# Biosafety versus Occupational Health and Hygiene

# How safe is the worker?

The Biosafety Officer (BSO),
The hospital infection control professional
The occupational hygienist:
a different view?

Edwin Hagelen
The Netherlands



# Introduction



- Edwin Hagelen
- Occupational hygienist at the Occupational Health Services, University Medical Center Utrecht former: occupational hygienist on biological agents at the Department of Hospital Infection Prevention
- address:

Heidelberglaan 100 Utrecht, The Netherlands

# Introduction





## In The Netherlands



### The players:

- Biosafety Officer: wants to keep the micro-organism inside (the lab)
- The hospital infection control professional: wants to keep the micro-organism away from the patient
- Occupational hygienist: wants to keep the worker healthy
  - Do they have the same view?

# **Biosafety officer** in The Netherlands



- Researcher (graduated, PhD)
- Appointed by the management of the (university) hospital
- Ministry of Housing, Spatial Planning and the Environment
- Keep the genetic modified micro-organisms (GMO) inside
- Admittance policy:
- Registration of the workers
- Risk assessment before starting work with GMOs

# **Hospital infection control professional** in The Netherlands



- (former) Laboratory technician (bachelor education) or nurse (in-service)
- (mostly) Part of the Department for Microbiology
- Ministry of Health, Welfare and Sport
- To avoid nosocomial infections
- Standard precautions, disinfection and personal protective equipment
- Scope is the whole hospital
- Research by infection registrations and prevalence survey

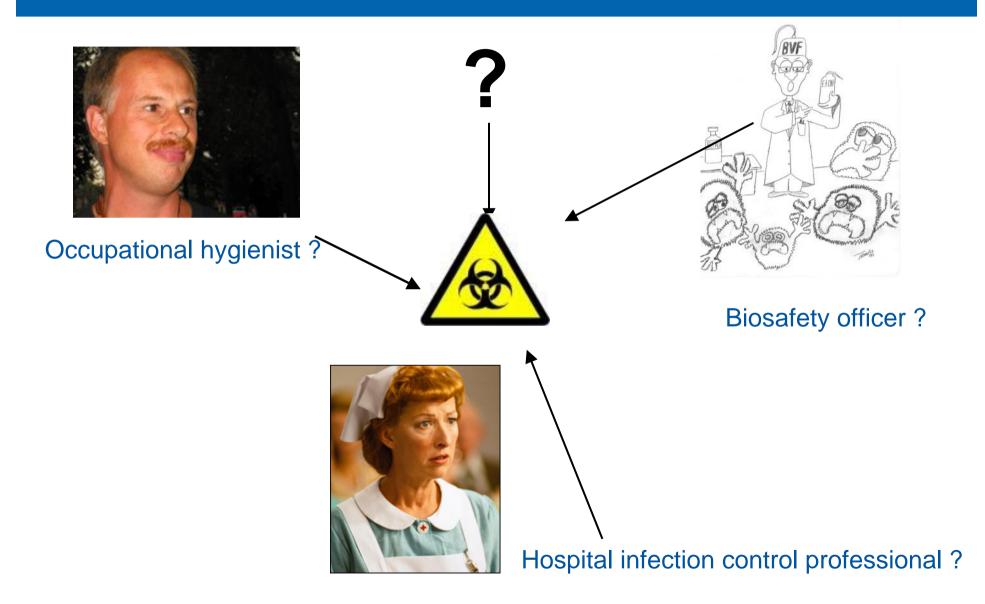
# Occupational hygienist in The Netherlands



- Technical background or university (graduated)
- (Mostly) Part of the Occupational Health Services (in/extern)
- Ministry of Social Affairs and Employment
- To avoid health problems, as low as reasonably achievable
- Emphasize on occupational hygiene strategy for safe working conditions
- Scope is the whole hospital
- General risk assessments

# A different view?





# Who is in control of the micro-organisms?



#### Let's do a risk assessment: but who or what is at risk?

- the (other) patient: sometimes source, sometimes host
- the personnel (the nurse, the researcher, the lab-technician, doctor, etc.)
- the environment
- the visitor

#### What will be assessed?

- the standard precautions, Standard Operation Procedures (SOP)
- the exceptions, the worst case situations or the normal condition

# Who is in control of the micro-organisms?



#### How

- standard risk assessment on the micro-organism?
- risk assessment on the worker or visitor?
- a prevalence survey or registration of infections?

#### When?

- before starting work with micro-organisms?
- during normal conditions, as a routine control?
- only after incidents or high nosocomial infections?

# What does the OH see?



### **Occupational hygienist**

- starts a risk assessment
- considers the standard precautions to avoid contact
- patient = source of micro-organism
- doesn't see the nosocomial infections
- environment is no subject
- disinfectants can be a threat

## What does the HICP see?



### The hospital infection control professional

- discover a nosocomial infection →
- starts to investigate if other patients are infected
- considers the standard precautions to avoid contact
- personnel = source or transmission of micro-organism
- wants to disinfect all the (patients)wards
- wants the patient to go home a.s.a.p.
- environment is no subject

## What does the BSO see?

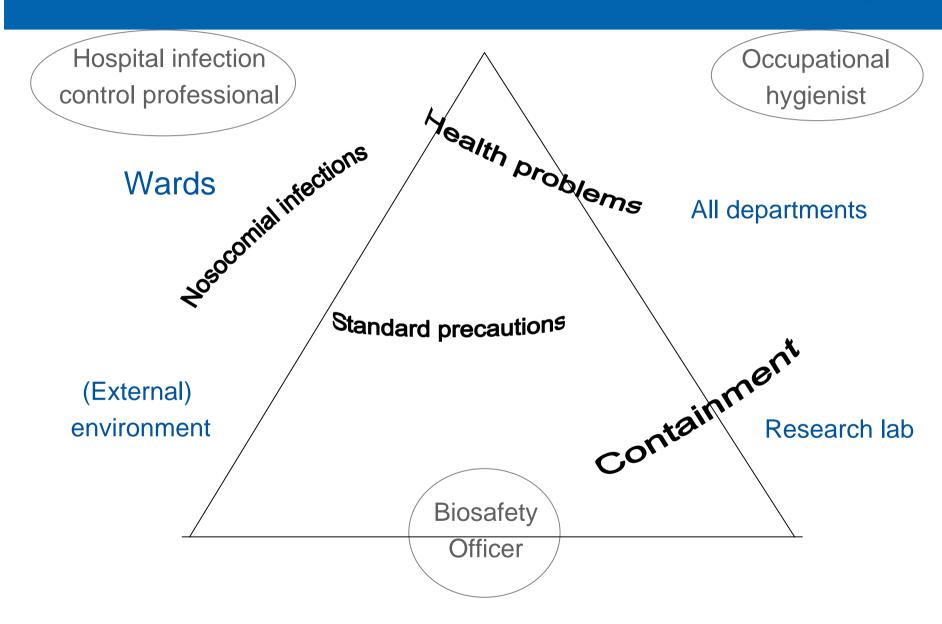


## The biosafety officer

- control on standard precautions
- starts to investigate before starting research with the microorganism
- personnel = transmission of micro-organism to environment
- wants to disinfect to avoid spread outside the containment
- don't want the patient or personnel to take home the microorganism
- spread to patients is no issue?

# Risks considerations





# **Risks considerations**



Hospital infection control professional Nosocomial infections

Occupational hygienist

**Patient** 

**Other Patients** 

Patient family

**Visitors** 

Healthcare workers (Nurses, doctors ...)

Support personnel (food distribution, cleaning) Health problems

SOP

Equipment

Standard precautions Researcher Containment

Lab technician

Biosafety Officer

# **UMC Utrecht**



#### **Solution in UMC**

#### **Expert committee of professionals on risk assessment:**

- occupational hygienist
- hospital infection control professional
- safety expert
- health physician
- environmental experts
- worker and management representatives
- radiation hygienist

# **UMC Utrecht**



# This committee,

- Meets every month
- Considers all the risk assessments including the biosafety
- Decides about when and where and how the risk assessments will take place
- Chaired by occupational hygienist of the Occupational Health Services

## **Discussion**



- 1 regulations / law (1 ministry) will solve problems?
- Make BSO also responsible for biological agents (not GMO)?
- All professionals in one department or make one professional responsible for everything?
- Keep clinical microbiologists out of risk assessments?
- Listen to each other!
- Other countries, other solutions?