

What health care workers should know about the H1N1 pandemic

September 20, 2009

The World Health Organization has declared a world H1N1 flu pandemic. It is uncertain how serious this pandemic will be in terms of how many people infected will be severely affected. However, because H1N1 is a new virus, many people may have little or no immunity against it, and illness may be more severe and widespread as a result. In addition, there is currently no vaccine to protect against this virus, although recent reports indicate that one should be available by October.

Most people who have become ill with H1N1 have recovered without requiring medical treatment, however, it is anticipated that there will be more cases, more hospitalizations and more deaths associated with this pandemic in the coming months, particularly in the fall and winter during the influenza season.

Right to refuse unsafe work

You should also be aware that if you believe that the precautions taken by your employer are inadequate to protect you (e.g. lack of appropriate fit-tested mask) when you are faced with an unsafe situation you should stop your work and immediately contact your supervisor. By law, in British Columbia, you have the right to refuse unsafe work. You should also contact your safety steward and the HSA head office.

Protective Equipment:

Masks: Various Health Authorities and hospitals are taking measures to contain the spread of this virus in hospital settings and to protect health care workers from infection. The precautions required are similar to those you're already familiar with when dealing with flu outbreaks with one noticeable exception. This is an excerpt from the U.S. Center for Disease Control recommendations:

Respiratory protection: All health care personnel who enter the rooms of patients in isolation with confirmed, suspected, or probable novel H1N1 influenza should wear a fit-tested disposable N95 respirator or better. Respiratory protection should be donned when entering a patients room. Note that this recommendation differs from current infection control guidance for seasonal influenza, which recommends that healthcare personnel wear surgical masks for patient care. The rationale for the use of respiratory protection is that a more conservative approach is needed until more is known about the specific transmission characteristics of this new virus.

Note that this recommendation is in addition to those that are already in place that already recommend the use of N95 masks for certain procedures that are likely to produce aerosols (e.g., endotracheal intubation, open suctioning, bronchoscopy) and when dealing with specimens.

Your employer should have clear guidelines that detail their schedule for fit-testing health care workers. Those who are most likely to come into contact with infected individuals or their specimens are typically being fitted on a priority basis.

If you are not on your hospital's priority list, and your work does sometimes place you in a situation where fit-tested N95 masks are recommended (e.g. pharmacists, clinical dietitians, etc.) you should ask your employer when you will be scheduled you for fit-testing. If you have any concerns or questions about this, you can also

contact your union safety steward.

Eye protection (or face shields): This extra protection should be used in situations where sprays of blood or other secretions or excretions is possible and is also recommended when in close proximity (i.e. within five feet) of an infected patient.

Gloves: Gloves are also recommended as an additional protective barrier when dealing with specimens or when the workers have open lesions on their hands.

Gowns: Gowns are recommended when dealing with specimen or when in close proximity of an infected patient.

Other Precautions: Your employer should have detailed guidelines for appropriate measures that help prevent the spread of the influenza virus. Chief among those should be strict adherence to hand washing/disinfection and disinfection of surfaces that may be contaminated as well as extra precautions, including donning and offing procedures, when engaged in activities thought to pose a greater risk. If those guidelines are not readily accessible you should ask your employer to provide them to you. Your union safety steward can also assist you with this.

Vaccinations: When a vaccine for this virus is developed, you will most likely be told by your employer that you must be immunized. Both, the Health Science Professionals and Nurse's collective agreement (Articles 6.01 and 32.02 respectively) contain a clause that states that you are required to comply "•unless the employee's physician has advised in writing that such a procedure may have an adverse effect on the employee's health." If you have any concerns about being immunized due to, for example, pregnancy or pre-existing conditions, you should discuss this with your doctor as soon as possible.

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