

Occupational health interventions for COVID-19 in healthcare facilities during the 3rd wave

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Objectives

 To discuss the rational for OHS intervention following our experience working with COVID 19 pandemic in healthcare facilities

"The health & safety of health workers is a global priority to prevent collapse of healthcare systems and transmission from hospital to the community"

Wilson et al. Anaesthesia 2020

COVID-19 at work

Occupational Disease vs. workplace issue

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GENERAL NOTICES • ALGEMENE KENNISGEWINGS

DEPARTMENT OF EMPLOYMENT AND LABOUR NOTICE 387 OF 2020

DIRECTIVE ON COMPENSATION FOR WORKPLACE-ACQUIRED NOVEL CORONA VIRUS DISEASE (COVID-19)

Basics in planning COVID-19 OHS interventions

HOST

"State of
health &
associated risk
factors" of the
HWs

COVID 19 infection

Droplet /
Contact /
Airborne

AGENT

(SARS-Cov-2)

SOURCE

People (patients, coworkers & visitors)

ENVIRONMENT

"the workplace
/ where HWs
carry out
routine
activities e.g.
the casualty"

Factors to consider in OHS interventions in healthcare settings

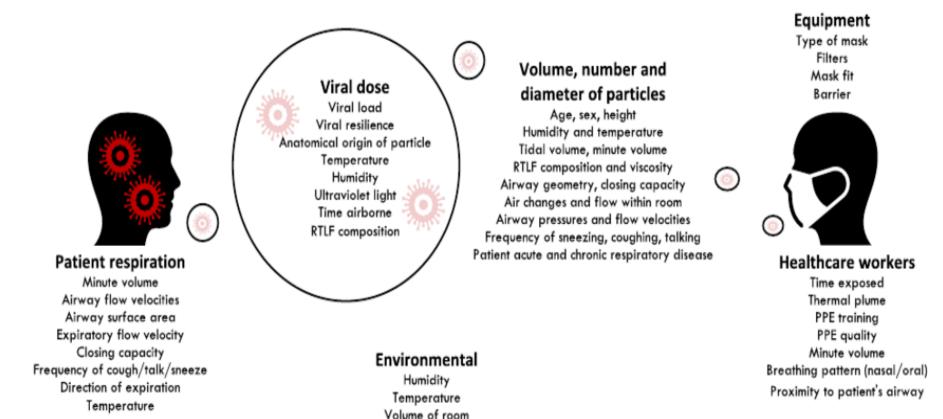


Figure 1 Key determinants of healthcare worker aerosol transmission in spontaneously breathing patient. RTLF, respiratory tract lining fluid; HCW, healthcare worker; PPE, personal protective equipment.

Local air currents Rate of air change

Source of infection in hospital





SARS-CoV-2 infection risk in Healthcare

- Exposure risk factors:
 - being in the same space with an infected patient
 - Contact with ≥ 1 infected patient
- Work close contacts
 - longer duration of verbal interaction
 - sharing a tea room
 - Sharing of transport
- Symptom severity as a factor correlating with SARS-CoV-2 transmission

Mode of transmission of SARS-CoV-2 in healthcare settings

Droplet precautions to be observed..., with the addition of airborne precautions around Aerosol Generating Procedures – WHO /NDOH/NICD



Review

Modes of Transmission of Severe Acute Respiratory Syndrome-Coronavirus-2 (SARS-CoV-2) and Factors Influencing on the Airborne Transmission: A Review

Mahdieh Delikhoon 1, Marcelo I. Guzman 20, Ramin Nabizadeh 3 and Abbas Norouzian Baghani 3,*



Contents lists available at ScienceDirect

Atmospheric Environment

journal homepage: http://www.elsevier.com/locate/atmoseny

Community evidence of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) transmission through air

Guozhen Lin ^{a, 1}, Shiyu Zhang ^{b, 1}, Yi Zhong ^{c, 1}, Lin Zhang ^d, Siqi Ai ^b, Kuibiao Li ^e, Wenzhe Su ^e, Lan Cao ^e, Yuteng Zhao ^f, Fei Tian ^b, Jinrong Li ^g, Yinglin Wu ^b, Chongshan Guo ^c, Rongfei Peng ^h, Xinwei Wu ⁱ, Pingsheng Gan ^h, Wei Zhu ^{j, **}, Hualiang Lin ^{b, ***}, Zhoubin Zhang ^{k, *}

Clinical Infectious Diseases





Airborne Transmission of Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2): What We Know

Jonathan M. Samet, Kimberly Prather, Georges Benjamin, Seema Lakdawala, John-Martin Lowe, Arthur Reingold, John Volckens, and Linsey C. Mar



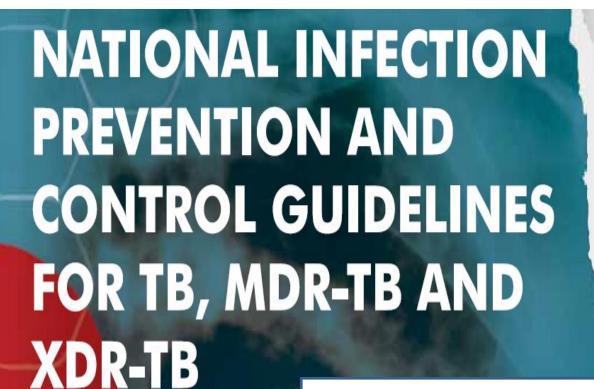
Peri-operative medicine, critical care and pain



Airborne transmission of severe acute respiratory syndrome coronavirus-2 to healthcare workers: a narrative review

N. M. Wilson X, A. Norton, F. P. Young, D. W. Collins

First published: 20 April 2020 | https://doi.org/10.1111/anae.15093 | Citations: 135



2015

HENCE WE RECOMMEND THAT THE HEALTH RISK
ASSESSMENT SHOULD GUIDE THE TYPE OF CONTROLS
INCLUDING RESPIRATORY PROTECTION

Work environment

- Ventilation
 - Natural ventilation inadequate
 - Mechanical ventilation
 - Installing high-efficiency air filters
 - Increasing ventilation rates in the work environment
 - Installing physical barriers, such as clear plastic sneeze guards.
 - Specialized negative pressure ventilation in some settings, such as for aerosol generating procedures (e.g., airborne infection isolation rooms in healthcare settings and specialized autopsy suites in mortuary settings).
- Hygiene
- Reduce congestion

Role of leadership

National & Provincial government

- Local Management critical role
 - Lacks the culture of OHS
 - OHS a secondary thought if at all
 - Preoccupied with provincial compliance "ticking boxes"
 - Health & Safety Committees
 - Not empowered

COVID-19 workplace programme

 COVID-19 OHS Standard Operating Procedures at facility level & training

- Facilities have NO budgets for COVID-19 OHS / IPC
 - none of the facilities increase their investment timeously
 - Silos with a multidisciplinary team (IPC & OHS)
 - Infrastructure & Equipment
 - Perverse incentive? decisions made at a provincial level!

COVID-19 Information

 lack of an Occupational Health and Safety Information System;

 Locally collected information not utilized for decision making & planning locally!

- No / poor sharing of information with workers
 - Rely on formal management platforms

What we hoped to find & the reality

- SARS-CoV-2 OHS programme:
 - Prevent disease before it ever occurs
 - Policy
 - Identify hazards & controls
 - No regular cleaning of environment
 - Soap & water NOT always available
 - Education & training (continuous)
 - Vaccinations
 - Behavior change
 - Social distancing not always adhered to!
 - Health Promotion
 - Detecting & treating disease COVID-19 ASAP
 - Screening
 - Testing & Treatment
 - manage long-term implications
 - Vocational rehabilitation
 - Placement & compensation
 - Mental health
 - Procedure on Incapacity Leave and Ill-health Retirement

Based on our observations we recommend more targeted but simple interventions in a continual manner

Below are some simple but essential interventions

COVID-19 standard operating procedure

 "...is a procedure specific to your facility that describes the activities necessary to complete tasks in accordance with regulations/policy...."

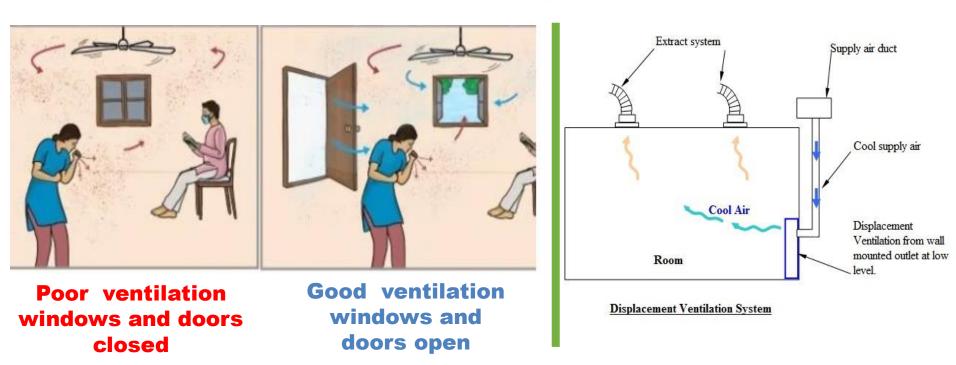
 Example of an SOP steps to take when an employee tests positive for COVID-19

Communication





Keep the breathing air clean / ventilation



Always open doors & windows if you can OR ask your for mechanical ventilation

Social distance









Keep your hands & environment clean



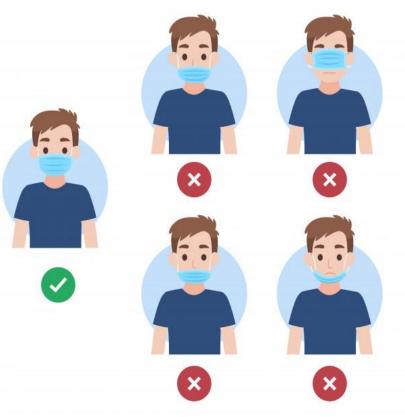
Regularly clean frequently touched surfaces.



Wash hands thoroughly with soap and water.

Wear your mask correctly – cover nose & mouth at all times







"Not all of us can do great things.
But we can do small things with
great love." - Mother Teresa

SlaDius asa

Ngiyabonga