Strengthening the occupational health clinic for management of TB and HIV in the workplace at Universitas Academic Hospital

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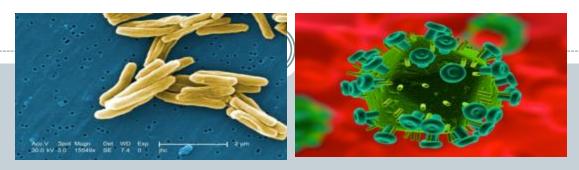
Background to this Study

- This project was conducted by "group 7" based at Universitas Hospital, Free State Province, South Africa in a partnership with the NIOH, South Africa and UBC, Canada to fulfil requirements for a certificate Programme at UFS, funded by GHRI.
- Certificate programme entitled: "Building Capacity to Design,
 Implement and Evaluate Action Research Projects to Decrease the
 Burden of HIV and TB in the Healthcare Workforce"





Background and Rationale



- TB incidence in South Africa: 834/100 000 2015 world report population¹
- Incidence of TB infection among HCWs is estimated to be 4 times greater than in the community²
- Delay in diagnosing TB patients increases risk of HCWs contracting TB
- Lack of good data from Universitas Hospital on burden of TB in HCWs
- Lack of provincial guidelines on TB management amongst HCWs

Project Aim

 To strengthen the TB and HIV workplace programme at Universitas hospital



Objectives

- To encourage staff to utilize the OHC for TB and HIV services from April 2011 to May 2012
- 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 HCWs



Methods

- 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
- 4. Plan for diagnosis and treatment of TB modified & adopted from existing national guide
- 5. Occupational practitioners were trained

"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.

For more information contact:

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Hoes vir twee weke of meer? Kry Help.

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



COUGH REGISTER



		FREE STATE PROVINCE			
<u>Date</u>	<u>Name</u>	Duration of cough	Referral to OHC/OTH ER	Attended OHC	Signature of Unit Manager

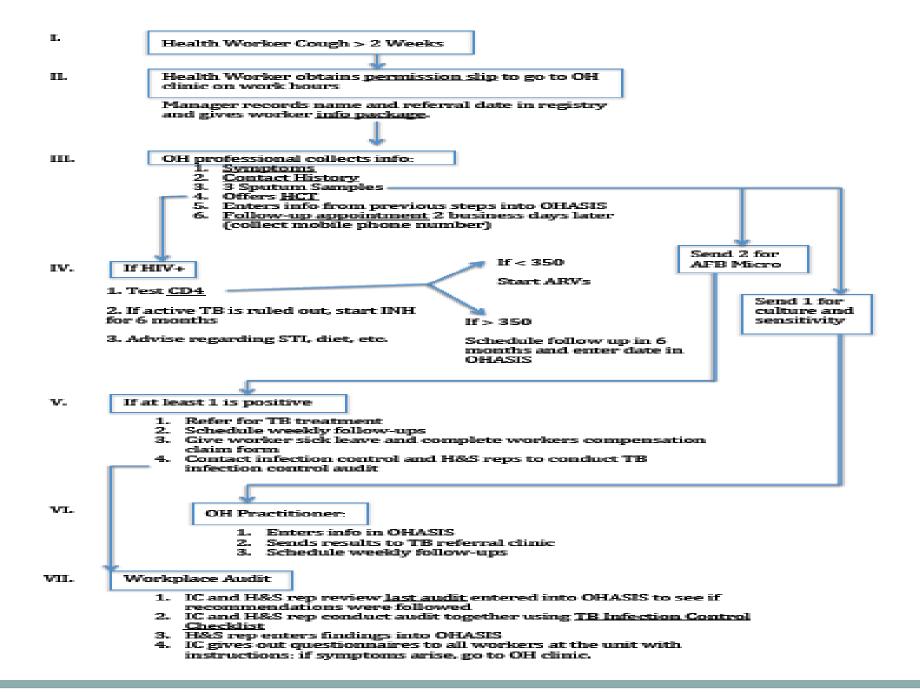
Permission slips developed



"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.

PERMISION SLIP:

I (Manager) send					
(Employee)	to the clinic				
Left the ward at	Signed by (Manager/Supervisor):				
Time out from clinic;	Signed by (OH Practitioner):				



Results (continued)

	April 2010- April 2011	April 2011- May 2012	Nov 2012- July 2013
Total OHC visits	4005	4569	1512
HCWs for Sputum Collection	1	22	43

April 2010-May 2012 :2+ sputums managed @ OHC Nov 2012-July 2013 :6+ sputums managed @ OHC

Discussion and Conclusions

Concerns about Confidentiality:

- Lack of use of Cough Register (lack of privacy 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 (Now happening after circular from MEC to screen all HCWs!)
- Restructuring of OH to allow for greater privacy and confidentiality

Thank You, Re ya leboha, Baie dankie

