NATIONAL PRACTICE OF THE REPUBLIC OF BELarus
IN PREVENTING THE INFECTION OF HEALTHCARE WORKERS WITH BLOOD-BORNE PATHOGENS

IN THE CONTEXT OF EUROPEAN COUNCIL DIRECTIVE 2010/32/EU

Svetlana Lukashik

16 April 2013
Vienna, Austria
WHO

INFECTION DISEASES IN HEALTHCARE WORKERS ASSOCIATED WITH THEIR PROFESSIONAL ACTIVITY ARE CLASSIFIED AS HOSPITAL-ACQUIRED INFECTIONS

REPUBLIC OF BELARUS

Measures to prevent healthcare workers from being infected while performing their professional duties have been incorporated into legislation on the prevention of hospital-acquired infections
LAW OF THE REPUBLIC OF BELARUS
7 January 2012 No. 340-3

ON THE SANITARY AND EPIDEMIOLOGICAL WELFARE OF THE POPULATION

Adopted by the Palace of Representatives on 14 December 2011
Approved by the Council of the Republic on 20 December 2011

Intended to establish the legal and organisational basis for preventing environmental factors from having an adverse impact on the human body in order to protect the sanitary and epidemiological welfare of the population
ORDER OF THE MINISTRY OF HEALTH OF THE REPUBLIC OF BELARUS
25.11.2002 No. 165

“ON DISINFECTION AND STERILISATION BY HEALTHCARE FACILITIES”

ORDER OF THE MINISTRY OF HEALTH OF THE REPUBLIC OF BELARUS
23.10.2003 No. 167

“TO APPROVE THE INSTRUCTION FOR THE PREVENTION OF INFECTIOUS DISEASES DURING ENDOSCOPIC PROCEDURES”
LEGISLATION IN THE REPUBLIC OF BELARUS

- INSTRUCTION 3.5.4.10-22-97-2005
  approved pursuant to Decision no. 272 of 28.12.2005 by the Chief Medical Officer of the Republic of Belarus

“ORGANISATION OF CENTRALISED STERILISATION DEPARTMENTS WITHIN HEALTHCARE ORGANISATIONS”
• SANITARY RULES AND STANDARDS 2.1.7. 14-20-2005

approved pursuant to Decision no. 147 of 20.10.2005 by the Chief Medical Officer of the Republic of Belarus
as amended and supplemented on 01.12.2008 no. 207

“RULES ON THE HANDLING OF MEDICAL WASTE”
• DECISION BY THE MINISTRY OF HEALTH OF THE REPUBLIC OF BELARUS
21.03.2011 No. 19

“On amendments and additions to the sanitary standards, rules and hygiene regulations
“HYGIENE REQUIREMENTS FOR THE SET-UP, FITTING-OUT AND UPKEEP OF HEALTHCARE ORGANISATIONS AND FOR SANITARY, HYGIENE AND ANTI-EPIDEMIC MEASURES TO PREVENT INFECTIOUS DISEASES WITHIN HEALTHCARE ORGANISATIONS”

approved pursuant to Decision No. 109 of 9.08.2010 of the Ministry of Health of the Republic of Belarus”
ORDER OF THE MINISTRY OF HEALTH OF THE REPUBLIC OF BELARUS
16.12.1998 No. 351

“REVIEW OF DEPARTMENTAL REGULATIONS GOVERNING HIV/AIDS-RELATED ISSUES”

DECISION OF THE MINISTRY OF HEALTH OF THE REPUBLIC OF BELARUS
19.10.2009 No. 109

TO APPROVE THE INSTRUCTION ON THE PROCEDURE FOR ORGANISING THE PROVISION OF MEDICAL ASSISTANCE TO PERSONS INFECTED WITH THE HUMAN IMMUNODEFICIENCY VIRUS
DECISION OF THE MINISTRY OF HEALTH OF THE REPUBLIC OF BELARUS
06.02.2013 No. 11

“REQUIREMENTS FOR THE ORGANISATION AND IMPLEMENTATION OF SANITARY AND ANTI-EPIDEMIC MEASURES TO PREVENT THE OCCURRENCE AND SPREAD OF VIRAL HEPATITIS”
REQUIREMENTS CONCERNING WORKING CONDITIONS FOR HEALTHCARE WORKERS

- Take precautionary measures when working with piercing and cutting implements
- Provide healthcare organisation employees with personal protective equipment (PPE)
  - “Healthcare authorities used as clinical environments for medical training and/or improvement of skills and refresher training for healthcare workers must additionally be provided with PPE for students and course participants”
- When using personal protective equipment, healthcare workers must obey the relevant rules
SYSTEM FOR REPORTING INJURIES INVOLVING PIERCING AND CUTTING MEDICAL IMPLEMENTS

Logbook for incidents where healthcare organisation staff come into contact with patient biological material

<table>
<thead>
<tr>
<th>No</th>
<th>Full name of person who came into contact with biological material</th>
<th>Date and time of contact</th>
<th>Circumstances in which contact with biological material occurred</th>
<th>Nature of contact</th>
<th>Source of possible infection and testing for infection with HIV</th>
<th>HIV testing for person who has come into contact with HIV-infected person</th>
<th>Details of anti-epidemic measures taken, including administration of preventive antiretroviral drugs</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>after contact after 6 months</td>
<td>9</td>
</tr>
</tbody>
</table>

Post-exposure prophylaxis
VACCINATION against Hepatitis B

Positive trends

- Change in the epidemic process since vaccination was implemented
- Positive trend in the main epidemiological characteristics
  - Reduced incidence of hepatitis B
  - Change in the etiological structure of parenteral viral hepatitis
  - Change in the age and socio-professional background of hepatitis B sufferers
  - Change in the structure of modes of transmission and factors causing the spread of infection
  - Healthcare workers in surgical fields are one of the first groups to have been vaccinated
  - Vaccination is compulsory for students at medical universities, nurses and doctors (not vaccinated previously)
INCIDENCE OF DISEASE AMONG HEALTHCARE WORKERS DUE TO PARENTERAL VIRAL HEPATITIS from 1998 – 2009 (ср. мн. per 10,000 healthcare workers)

E. V. Belskaya  Zabolevaemost rabotnikov zdravookhraneniya gemokontaktnymi infektsiyami i ikh profilaktika / http://www.epsu.org/a/9069
Training for medical staff at prevention and treatment facilities

- **is provided through topic-based plans and programmes**
  - factors determining whether healthcare workers in various specialisms should attend are considered
- **Is provided through summary lectures**
  - lectures are delivered by trained experts from provincial and municipal healthcare institutions and clinical departments of medical universities

### Topic-based training plan for doctors

<table>
<thead>
<tr>
<th>No.</th>
<th>Topic</th>
<th>Number of hours</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>theory</td>
<td>practical</td>
</tr>
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</tbody>
</table>
ORGANISATION AND TRAINING FOR HEALTHCARE WORKERS ON PROPHYLAXIS FOR HOSPITAL-ACQUIRED INFECTIONS

CLASSES ARE HELD

- During the first year of training
  - as per the topic-based plan, comprehensive
- During subsequent years
  - as per the topic-based plan – focusing on
    - the main aspects of the issue
    - analysis of failings in the workplace in specialisms
- Final classes
  - tests and case studies

- Senior physicians at medical institutions organise and are responsible for conducting on-the-job training
- Records of training and attendance are kept in a log
ORGANISATION AND TRAINING FOR HEALTHCARE WORKERS ON PROPHYLAXIS FOR HOSPITAL-ACQUIRED INFECTIONS

- TRAINING FOR PARAMEDICAL PERSONNEL
  - Is delivered at local centres
  - Prerequisite for training – running practical classes to improve work skills, incident response

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</tbody>
</table>
NUMBER OF HEALTHCARE WORKERS IN THE REPUBLIC OF BELARUS WHO CONTRACTED BLOOD-BORNE INFECTIONS (2009-2011)

Brest  Vitebsk  Gomel  Grodno  Minsk  Mogilev  City of Minsk

110  95  195  87  254  134  114
ETIOLOGY
OF BLOOD-BORNE INFECTIONS AMONG HEALTHCARE WORKERS IN THE REPUBLIC OF BELARUS (2010-2011)

<table>
<thead>
<tr>
<th>Disease</th>
<th>Actual</th>
<th>Proportion (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acute hepatitis B</td>
<td>3</td>
<td>0.62</td>
</tr>
<tr>
<td>Acute hepatitis C</td>
<td>8</td>
<td>1.67</td>
</tr>
<tr>
<td>Chronic hepatitis B</td>
<td>31</td>
<td>6.47</td>
</tr>
<tr>
<td>Chronic hepatitis C</td>
<td>110</td>
<td>22.96</td>
</tr>
<tr>
<td>HBsAg carrier status</td>
<td>55</td>
<td>11.48</td>
</tr>
<tr>
<td>Anti-HCV carrier status</td>
<td>247</td>
<td>51.56</td>
</tr>
<tr>
<td>Infection with HIV</td>
<td>25</td>
<td>5.55</td>
</tr>
<tr>
<td>Total</td>
<td>479</td>
<td>100</td>
</tr>
</tbody>
</table>

V. L. Zueva Preduprezhdenie vnutribolnichnogo infitsirovaniya PVG v organizatsiyakh zdavookhraneniya /http://www.epsu.org/a/9069
WAYS IN WHICH EMPLOYERS CAN IMPROVE PROPHYLAXIS

↓ RISK OF INFECTION –
CAREFULLY THOUGHT-OUT SYSTEM OF PREVENTIVE MEASURES

- Follow all sanitary and anti-epidemic procedures
- Provide healthcare institutions with modern equipment
- Increase the personal responsibility of hospital-acquired infection prophylaxis workers
- Implement forms and methods in healthcare institutions which comply with safety regulations
- Strict implementation of universal preventive measures and appropriate personal protective equipment
- Epidemiological analysis of cases of occupational infection of healthcare workers, adjusting anti-epidemic measures in each specific case
- Documenting contact incidents
- Further enhancement of the legislative framework

WAYS OF IMPROVING PROPHYLAXIS.
PUBLIC MONITORING BY TRADE UNION ORGANISATIONS

- Each trade union organisation must take comprehensive measures to organise and implement public monitoring of implementation of current legislation concerning the:
  - prophylaxis
  - detection
  - investigation
  of occupational infection of workers with blood-borne pathogens

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International seminar “Social dialogue as a tool for resolving the issue of labour migration in healthcare”.
30 – 31 October 2012
Minsk, Belarus
THANK YOU FOR YOUR ATTENTION!