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A ground breaking agreement between healthcare employers and employees will give medical staff greater protection against injuries from needle sticks and other sharp objects when at work. With over one million such injuries every year in Europe, these are one of the most common health and safety threats staff, particularly in hospitals, face. They can cause infections, trauma and serious illnesses such as viral hepatitis and AIDs.

The eight-page agreement was signed in mid-July by the European Hospital and Healthcare Employers' Association (HOSPEEM) and the European Public Services Union (EPSU) after five months of negotiations.

Welcoming the decision to give a higher priority to tackling the phenomenon, Godfrey Perera, HOSPEEM's general secretary, said that the deal was in the interest of hospital and healthcare employers since they had a moral obligation to protect the health and safety of their staff.

"It also benefits both employers and employees because a proper risk assessment carried out reduces risks and improves employee health and safety, thereby decreasing the number of days lost by these highly trained staff, thus reducing costs," he added. Karen Jennings, the president of EPSU's health committee echoed the benefits the agreement would bring, saying "it makes a clear and positive contribution to the working lives of Europe's healthcare workers".

The agreement sets out to ensure the safest possible working environment for employees in the healthcare sector; to prevent injuries caused by all types of sharp medical objects; and to establish an integrated approach towards assessing and preventing risks. It also includes better training and information for workers.

A clause confirms that "all workers in the hospital and healthcare sector" and anyone under the managerial authority and supervision of the employers are covered by the provisions. It also notes that "employers should deploy efforts to ensure that subcontractors follow the provisions laid down in this agreement".

Special emphasis is given to thorough risk assessments. These will include an exposure determination, understanding of the importance of a well resourced and organised working environment and cover all situations "where there is injury, blood or other potentially infectious material".

The agreement spells out in detail the measures that hospital and healthcare managers must take if the assessments reveal potential sources of injury. They must specify, implement and regularly review safe procedures for using and disposing of sharp medical instruments and contaminated waste.

In addition, they should eliminate the unnecessary use of sharp implements by changing practices and introducing "safety-engineered protection mechanisms". The new code of conduct insists that the practice "of recapping shall be banned with immediate effect".

To further reduce the risk of possible dangers, the guidelines emphasise the need for effective disposal procedures and clearly marked and technically safe containers close to the areas where sharp and injection equipment are regularly used. They point to the importance of adequate training of personnel and regular health surveillance procedures.

Although students undertaking clinical training as part of their education are not formally considered as workers under the agreement, they will be covered by its prevention and protection measures and any liabilities will be regulated according to national legislation and practice.

The agreement, which was hammered out in detail over five months earlier this year by the two employer and employee organisations that represent a sector with some 3.5 million jobs will soon be given stronger legal status. The European Commission, at the request of the two signatories, is preparing to table a draft proposal to enshrine the text in European law. This is unlikely to face major hurdles as it passes through the formal EU legislative process.

The agreement is the result of careful preparation. The initial impetus came from the European Parliament. In July 2006, it passed a resolution on the need to protect healthcare employees in Europe from blood-borne infections caused by needle stick injuries and called on the European Commission to draft the necessary legislation.

This led to close contacts between HOSPEEM and EPSU on the issue. These included a technical seminar in February 2008 involving all those confronted by the problem. This highlighted the many causes of injuries in hospitals and healthcare services. The negotiations began in January 2009 and were completed in June.

During the whole process, European MEPs have kept up pressure to ensure the issue remains on policy makers' agenda. As recently as April during a parliamentary debate on patient safety, the British Labour MEP Linda McAvan reminded her colleagues that an estimated one million employees in Europe's health services were affected by needle stick injuries. "This could be avoided if the needles they were using were replaced with a safer kind," she said.

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