Biohazard prevention in Europe

Future strategies

"Protecting people's health and ensuring patient safety from an ethical, autonomous and competent professional practice"

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President of the Spanish General Council of Nurses
Co-Chair of the European Biosafety Network

Spanish General Council of Nursing

Dublin, 1 June 2011
Proteger la salud de las personas y garantizar la seguridad de los pacientes, desde una práctica profesional, ética y competente.

Protecting people’s health and ensuring patient safety from an ethical, autonomous and competent professional practice.

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- Epidemiological approach in Spain and in Europe
- Key elements of the new European Directive
- Aims of the European Biosafety Summit
- Future actions for the implementation of the Directive
“Protecting people’s health and ensuring patient safety from an ethical, autonomous and competent professional practice”
The most frequent biohazard for healthcare staff stems from the percutaneous or mucocutaneous exposure to potentially contaminated blood and body fluids, i.e. **accidental inoculations**.
Main risk

HBV – Hepatitis B
- Transmission risk: 2 to 40%

HCV – Hepatitis C
- Transmission risk: 0.6 to 1.2%

HIV – Human Immunodeficiency
- Transmission risk: 0.3%
Figures on the EU workforce for health

- Healthcare workers account for 9.7% of the EU workforce.
- Healthcare provision accounts for 7-11% of the GDP in Western Europe.
- 70% of European Healthcare budgets is devoted to the salaries of healthcare workers.

*(Green Paper on the European Workforce for Health)*
## Frequency of percutaneous accidental inoculations in Spain

<table>
<thead>
<tr>
<th>Profession</th>
<th>N. Cases</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurses</td>
<td>10,856</td>
<td>46.3 %</td>
</tr>
<tr>
<td>Nursing Auxiliaries</td>
<td>3,456</td>
<td>14.7 %</td>
</tr>
<tr>
<td>Nursing students</td>
<td>2,058</td>
<td>8.8  %</td>
</tr>
<tr>
<td>Midwives</td>
<td>150</td>
<td>0.6  %</td>
</tr>
<tr>
<td>Physicians</td>
<td>2,588</td>
<td>11.0 %</td>
</tr>
<tr>
<td>Interns and grant holders</td>
<td>1,752</td>
<td>7.5  %</td>
</tr>
<tr>
<td>Medicine students</td>
<td>77</td>
<td>0.3  %</td>
</tr>
<tr>
<td>Cleaning personnel</td>
<td>1,127</td>
<td>4.8  %</td>
</tr>
<tr>
<td>Orderlies</td>
<td>412</td>
<td>1.8  %</td>
</tr>
<tr>
<td>Lab. technicians</td>
<td>395</td>
<td>1.7  %</td>
</tr>
<tr>
<td>Other</td>
<td>285</td>
<td>1.2  %</td>
</tr>
</tbody>
</table>

**Total:** 16,520 cases

Source: EPINETAC 1996 - 2002
### Place of the accident

<table>
<thead>
<tr>
<th>Place</th>
<th>Nurses</th>
<th>Midwives</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient room</td>
<td>44.1%</td>
<td>2.8 %</td>
</tr>
<tr>
<td>Operating room, labour room</td>
<td>14.8%</td>
<td>79.7 %</td>
</tr>
<tr>
<td>External practice</td>
<td>5.2%</td>
<td>4 %</td>
</tr>
<tr>
<td>Blood bank</td>
<td>0.7%</td>
<td>0 %</td>
</tr>
<tr>
<td>Clinical lab.</td>
<td>4.7%</td>
<td>0 %</td>
</tr>
<tr>
<td>Exploration boxes</td>
<td>11.8%</td>
<td>5.6 %</td>
</tr>
<tr>
<td>Patient home</td>
<td>1.7%</td>
<td>0 %</td>
</tr>
<tr>
<td>Other</td>
<td>8.1%</td>
<td>5.1 %</td>
</tr>
</tbody>
</table>

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Aims:

1. To have a working environment as safe as possible
2. To prevent injuries caused by any medical sharp

Field:

All healthcare and hospital workers
Principles (I):

- Well-trained healthcare personnel with appropriate resources and protection play an essential role in the prevention of injuries and infections caused by sharps.

- Preventing the exposure is a key strategy to eliminate or reduce the risk.

- Employers have the duty to ensure workers’ safety.
Directive 2010/32 of the EU Council of 10 May 2010

Principles (II):

• One should never suppose there is no risk

• It is necessary to combine planning, awareness raising, training, prevention and supervision measures

• Recapping should be immediately banned
Duties of member countries:

• To establish legal, regulatory and administrative provisions that ensure biosafety

Sanctions:

• Effective, proportionate and dissuasive measures
Directive 2010/32 of the EU Council of 10 May 2010

Risk prevention systems:

• Devising global and consistent prevention policies
• Training
• Health monitoring procedures
• Use of individual protection equipment
Directive 2010/32 of the EU Council of 10 May 2010

Notification:

• Healthcare workers should notify immediately any incident or accident caused by sharps
Spanish General Council of Nursing

“Protecting people’s health and ensuring patient safety from an ethical, autonomous and competent professional practice”
The challenge of the European Biosafety Network

Our general aim

To achieve a proper transposition of the new European Directive in accordance with the internal law of all Member States
Our specific aim

The protection of ALL healthcare workers by:

1. Providing training on the protection and use of devices
2. Implementing safety-engineered devices in all public and private healthcare centres
3. Implementing health monitoring procedures (Observatory)
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Epidemiological approach in Spain and in Europe

Aims of the European Biosafety Summit

Future actions for the implementation of the Directive
Types of actions: joint strategy

- European information policy
- European biosafety observatory
- Annual summit
Types of actions: joint strategy

- Information to citizens
- Information to employers
- Information to workers
- Information to authorities

“Protecting people’s health and ensuring patient safety from an ethical, autonomous and competent professional practice”
Types of actions: joint strategy

- Analysis on the implementation of biosafety regulations
- Analysis on the implementation of safety-engineered devices
- Notification system for biological accidents
- Future analysis on the impact of the implementation of all measures regarding biological accidents

SETTING UP THE EUROPEAN OBSERVATORY

Spanish General Council of Nursing

“Protecting people’s health and ensuring patient safety from an ethical, autonomous and competent professional practice”
Types of actions: joint strategy

- Analysis and assessment of biohazard in Europe
- Assessment of the progress made in the field of biohazard prevention in the European Union
- European Biosafety Day (June 1)
... No more sharp injuries in Europe

...To ensure the protection of professionals’ good practices and patient safety