Sharps Injuries among Home Healthcare Workers Affiliated with Massachusetts Hospitals, 2001-2004

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Introduction

- Why sharps injuries?
- Why among home health care (HHC) workers?
- Why hospital affiliated?
- Why in Massachusetts?

- System type: exposure surveillance
- "Sharps injury" definition: percutaneous injury from a contaminated (with blood or other potentially infectious materials) sharp device or item (sharps)
- Population under surveillance: health care workers affiliated with MDPH licensed hospitals

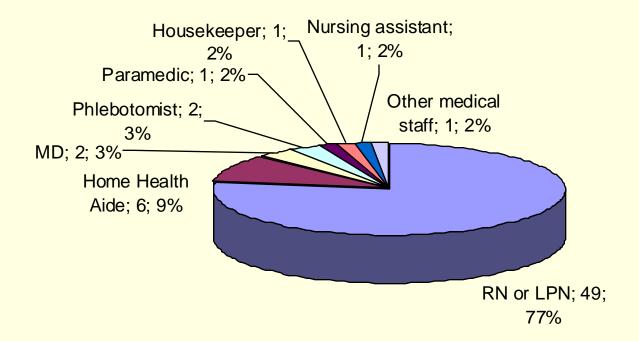
Data elements of interest to this study:

- Date of exposure incident
- Employment status
- Occupation
- Department or work area where exposure incident occurred
- Device or item that was involved in the injury
- Was it a safety device?
- Purpose or procedure for which the sharp was used or intended
- How did the injury occur?

Methods

- Sharps injury events selected for this study occurred
 - -- from the last quarter of 2001 to 2004
 - -- to healthcare workers in a patient's home or to home healthcare (HHC) workers elsewhere
- Descriptive statistics based on coded categorical data
- Content analysis of narratives

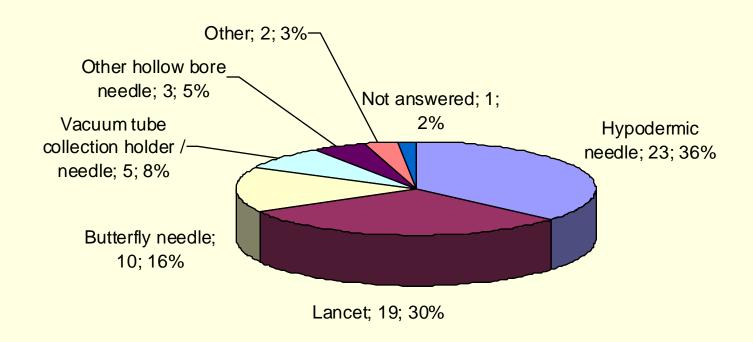
Sharps injuries among HHC workers* by occupation, N=63, 2001-2004**



^{*} affiliated with hospitals

^{**} In 2001 data was collected only for the last quarter of the year

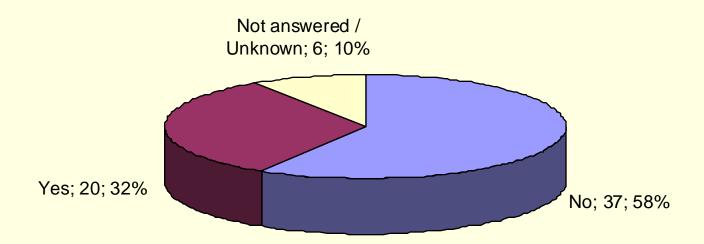
Sharps injuries among HHC workers* by device involved in the injury, N=63, 2001-2004**



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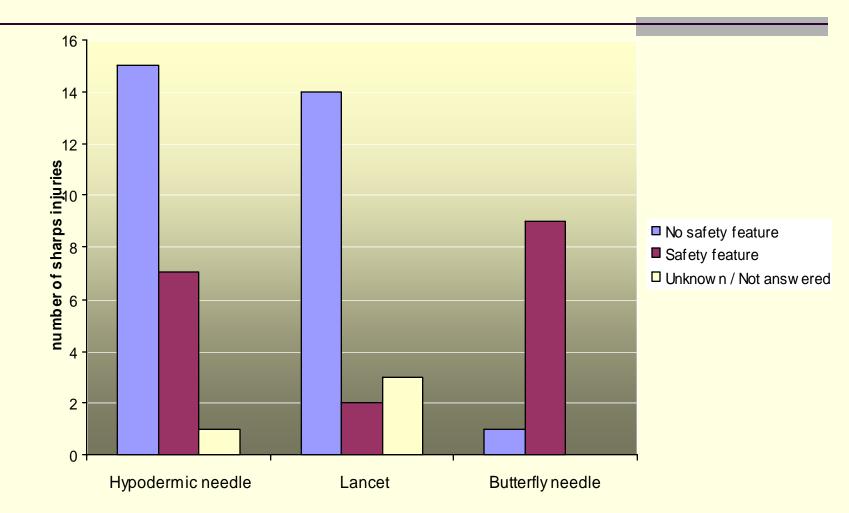
Sharps injuries among HHC workers* by safety devices, N=63, 2001-2004**



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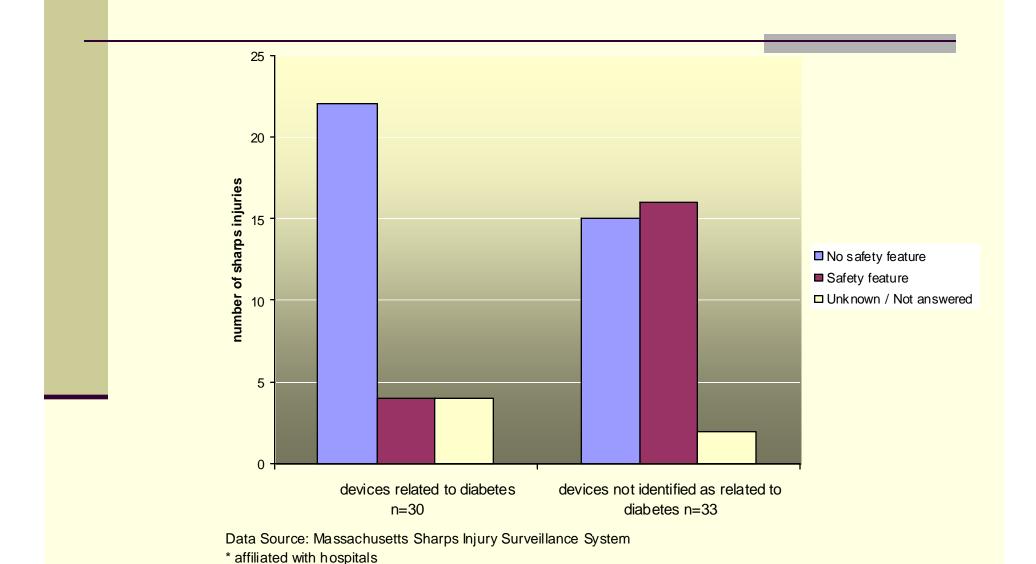
Sharps injuries among HHC workers* by selected devices and safety, N=63, 2001-2004**



^{*} affiliated with hospitals

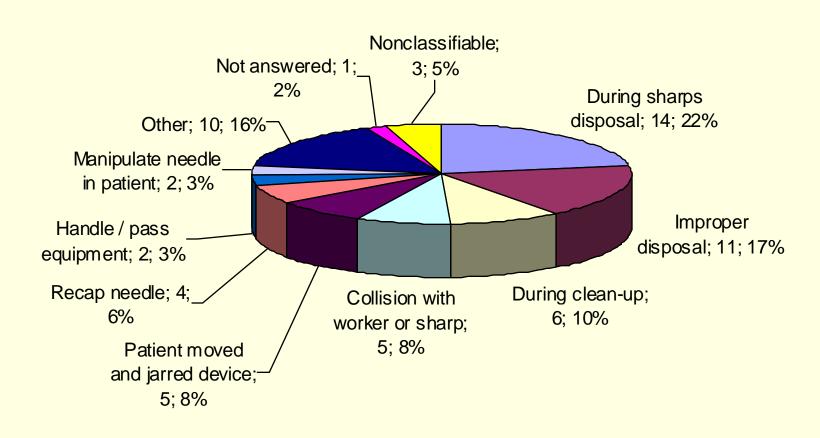
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Sharps injuries among HHC workers* by safety devices, N=63, 2001-2004**



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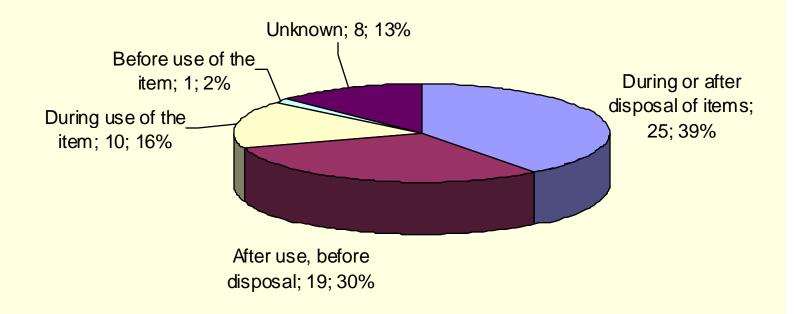
Sharps injuries among HHC workers* by how the injury occurred, N=63, 2001-2004**



^{*} affiliated with hospitals

^{**} In 2001 data was collected only for the last quarter of the year

Sharps injuries among HHC workers* by when the injury occurred , N=63, 2001-2004**



^{*} affiliated with hospitals

^{**} In 2001 data was collected only for the last quarter of the year

Limitations

- Small number of observations
- Data collection instruments not tailored to HHC
- Unknown underreporting rates of sharps injuries specific to HHC
- Lack of denominator data

Conclusions

- HHC workers are at risk of sharps injury
- Majority of injuries are preventable by use of effective safety devices and proper disposal
- Possibility to focus efforts on special group of medical devices and patient population
- More work on efficacy of specific safety devices is needed

Proposed data elements specific to HHC sharps injuries

- Who made the determination which medical device to purchase
- Original user of the device
- Location where injury occurred (pick list of possible locations in the house and car)
- Pick list of circumstances of sharps injuries should be tailored to HHC industry (for example, lancet and insulin needle should be at the top of the pick list for devices)

Policy recommendations

- Consideration of HHC worker safety for coverage of devices by medical insurance
- Infrastructure for community disposal of sharps
- Education for patients on proper sharps disposal when infrastructure is in place
- Continuous monitoring by manufacturers of products' performance, including
 - engineered safety feature in medical devices
 - -- disposal containers

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