



2014 ACIPC Sharps Injury Survey – Final Results

Terry Grimmond¹ FASM, BAgrSc, GrDpAdEd, Nicole Vause² RN, MAdvPrac, GrCert(IC&P), CICP, & Jane Parker³ RN, BNurs.

¹Grimmond & Associates, Microbiology Consultants, NZ; ²Clin Pract Consultant (IP&C), Mt Gambier&DHS, CHSALHN SA; ³Worker Hth Clinical Service Consultant, Workforce Directorate, SALHN, SA Health

Background

- The Aust Council on Healthcare Standards publishes sharps injury (SI) data annually, using “patient days” as denominator.
- However, for HCW to relate to exposure risk, and for easy international comparisons, a “personal” denominator is needed.
- A 2007 ASCC survey showed nurse SI rate was an alarming 15.3/100 FTE with 40% unreported. Confirmation was needed.
- In 2015, ACIPC Board approved a member-survey but 1st survey yielded only 36 hospitals.
- In 2016 we appealed for greater participation.

Study aims

- Ascertain national HCW SI incidence
- Raise awareness of SI risk.
- Confirm feasibility of study model.
- Calculate national annual SI estimate.

Method

- A 10 question survey tool was developed and accessed via ACIPC website or email.
- The survey Q’s sought 2014 data on:
 - Total SI; Nurse SI; Doctor SI; Surgery SI
 - Three denominators:
 - Average daily overnight-patient census (“Overnight occupied beds”)
 - Average annual total staff FTE
 - Average annual nurse FTE.
- ACIPC members were canvassed via ACIPC newsletters, listserve and website.
- Access to state SI databases was also sought.

Results

- 307 hospitals from 6 states participated, making the survey one of largest in Australia.

2014 SI Incidence

SI/100 Occ beds	SI/100 FTE (all staff)	SI/100 FTE (Nurses)
15.2	3.1	3.1

% of SI Reported

Nurses	Doctors	Others
50.7%	37.0%	12.3%

- 46.9% of SI occurred during Surgical procedures.
- With increased Day-stay, “occupied beds” is no longer valid as a denominator.
- Estimated 30,000 HCW sustain SI annually – 80/day.

Conclusions

- Australian HCW remain at high SI risk.
- Use of safety engineered devices is essential.
- A national, publicly available SI database, with multiple denominators, is needed
- SI risk needs addressing at a legislative level

Acknowledgements

We are very grateful for the input from: ACIPC Board, Exec & members; Country Health SA Local Health Network; the VICNISS Coordinating Centre, Victorian Department of Health & Human Services; Hunter New England Health; and Ramsay Healthcare.

Contact: Terry Grimmond terry@terrygrimmond.com



Do not cover this area - Do not cover this area - Do not cover this area - Do not cover this area - Do not cover this area - Do not cover this area - Do not cover this area - Do not cover this area - Do not cover this area - Do not cover this area.

