

STRENGTHENING THE OCCUPATIONAL HEALTH CLINIC FOR THE MANAGEMENT OF TB AND HIV IN THE HEALTH CARE WORK PLACE AT UNIVERSITAS HOSPITAL

Group 7

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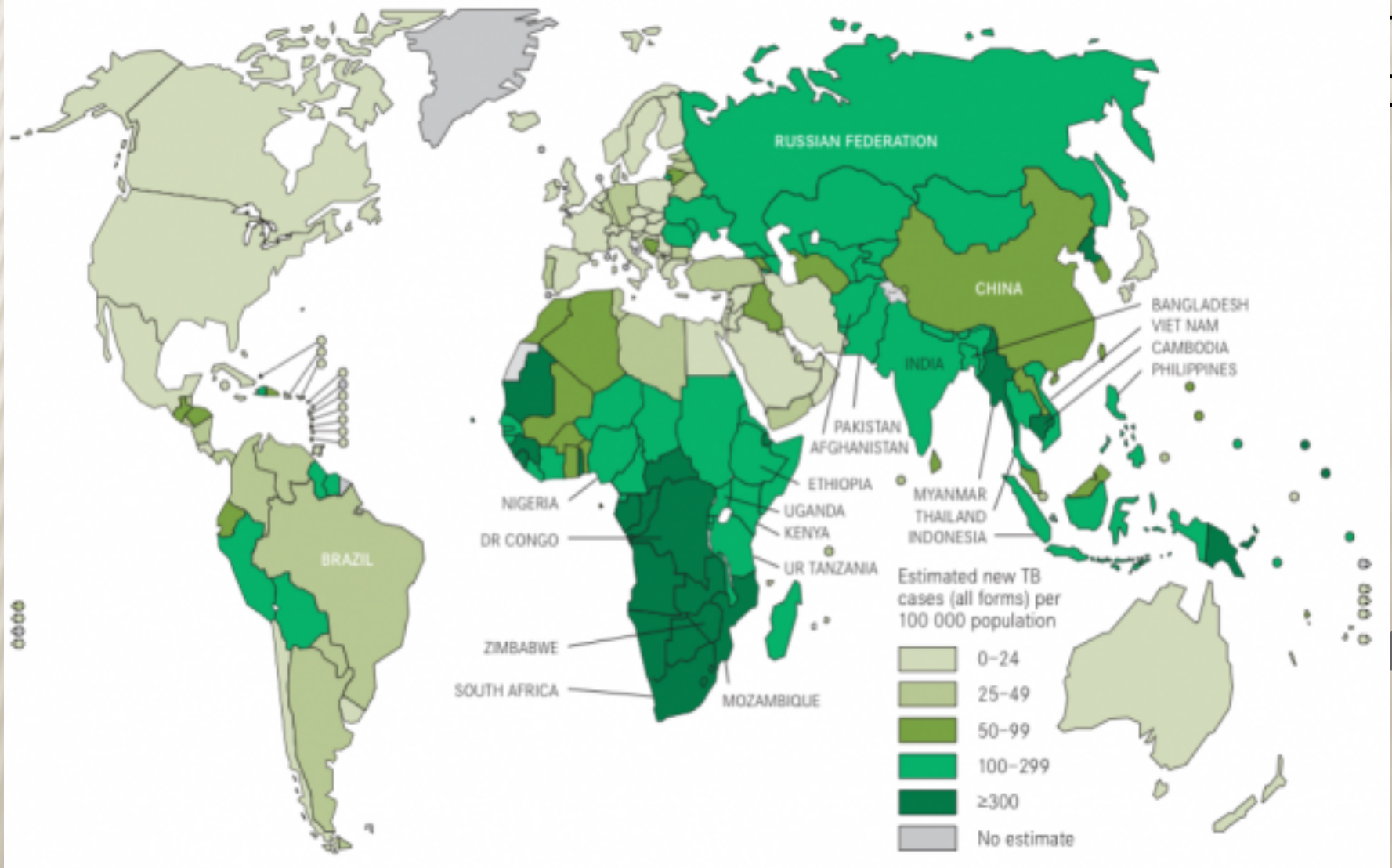
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BACKGROUND

Estimated TB incidence rates, 2010



CONT...

- ✘ TB incidence
 - + Global 128/100000
 - + Sub Saharan Africa 341/100 000
 - + South Africa 971/100 000 population South Africa

- ✘ Incidence of TB infection attributable to health care work 5.8% (range 0-11%) in HCW's

- ✘ No data for Free State Province and Universitas Hospital on burden of TB in HCW's

CONT...

- ✘ Delay in diagnosing TB patients increases risk of HCW's contracting TB
- ✘ Lack of provincial guidelines on TB management amongst HCW's.

AIM

Strengthening of TB and HIV workplace
programme at Universitas hospital

OBJECTIVES

1. To encourage staff to utilize the OHC for TB and HIV services from April 2011 to May 2012
2. To improve TB services that are rendered at OHC, in keeping with international guidelines
3. To evaluate the use of the cough register in the control of TB in HCW's.

METHODS AND OBSERVATIONS

- ✘ Feasibility study for developing cough registry at Universitas hospital
- ✘ Activities:
 1. **Consult stakeholders** (unions, employer, workers..)
 2. **Conduct information sessions** and distributed information and education communication (**IEC**)
 3. Develop a **cough registry tool and permission slip**
 4. **Train operational managers** on cough registry
 5. Develop a **plan for diagnosis and treatment**
 6. **Monitor use of the OHC for TB services**

RESULTS

- ✘ The feasibility study conducted April 2011 - April 2012:
 1. **Stakeholders** consulted: reaction was positive
 2. **Information Sessions:** attendance was high, with positive responses from participants, but on follow-up information sessions concerns raised about confidentiality and **IEC materials distributed** (e.g. posters) and OHC received calls
 3. Tools for the cough registry developed

**“ESTABLISHING AN EFFECTIVE SYSTEM TO PREVENT,
IDENTIFY AND TREAT TB IN EMPLOYEES AT
UNIVERSITAS HOSPITAL”.**

All health care workers have the right to prevention, diagnosis, treatment, care and support services for HIV and TB.

If you have a cough for more than two weeks, please contact Occupational Health Clinic for free (OHC), confidential diagnosis and treatment. Workplace acquired TB could be compensated.

Your manager will be pleased to provide you with a permission slip so that you can attend the Occupational Health Clinic during working hours.

If you encounter any problem after hours or at nearby clinics, you are more than welcome to visit OHC so as to assist you further. No information about your testing will be shared with your manager or anyone else.

*Your Health and Safety representatives
will also encourage you to seek diagnosis
and treatment if you are coughing.*

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**Hoes vir twee weke of meer?
Kry Help.**

**O hohlola beke tse pedi kapa ho feta?
Batla thuso.**



Permission slips developed



health
Department of
Health
FREE STATE PROVINCE

“ESTABLISHING AN EFFECTIVE SYSTEM TO PREVENT, IDENTIFY AND TREAT TB IN EMPLOYEES AT UNIVERSITAS HOSPITAL; PHASE 1 OF A COMPREHENSIVE PROGRAMME TO MANAGE TB AND HIV IN THE HEALTH CARE WORKPLACE”-by Group 7 of certificate programme.

PERMISSION SLIP:

I (Manager)..... send
(Employee).....to the clinic.

Left the ward at..... Signed by (Manager/Supervisor):.....

Time out from clinic:..... Signed by (OH Practitioner):.....

4. Operational managers trained

CONT...

5. Plan for diagnosis and treatment of TB
modified & adopted from existing national
guide

I.

Health Worker Cough > 2 Weeks



II.

Health Worker obtains permission slip to go to OH clinic on work hours

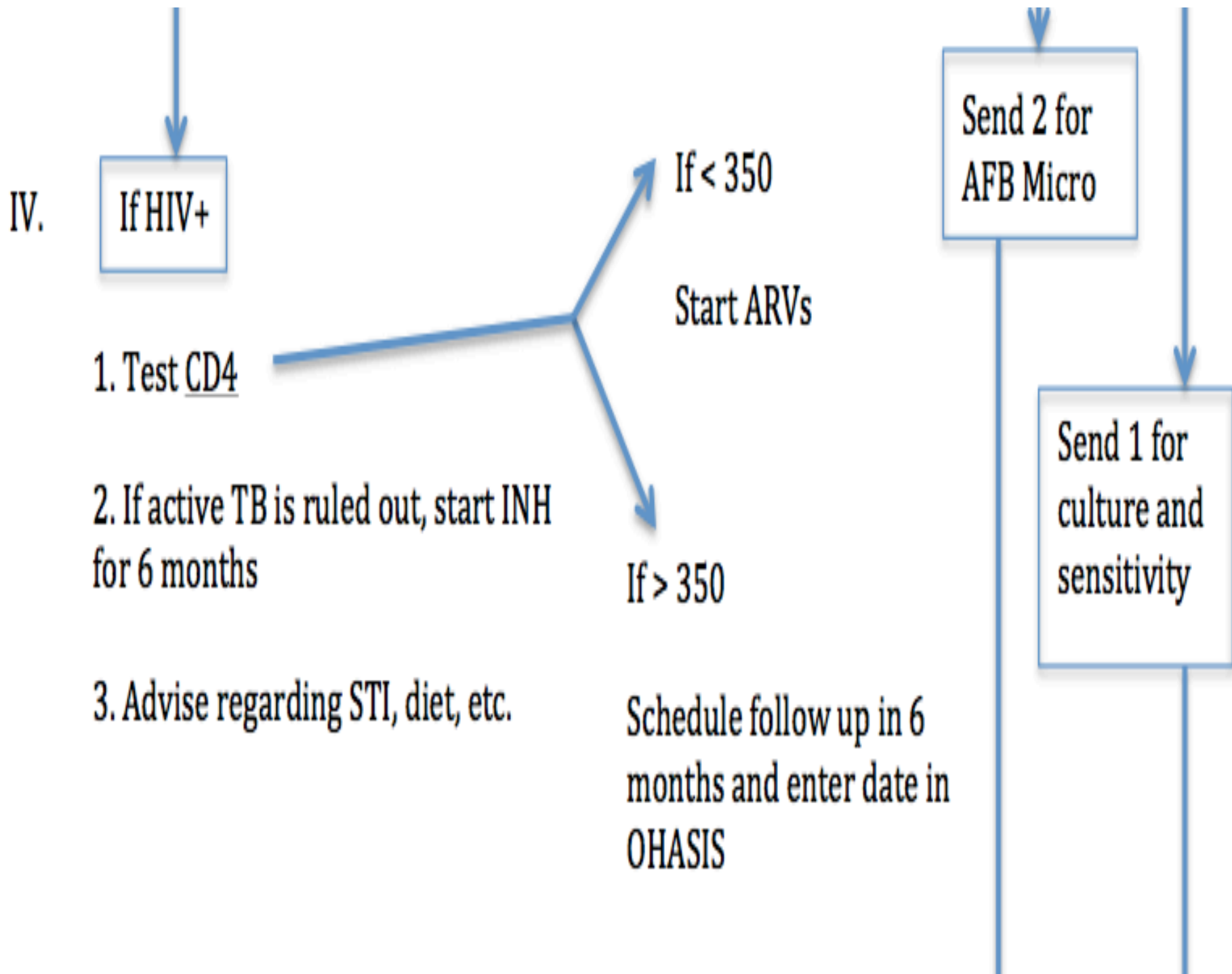
Manager records name and referral date in registry and gives worker info package.



III.

OH professional collects info:

1. Symptoms
2. Contact History
3. 3 Sputum Samples
4. Offers HCT
5. Enters info from previous steps into OHASIS
6. Follow-up appointment 2 business days later
(collect mobile phone number)



V.

If at least 1 is positive

1. Refer for TB treatment
2. Schedule weekly follow-ups
3. Give worker sick leave and complete workers compensation claim form
4. Contact infection control and H&S reps to conduct TB infection control audit

VI.

OH Practitioner:

1. Enters info in OHASIS
2. Sends results to TB referral clinic
3. Schedule weekly follow-ups

VII.

Workplace Audit

1. IC and H&S rep review last audit entered into OHASIS to see if recommendations were followed
2. IC and H&S rep conduct audit together using TB Infection Control Checklist
3. H&S rep enters findings into OHASIS
4. IC gives out questionnaires to all workers at the unit with instructions: if symptoms arise, go to OH clinic.

5. DATA FOR APRIL 2010- MAY 2012

	April 2010- April 2011	April 2011- May 2012
Total OHC visits	4005	4569
HCWs for Sputum Collection	1	22

2 cases of active TB in HCW identified and treated due to cough registry!!

DISCUSSIONS AND CONCLUSIONS

- × **Concerns about Confidentiality:**

- + Lack of Use of Cough Register: lack of confidence in operational managers
- + Information sessions revealed uncertainty about confidentiality in OHC

- × Benefits of the cough register

- × **Data Capturing:** more data should be gathered with regard to TB and HIV

RECOMMENDATIONS

- ✘ Cough registry – create a self-referral system
- ✘ Data Management: improve monitoring and evaluation (OHASIS) to see if there is an increase in use of OH services
- ✘ Provide feedback to the managers, health and safety committees
- ✘ Universal TB screening
- ✘ Restructuring of OH – to allow for greater privacy and confidentiality

THANK YOU, RE YA LEBOHA, BAIE DANKIE THE MASTER GROUP 😊

