPH) and in the School of Medicine, University of Colorado. As Director of the Center for Worker Health and Environment, CSPH, he leads research and community outreach programs on health promotion. He has more than 20 years of experience in occupational health and safety research, teaching and clinical practice, including educating graduate students, occupational health professionals and employers on worksite wellness. He is the founding director of the NIOSH-funded Mountain and Plains Education and Research Center, and founder/CEO of Axion Health, Inc.



B015 September 13, 2013
Friday 3:00 pm - 4:30 pm

1.5-hr Breakout Session – Level: Intermediate

Title: OSHA's Enforcement Crackdown on Recordkeeping: Special Emphasis and Common Misunderstandings

Presenter: *Stephen A. Burt*

Topic Overview: Are you recording injuries and illnesses that are not required to be documented on the OSHA 300 log? Are you aware of the many recent changes in the OSHA Recordkeeping Standard that may directly affect your facility? Recordkeeping violations are consistently on OSHA's "Top-Ten" list of most frequently cited violations. A request to produce your OSHA 300 logs from the past five years is likely to be an OSHA inspector's first act on your premises. Improper OSHA recordkeeping can skewer your statistics and make you a target for a much more in-depth OSHA inspection.

Objectives:

1. Identify the primary changes to the OSHA recordkeeping standard related to interpretations of the Occupational Safety and Health Review Commission (OSHRC).
2. Explain the method used to determine if an injury or an illness is reportable
3. Identify documentation required to meet recordability criteria and identify return to work recommendations.

Speaker Bio:

Stephen A. Burt is 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, as Corporate Director of Environmental Health for Carilion Healthcare System (Roanoke, VA,) he was responsible for OSHA, EPA and Joint Commission compliance and was awarded the prestigious Ameri-



can Hospital Association's Phoenix Award. During this time, he served as non-legislative appointee to the Joint Legislative Administrative Review Commission (JLARC.) Most recently, he served two years as the Corporate Administrator of Employee Safety for Inova Health System in Falls Church, VA, with responsibility in employee health and for OSHA compliance. Burt conducts more than 30 full-day OSHA, HIPAA and employee health seminars annually for the University of North Carolina, Duke University, East Carolina University, Association of Occupational Health Professionals in Healthcare, the Virginia Hospital and Healthcare Association, and the American Hospital Association, among others. He is a member of the Government Affairs National Committee and is the Past Executive Vice President of AOHP.

B016 September 13, 2013
Friday 3:00 pm - 4:30 pm

1.5-hr Breakout Session – Level: Advanced

Title: Diversion of Controlled Substances from the Healthcare Workplace - A Multi-Victim Crime

Presenters: *Keith H. Berge, MD and Kevin R. Dillon, PharmD RPh*

Topic Overview: This presentation covers the drug diversion prevention efforts currently in place at all Mayo sites. It first defines the nature of the epidemic of narcotic drug diversion sweeping the country and then follows the resulting addiction into the healthcare workplace. We will define how the crime of drug diversion from the workplace endangers our patients, co-workers, employers and the addicts themselves. We will discuss in detail the system we have created that has resulted in great success in the rapid recognition and confirmation of drug diversion, and share how others can duplicate our success.

Objectives:

1. Define the scope of the addiction problem created by diverted prescription drugs in the United States.
2. Review the dangers posed to multiple potential victims created by drug diversion from the healthcare workplace.
3. Examine the Mayo system and how the process has been duplicated by other healthcare systems in Minnesota.

Speaker Bios:

Dr. Keith Berge and **Dr. Kevin Dillon** are responsible for the prevention of and recognition of drug diversion from the Mayo Clinic across all Mayo sites in multiple states. Berge is a practicing anesthesiologist with a career-long interest in prevention of drug diversion. Dillon has also spent his career trying to improve drug control systems.



B017 September 13, 2013

Friday 3:00 pm - 4:30 pm

1.5-hr Breakout Session – Level: Advanced

Title: How We Care for Our Own: Identifying, Investigating and Responding to DiversionCrime

Presenters: *Nichole L. Capitanio, LISW-S CEAP and Susan I. Wilson, RN CCRN*

Topic Overview: Substance abuse and diversion of controlled substances represent a significant occupational health hazard in healthcare. As many as eight to 12 percent of health professionals will develop a substance-related disorder at some point in their careers (McCall, 2001.) High degrees of job stress, access to a variety of drugs, the tendency to self treat while focusing on the needs of others, and a prevailing belief by healthcare workers that they can control their own drug use put health providers at a high risk for diversion and substance dependency. Chemical dependency is a progressive, chronic disease that has an adverse effect on both quality of life and job performance. The health, safety and retention of these skilled professionals are essential to healthcare organizations.

This presentation provides a description of the response and management of substance abuse/diversion of healthcare workers in a large metropolitan hospital system. It will also provide an overview of an employer-sponsored program focused on nurses that promotes patient safety and employee health by supporting and monitoring impaired licensed health professionals through early intervention, treatment and workplace re-entry.

McCall, S.V. (2001). Chemically dependent health professionals. Western Journal of Medicine. 174(1); 50-54.

Objectives:

1. Describe common techniques of controlled substance diversion in the healthcare setting.
2. Examine data collection and documents required in review and investigation of controlled substance diversion.
3. Recognize suspicious behavior/suspected diversion in the hospital setting and how to respond to the event.
4. Evaluate a program that supports the health care professional vs. termination from employment.

Speaker Bios:

Nichole L. Capitanio is the Director of the Licensed Professionals Health Program (LPHP) for the Occupational Health Department at Cleveland Clinic. She is responsible for creating and managing the LPHP, which serves nurses and allied healthcare professionals of the Cleveland Clinic who have had their practice or license impacted by impairment, including chemical dependency or other physical or mental illness. The program focus is on the identification, rehabilitation, retention, monitoring and re-entry of licensed health professionals. Capitanio provides consultation to those concerned about a licensed



professional's functioning, facilitates evaluation and treatment, monitors professionals' progress in recovery, coordinates return to work and/or re-entry to practice, and develops educational programs. She is an experienced mental health professional with more than 20 years in direct service and employee assistance programs/services both internal and external to organizations. Capitanio has a Master's of Social Science Administration from Case Western Reserve University and is a Licensed Independent Social Worker with a Supervision designation. She is also credentialed by the Employee Assistance Certification Commission as a Certified Employee Assistance Professional.

Susan I. Wilson is the Nurse Manager of the Surgical Intensive Care Unit at Cleveland Clinic, with 33 years of experience in the Intensive Care setting. Of these 33 years, she has worked 13 years in a managerial role. She obtained her Diploma in Nursing from Huron Road School of Nursing in Cleveland, Ohio and her Bachelor of Science Degree in Nursing from Ohio University. She has been credentialed by the American Association of Nursing in Critical Care since 1982. Wilson manages the operation and practice of professional nursing and delivery of patient care on a 30-bed Surgical Intensive Care Unit. She establishes clinical direction for nursing care delivery, provides clinical supervision and maintains quality outcomes. She supervises all aspects of personnel management and development through coaching, counseling and accountability. Under her leadership, her unit was awarded the nationally recognized Beacon Award through the American Association of Critical Care Nurses and the Marilyn Tetonis Unit Excellence Award through Cleveland Clinic.

C001 September 14, 2013
Saturday 7:45 am - 8:45 am
1-hr General Session – Level: Basic

B

Title: Making Magic Happen: Worksite Wellness, a Key Building Block to Improving Health and Productivity of the National Workforce

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

Topic Overview: Today, more than ever, there is increasing evidence that the work environment and the overall health, safety and well-being of workers and their families are strongly connected. As occupational health professionals, it's essential to know why we need worksite wellness programs, and what makes a successful and sustainable program that promotes the optimal health for employees. This isn't always an easy thing to do. Worksite wellness is a comprehensive and coordinated effort consisting of both health protection and health promotion strategies implemented at the workplace that include programs, policies, benefits, environmental supports and links to the surrounding community. It often involves facing challenges around leadership commitment, lack of resources and the skills and knowledge to assess your employees' needs, and then design a program that is both effective and approachable for everyone to participate in. This session will review the evidence of worksite wellness programs to identify gaps in

research and knowledge. We will look at the evidence-based frameworks and practices that have been adopted and implemented and will discuss the role of worksite wellness programs and the Affordable Care Act. Lastly, we will provide you a chance to share your lessons learned and address approaches that you can take back to your worksite that will enhance your programs and have a positive impact on your employees' health behaviors and decisions.

Objectives:

1. Identify the evidence and gaps in research for worksite wellness programs.
2. Understand the movement toward integrating health protection and health promotion.
3. Discuss strategies to design a comprehensive and coordinated program.
4. Evaluate conclusions of adopting an effective and sustainable program.

Speaker Bios:

Dr. Lee Newman is a Professor in the Department of Environmental and Occupational Health, Colorado School of Public Health (CSPH) and in the School of Medicine, University of Colorado. As Director of the Center for Worker Health and Environment, CSPH, he leads research and community outreach programs on health promotion. He has more than 20 years of experience in occupational health and safety research, teaching and clinical practice, including educating graduate students, occupational health professionals and employers on worksite wellness. He is the founding director of the NIOSH-funded Mountain and Plains Education and Research Center, and founder/CEO of Axion Health, Inc.



Liliana Tenney received her Master's of Public Health Degree from the Colorado School of Public Health, University of Colorado campus, and is the Deputy Director at the Center for Worker Health and Environment at the Colorado School of Public Health. Tenney is the Associate 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 community and behavioral health. Her past work also includes research and work in the areas of occupational health and safety programs, pain management continuing education and cancer survivorship. Before pursuing her MPH and working at the Center, Tenney developed a strong background in marketing and social media with her work in event production, health promotion and wellness.



C002 September 14, 2013
Saturday 8:50 am - 10:20 am
1.5-hr General Session – Level: Advanced

A

Title: You Can't Train Away Needlestick Injuries - Strategies for Driving Sustained Needlestick Injury Reductions

Presenters: *Doris L. Dicristina, MS BSN RN COHN-S/CM T and Warner Hudson, MD FACOEM FAAFP*

Topic Overview: Needlestick injuries present a significant risk to the health of hospital employees and an institution's financial well-being. The causes of these costly injuries can be complex, and therefore, the solution often must be multifaceted. It is an undertaking that must have commitment from both management and frontline caregivers. To enjoy sustained success, hospitals must constantly monitor their progress and devise solutions that go beyond simple training/re-training programs. In this discussion, occupational health experts from two leading academic medical institutions will share with participants their strategies and perspectives on dealing with needlestick injuries and driving organizational change.

Objectives:

1. Identify the scope of the problem of needlestick injuries and its root cause.
2. Determine the root cause of needlestick injuries and when training to prevent injuries may not be the whole solution.
3. Quantify the post-injury costs compared to the cost of prevention.
4. Apply and advocate for changes in sharps safety and education.
5. Demonstrate success in needlestick injury prevention.

Speaker Bios:

Doris L. Dicristina received her Bachelor's in Nursing from William Paterson University, NJ, and her Master's in Health Care Management from the College of St. Elizabeth, Morristown, NJ. She has practiced occupational health for the past 22 years and is a Certified Occupational Health Nurse Specialist/Case Manager, legal nurse consultant and human resource professional. Currently, she is the Director of Employee Health and Wellness Services at Robert Wood Johnson University Hospital-New Brunswick, NJ. Dicristina is the Past President of the New Jersey Hospital Employee Health Nurses Association, has written articles on topics related to occupational health and is the recipient of several professional awards. She is a member of the American Association of Occupational Health Nurses, the New Jersey Association of Occupational Health Nurses, the New Jersey Hospital Employee Health Nurses Association, and the Association of Occupational Health Professionals in Healthcare. Dicristina has established her own professional consulting business, DLD Nurse Consultant, LLC and has consulted for several New Jersey hospitals on occupational health practices and workers' compensation case management. Additionally, she has served as a panel member at several workers' compensation conferences.



Dr. T. Warner Hudson was appointed Medical Director of the UCLA Ronald Reagan Medical Center Occupational Health Facility and Santa Monica-UCLA Medical Center and Orthopaedic Hospital Employee Health Office, effective March 1, 2010, which cares for about 60,000 UCLA campus and health system employees and volunteers. Prior to that, he was Medical Director for Cisco's on-site clinic for employees and dependents, caring for some 50,000 local employees and dependents. From 1987 to 2008, Hudson was Corporate Medical Director and Director of Health, Safety and Environmental Services for USCS International (later DST,) based in the Sacramento, CA. He is licensed in California and North Carolina and Board Certified in Occupational Medicine, as well as Family Practice. He obtained his Doctor of Medicine in 1976 from the University of North Carolina Medical School in Chapel Hill, NC, and completed his Residency in Family Practice in 1979 at the University of California Davis Medical Center. From 1980 to 1981, he did a one-year Fellowship in Family Practice with a focus on Preventive Medicine, also at UC Davis. In 1991, he completed a mini-residency in Occupational Medicine at the University of California, San Francisco. He is a certified Medical Review Officer and has extensive knowledge of: California workers' compensation laws; ACOEM guidelines; NIOSH, OSHA and EPA regulations; and hospital epidemiology. Following his initial family practice training, Hudson accepted a position as an Emergency Room physician at Woodland Memorial Hospital in Woodland, CA, where he practiced until July 1981. Since July 1979, he has worked at and held various positions at UC Davis, including Assistant Clinical Professor in the Department of Family Practice and Volunteer Clinical Faculty. From April 2011 to May 2012 Hudson served as President of ACOEM.



C003 September 14, 2013
Saturday 10:35 am - 11:35 am
1-hr General Session – Level: Advanced

A

Title: Workplace Violence – Being Safe at Work is Everyone's Right

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

Topic Overview: According to the Occupational Safety and Health Administration (OSHA) (2011,) workplace violence is "any act or threat of physical violence, harassment, intimidation or other threatening disruptive behavior that occurs at the work site." It ranges from verbal and physical threats to abuse/assault and can escalate to the ultimate end – homicide. Homicide is the fourth leading cause of occupational injury fatalities in the United States, and in 2010, the U.S. Bureau of Labor Statistics reported that 506 occupational homicides occurred out of 4,547 workplace fatalities, which is 11 percent. OSHA also indicates that close to two million cases of workplace violence are reported in the United States yearly, but this is very under-reported for a variety of reasons, the main one being fear of retaliation by the very people who are the cause of workplace violence. These statistics are quite sobering. Education on identifiers of

potential workplace violence and bullying, as well as preventive measures to help reduce the likelihood of workplace violence from occurring, are important to bring this to the forefront and give all employees the right they deserve – the right to work in a safe environment.

Objectives:

1. Identify one sign of workplace violence.
2. Recall one statistical fact relative to workplace violence.
3. List one measure to aid in preventing the likelihood of workplace violence from occurring.
4. List one measure a facility can implement to aid in preventing workplace violence from occurring.

Speaker Bio:

Karen Karwowski is the Nurse Manager of Employee Health Services for Henry Ford Hospital and Health Network and West Bloomfield Hospital, which employ approximately 19,000 of the 25,000 employees of the health system throughout southeastern Michigan. Employee Health Services 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 25 years in various hospital and in-patient sub-acute settings, including behavioral and geriatrics. She has worked in many capacities, including 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 is also a Board Certified Healthcare Safety Professional.



C004 September 14, 2013
Saturday 11:40 am - 12:40 pm
1-hr General Session – Level: Basic

B

Title: The Other End of the Stethoscope

Presenter: Marcus Engel, MS

Topic Overview: This session provides insight and strategies for improved compassion and communication in patient care. Drawing on personal experience, the speaker reveals how effective communication and simple human presence are the cornerstones of a positive patient experience. This presentation honors the difficult work done by healthcare professionals and inspires audience members with positive stories which show appreciation for the field of healthcare.

Objectives:

1. Review patient care perspectives from a patient dealing with trauma.
2. Explore important and distinct communication skills from the viewpoint of a “new” patient.
3. Examine the importance of, and unique ways to work with, the families of patients.

Speaker Bio:

Marcus Engel has a Master’s Degree in Narrative Medicine from Columbia University in New York City. He is an expert in communicating the patient’s perspective and inspiring healthcare professionals to excellence. After being blinded and catastrophically injured by a drunk driver, he endured years of hospitalization, rehab and recovery. He is a professional speaker and has authored several books, including *After This: An Inspirational Journey for All the Wrong Reasons*, *The Other End of the Stethoscope* and *I’m Here: Compassionate Communication in Patient Care*.

