

Improving injection safety

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Inadequate infection prevention and control (IPC) practices have highlighted concerns about the medical transmission of blood-borne and air-borne pathogens in South Africa. The National Department of Health (NDOH) and its partners have renewed efforts to minimise the risk of health care-associated transmissions. The success of this endeavour depends on the involvement and dedication of doctors, nurses and all those who handle health risk waste.

A key partner, Making Medical Injections Safer (MMIS), has implemented their project in 11 countries, including South Africa, since 2004. The project is funded by the US President's Emergency Plan for AIDS Relief (PEPFAR) and managed by John Snow, Inc. and its subcontractors, the Program for Appropriate Technology in Health, the Academy for Educational Development and the Manoff Group.

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Sibongile Mogale, currently a behaviour change communication advisor in an international public health institute, has worked extensively in both the public and the private sector, dealing with issues of infection prevention and control, policy implementation, advocacy and training. She has experience in the field of communication and public relations, and has co-designed and implemented communication strategies and co-developed training strategies and curriculum for the MMIS project.

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The project promotes interventions aimed at preventing the transmission of health care-acquired infections and other blood-borne illnesses like HIV and AIDS by improving injection safety practices. These include safe management of sharps waste and promoting the rational use of injections. The project supports the strategies of the Safe Injection Global Network and the World Health Organization ensuring: the availability of appropriate injection-related commodities in medical settings; behaviour change and communications including training; to support the administration of safe and necessary injections; and appropriate health care waste management.

MMIS supports Government efforts through the Departments (or Ministries) of Health and Environment, helping to implement a range of activities. These include the development and/or review of policies, the development of norms and standards, the introduction of their use, and monitoring their maintenance. The Departments or Ministries of Health also guide the implementation of training and behaviour change and communication activities, either for injection safety as a stand-alone programme area or, as in South Africa, within the context of IPC. Such activities have led to the development of the country's first training manual on injection safety and the production of print, video, and computer-based educational materials for health care personnel. This training content is structured for different audiences, including top and middle managers of health care facilities, clinical staff, general assistants and waste handlers.

The country has seen an increase in infant deaths associated with poor injection equipment use and practices, leading to outbreaks of *Klebsiella* as well as anecdotal reports of medical transmission of HIV. These incidents have influenced the public and policy makers on IPC and overall safety, particularly in public health hospitals.



MMIS has also employed distance learning techniques to augment training capacity and capability. A partnership between MMIS-South Africa, the NDOH and the MINDSET Health Channel has expanded the health channel to the whole country, adding connections to an additional 78 public health facilities between April and November 2006. The partnership also allowed the MINDSET Channel to launch its distance IPC learning curriculum, which is currently available in 300 facilities in South Africa.

MMIS and the NDOH have collaborated through Government's Khomanani Campaign towards the dissemination of critical injection safety-related messages and commodities in communities. Using door-to-door visits, the aim is to create safer environments by ensuring the proper management of sharps waste for medical injections administered at home.

Collaboration between MMIS and the NDOH (Quality Assurance, National Information System, and Government AIDS Action Plan Directorates) has enabled the key programme elements of injection safety to rapidly attain 100% district coverage. These have reached workers in health care facilities, learners at school, patients who take injectable medication at home, and middle managers at municipal, district and

provincial levels. They are found within the National Infection Control Policy and Strategy framework which provides further policy context for the waste management and logistics activities. Interventions aim to build institutional capacity within the public health sector and ensure sustainability beyond MMIS lifecycle as a project (2009).

Doctors protect themselves, patients and the community at large from the risk of disease transmission by observing standard precautions: washing hands, segregating waste, using protective equipment (gloves, masks, gowns, etc.), injecting safely, and keeping surfaces clean. It is paramount to uphold health care facilities as places of healing and not where people acquire infections.

You are urged to join the NDOH and its partners and fight unsafe injections and poor infection control practices to improve services, patient safety, and the health of communities and the country. Please familiarise yourself with the National Infection Prevention and Control Policy and Strategy, and other relevant documents, that are available on the NDOH site or at their offices and on the MMIS site (www.doh.gov.za/www.jsi.com). Please ensure that you are constantly updated by participating in IPC refresher courses.

South African TB Conference

Durban, 1 - 4 July 2008

The theme of the South African TB Conference is 'Working as One', and it is aimed at bringing together the public and private sectors, community members and civil society towards finding solutions to combat TB.

The three main tracks of the conference are:

- Track 1: Basic Science
- Track 2: Clinical, epidemiological and operational research
- Track 3: Patient and civil society mobilisation and advocacy.

Track 1 will focus on improving and expanding the understanding of the basic science that underpins advances in drugs, diagnostics and vaccines. Track 2 will cover the latest findings from clinical trials and research studies in the field of TB, while Track 3 will address community involvement and patient-driven partnerships in controlling TB.

For more information please visit the conference website: www.tbconference.co.za or contact Ms Thabitha Tjatji of the Conference Secretariat on 012 460 8998 or thabithat@foundation.co.za