

# Healthcare: Breakout Session #1

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National Personal Protective Technology Laboratory  
Pittsburgh, PA**

**Personal Protective Technology Stakeholder Meeting  
March 20, 2012**

# Breakout #1

## Agenda

- **Background**
- **Where We Started**
- **Where We Are**
- **Overview of Session**



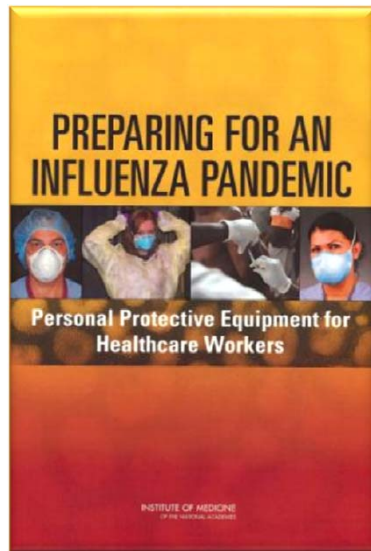
# Healthcare Sector Posters

Poster #	Poster Topic	Name	Organization
HC1	Relationship between safety climate, demographics and respiratory protection policies and practices in acute care hospitals	Cline, Kari	University of Minnesota
HC2	Know It's NIOSH Approved	Coyne, Judi	NPPTL SCSST
HC3	Developing the Nonrespiratory Personal Protective Equipment Conformity Assessment Framework for the Nation	D'Alessandro, Maryann	NPPTL OD
HC4	Respiratory Protection and Influenza-laden Cough Aerosols in a Simulated Medical Examination Room	Lindsley, Bill	NIOSH HELD
HC5	Scoring hospitals using written respiratory protection programs and survey responses based on the OSHA respiratory protection standard	Sietsema, Margaret	University of Illinois at Chicago
HC6	Occupational Health Nurses and Respiratory Protection Competency	Taormina, Deborah	University of California San Francisco School of Nursing
HC7	Development and Characterization of a New Test System to Challenge Personal Protective Equipment with Virus-Containing Particles	Vo, Evanly	NPPTL TRB
HC8	6-Year Trends in Healthcare Personnel Exposures to Respiratory Infectious Hazards	Yarbrough, Mary	Vanderbilt University
HC9	Metrics for Use in Evaluation of Hospital Respirator Programs	Yarbrough, Mary	Vanderbilt University
HC10	Laboratory Study to Assess Causative Factors Affecting Temporal Changes in Filtering-Facepiece Respirator Fit: Part III – Two Year Assessment of Fit Changes	Zhuang, Ziqing	NPPTL TRB

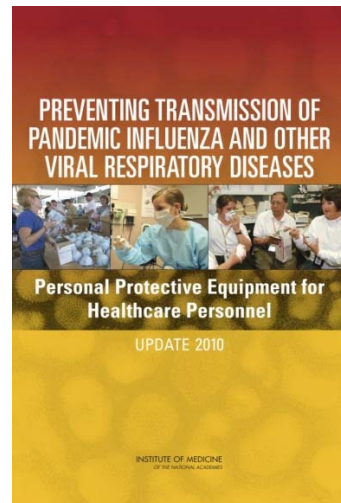
# Healthcare Workforce

- **Fastest growing industry sector**
- **About 17 million workers (11% of the U.S. workforce)**
- **Includes 12 of top 20 fastest growing occupations**
  - Highly diverse workforce
  - Highest percentage and number of females
  - Highest percentage of African-Americans
  - Highest in total number of Asians
- **2<sup>nd</sup> with over 30% of all lost-time nonfatal occupational illness and injuries**
  - Nursing aides, orderlies and attendants, and registered nurses

# National Academies Evaluations provided high level scientific input to PPT Program



- Understanding influenza transmission
- Commit to worker safety and use of PPE
- Innovate and strengthen PPE design
- **Personal Protective Equipment (PPE) for Healthcare Workers Action Plan, NIOSH Docket Number 0129**
- <http://www.cdc.gov/niosh/docket/archive/docket129.html>



- **Support original recommendations**
  - Effective interventions
  - Culture of safety
  - Improve fit

<http://www.cdc.gov/niosh/npptl/nationalacad.html>

# CDPH Respirator Use Study

**Objective:** Describe extent to which hospitals in California have implemented required elements of RPPs for H1N1 Influenza

- **Assess Healthcare worker:**

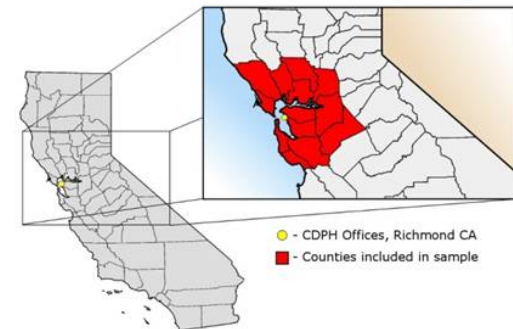
- Barriers to proper respirator use
- Knowledge, attitudes, and beliefs regarding N95 respirators
- Workplace safety climate

- **Study includes surveys, observations and feedback from hospitals**

- **Pilot completed in December 2009**

- **Final report received April 2011**

- **16 acute care hospitals evaluated**



	CA n (%)	Sample n (%)
<b>Type</b>		
City/County	18 (5.8)	1 (6.3)
District	27 (8.7)	2 (12.5)
For-profit	65 (21.0)	2 (12.5)
Non-profit	192 (62.1)	10 (62.5)
University	7 (2.2)	1 (6.3)
<b>Size</b>		
< 200 beds	154 (49.8)	8 (50.0)
≥ 200 beds	155 (50.2)	8 (50.0)
<b>Area</b>		
Rural	40 (12.9)	2 (12.5)
Non-rural	269 (87.1)	14 (87.5)
<b>Total</b>	<b>309</b>	<b>16</b>

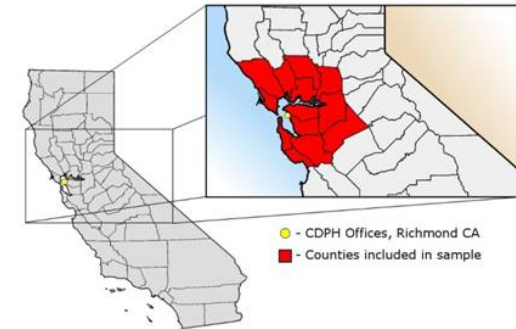




# CDPH Respirator I&E Study

**Objective:** Provide CA hospitals with useful tools to improve their respiratory protection programs.

- Identify the specific program components that are the weakest
- Develop useful tools that could be implemented by hospital respiratory protection program administrators
- Evaluate the usefulness of the tools
- Adapt the tools for widespread distribution



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# Demonstration and Sentinel Surveillance System of PPE Usage in US Healthcare Workers

**Objectives:** Determine the feasibility to identify, describe, develop, pilot, monitor and evaluate PPE surveillance systems used in a medical center setting.

- Develop data collection points at VUMC (PPE usage, types, selection, fit-test, clearance, compliance, resources, recalls, outcomes etc.)
- Pilot System at VUMC in 2011
- Use data to Establish “Best Practices”
- Develop a National PPE Usage Surveillance System

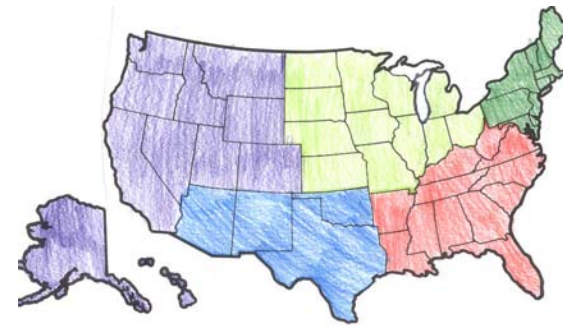




# Expansion of Respirator Use Assessment

## Five Region Influenza Studies

- **West**
  - California Dept. Public Health
- **Midwest**
  - University of Minnesota
  - Michigan Public Health Institute
- **Northeast**
  - New York State Department of Health
- **Southeast**
  - University of North Carolina
- **Contracts awarded: September 2010**
- **Kickoff meetings: October 2010**
- **Challenges: New Guidance (CDC guidance Sept 2010 – N95 to facemask)**



# Respirator Studies



\* Respirator Evaluation  
for Acute Care Hospitals

# Healthcare Breakout Session 1

9:00 - 10:30  
am

Breakout session 1:

Yeager

Respirator Evaluation in Acute Care Hospital (Reach II) Regional Results

Presenting Panel: Dr. Lisa Brosseau (MN), Dr. Eileen Franko(NY), Dr. Barbara Materna(CA), Dr. Edie Alfano-Sobsey(NC), Lauren Joe (CDPH), Li Richie (MI)

## Topics:

Discuss the Findings of the Reach II Studies

- Responsible respirator program administration
- Selection of appropriate respirators for various tasks
- Medical evaluation and clearance for respirator use
- Fit testing
- Training of wearers
- Length of use and maintenance/storage

# Quality Partnerships Enhance Worker Safety & Health



Visit Us at: <http://www.cdc.gov/niosh/npptl>

***Disclaimer:***

***The findings and conclusions in this presentation have not been formally disseminated by the National Institute for Occupational Safety and Health and should not be construed to represent any agency determination or policy.***