Specific recommendations to policy makers, managers, health care professionals and OSH specialists for the prevention of occupational infectious risks among health care workers

Introduction

The International Social Security Association (ISSA) and the International Commission on Occupational Health (ICOH) published a series of joint recommendations for the health protection of health care workers in October 2004 in Kitakiushu, Japan. Based on a set of factual observations, these recommendations, which can be found in the appendix to this document, are addressed to policy makers, managers, health care professionals and OSH specialists.

The seminar on occupational infectious risks in health care organised on 4 and 5 March 2008 in Cotonou, Benin, during the 7th Panafriican Congress on Occupational Health (PACOH) under the aegis of the ISSA Health Services Section, was the occasion for an update on occupational infectious risks for health care workers in the African context and produced a number of specific recommendations for the prevention of occupational infectious risks to health care workers. The seminar was held in conjunction with the 1st French language symposium on blood exposure and the protection of health care workers in Africa, organised on 3 March 2008 as a side event to the PACOH by GERES, the study group on health care workers’ exposure to infectious agents, whose findings provided inputs to these recommendations.

By way of introduction to these specific recommendations, it is recalled that they supplement those published by ISSA and ICOH at Kitakiushu in 2004, which were restated on this occasion, along with the facts on which they are based. In particular, the fact that “regarding infectious risks, prevention is mostly insufficient in countries where these diseases are highly prevalent”, remains as true as ever. These recommendations are applicable globally in order to achieve the best level of prevention. Lastly it is specified that the term “health care workers” means all workers that either directly or indirectly contribute to caring for patients, including support and maintenance workers.

It is recalled that the health protection of health care workers is a basic right, and it is the responsibility of policy makers to ensure it is respected.
In addition to these recommendations on prevention, it is recalled that if a health care worker contracts an infectious disease in the course of his or her occupational duties, he or she must be compensated, either on the basis of occupational diseases or accidents, depending on the type of infection and the circumstances of the contamination. It is therefore recommended that those countries that have not yet done so include these diseases in their compensation systems.

**Recommendations for the prevention of occupational infectious risks among health care workers**

- Specific resources must be dedicated to health care workers’ protection, with both an occupational and public health objective, as part of a national prevention policy. Some of the resources allocated at national level or by international organisations, in particular as part of the treatment of patients infected by the human immunodeficiency virus, should be available for the protection of health care workers.

- In each establishment, a specific infectious occupational risk prevention plan aimed at ensuring the highest possible level of prevention must be drawn up based on risk assessment and made an integral part of a general prevention plan taking account of all occupational risks and with active employee involvement. In parallel to this risk prevention plan, a monitoring programme must be put in place to ensure periodic risk assessment and improve prevention.

- Information given to health care workers concerning the infectious risks they are likely to be exposed to in the course of their occupational duties must be provided systematically and with full transparency. In order to effectively implement the recommended prevention measures, health care workers must be given training, which is regularly updated and appropriate to their job and local conditions. This requires management at establishment level to make a strong commitment which must include allocation of resources.

- The prevention of occupational infectious risks must be part of **health care procedures and policies** to combat nosocomial diseases, as part of a multidisciplinary approach involving particularly specialists in infectious disease, hygiene and occupational health.

- The resources needed to ensure **general hygiene precautions**, or “standard precautions”, must be made available to all health care workers, in all health care organisations.

- Whenever a **new infectious disease** is detected, in whatever part of the world, the risk of transmission to health care workers must be analysed so that appropriate anticipatory preventive measures can be taken.

- The prevention of **blood-borne infections** requires the organisation of an effective policy for the prevention of blood exposure, specifically including:
  - a monitoring programme, in which accidents are recorded and analysed;
  - the use of suitable waste collectors for sharp objects and safety equipment, for which priority should be given to safe venous blood sampling.

- The prevention of **airborne infections** must combine measures to isolate the patient (if relevant for the infection concerned) with its early treatment, technical prevention measures and appropriate respiratory protection equipment.

- A national policy is required for the **management of health care waste** with infectious risks. It must be comprehensive, covering sorting, collection, transportation and treatment, and ensure end-to-end absence of contact with the waste. Final treatment must not generate biological or toxic risks for the public or the environment.

- All workers must be given **free medical monitoring and advice** as well as psychological support, in particular as regards the steps to be taken following accidental exposure to an infectious risk, and must have access free of charge to post-exposure treatment, depending
on the assessment of the risk. This medical care service must be ensured in compliance with confidentiality requirements.

- Free vaccination programmes for all workers must be put in place, as appropriate to each region's epidemiological situation. In particular, all health care establishment workers must be immunised against the hepatitis B virus. Immunising workers should not be taken as a pretext for reducing other prevention measures.

Fait à Cotonou, le 5 mars 2008

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Appendix

Recommendations for protecting Health Care Workers’ Health

Facts

- Health care facilities’ main “resource” is the staff comprising different professional groups. Whatever the group, health care professionals are highly committed to their work and emphasize care quality given to patients, sometimes to their own health detriment.

- Occupational health risks in health care work are numerous. They are related to exposure to the following: infectious agents, various chemicals (including drugs), allergens, radiation, heavy musculoskeletal loads, shift work, physical violence, various forms of mental charge and psychological stress.

- Occupational risks prevention for health care workers varies from country to country. In some countries preventive measures are fairly well developed, in others they are practically non-existent.

- Health care workers often have little knowledge of their occupational risks as well as preventive means.

- Regarding infectious risks, prevention is mostly insufficient in countries where these diseases are highly prevalent.

Recommendations for policy makers, managers, health care professionals and occupational health and safety specialists

- Occupational risks prevention needs to be an integral part of management, administration and assessment processes, particularly health care procedures and health care quality assessment.

- Occupational health and safety services must be available for all health care workers (HCWs) whatever health care facilities.

- All HCWs occupational risks must be regularly assessed, covering physical, chemical, ergonomic, biological and psychosocial work environment.

- Systematic occupational risks prevention programmes must be defined, allocating specific means required. HCW must actively participate in planning and implementation of these programs.

- All health care staff must receive information and training on occupational risks and preventive means, including hygiene.

- Collective protective measures, including those related to hand washing and other personal hygiene facilities, must be implemented. Appropriate personal protective equipment must be provided to staff.
• Occupational infectious risks prevention must be integrated into each organization’s hygiene policy: nosocomial infections’ fight includes protective measures for health care workers.

• Health care staff immunization programmes’ implementation is necessary. Access to medical advice, vaccination and, if needed, post-exposure prophylaxis must be provided free of charge.

• Prevention programmes must be reviewed, and risks regularly reassessed to improve prevention.

Kitakiushu, October 2004