

Presentation Title	Place in Schedule
Evaluation of intensive hospital staff safety measures in a 1200 bedded TB hospital in Mumbai	Poster Session <i>Day 2 – Wednesday – May 9th, 2018</i> <i>8:30am-9:30am</i>
Description of Presentation	Presenter Name(s) And Credentials
<p>Tuberculosis(TB) while it emerged as a leading cause of avoidable deaths, is estimated to have infected almost one third of the world’s population. Although not all infected ends up with active disease, it can get activated any time for host-bacteria responses, which are far less understood, except for the compromised immunity known to be a clear risk factor. In fact very little is known about factors which are identified as as occupational risks. However the increased rates of TB disease among healthcare workers is well reported worldwide from multiple healthcare facilities. Although historically we have had some institutional practices to limit the spread of infection they were mainly around Sanitorium based care and are difficult to be practiced in the current health systems across the world, where overcrowded healthcare facilities, located in the urban settings has become the norm for secondary / tertiary level healthcare.</p> <p>Little emphasis if any was in place on the various measures to reduce the hospital based transmission of air borne diseases, until the emergence of the threats from SARS, and the Drug resistant TB, hitting almost all parts of the world. Medical facilities in the metropolitan city of Mumbai were not an exception to the decades long ongoing neglect towards risk of airborne transmissions in the healthcare settings.</p> <p>“Group of TB Hospital” (GTB Hospital), an exclusive TB hospital in the city of Mumbai, is one of the largest in entire Asia with 1200 beds dedicated only for TB. As Mumbai struggled to control TB among its population, by 2012, GTB Hospital witnessed a scary peak in the percentage of TB disease close to 7% among the total hospital staff of over 900. By then the hospital had already counted on more than 50 TB related deaths among the hospital staff in the previous few years. This was the same time even Totally Drug Resistant TB (TDR TB) which hit the media</p>	<p>Deepesh R Vendoti, MBBS, MPH <i>Observer Research Foundation</i> <i>Mumbai</i></p> <hr/> <p>Sanjiv P Kharkhanis, MBBS, MS (Gen Surgery) <i>Jupiter Hospital</i></p>

headlines globally, was reported from a tertiary hospital's lab in the city. Mumbai being infamously getting recognised as an epicenter of drug resistant TB (DR TB), an aggressive response plan was chalked out to contain the spread of DR TB in the city. Also to take care of the hospital staff at risk, a number of measures have been undertaken in the GTB Hospital to mitigate the risk of TB among the hospital staff.

Various measures both generic to air borne infections and specific to TB infection were planned and undertaken such as Air Borne Infection control measures, Nutrition support for staff and medical screenings, many of them still ongoing.

Out study aims to understand and document the practices, perceptions and the outcomes of the unique exercise undertaken by the GTB Hospital over last 5 years to specifically safeguard the health of the hospital staff. We aim to gauge the challenges and opportunities for the preventive activities undertaken to mitigate the occupational risk of TB among the staff and most importantly the perception of the hospital staff about the same.

Further, through the evaluation of the records of the patient's medical screening, we aim to document the impact of the special activities on the intended objective, while counting on all the stakeholders and partners (non profit and for profit) who contributed to this effort.

While we attempt to compile the list of all activities which actually happened directly to mitigate the TB among the hospital staff, we will be also interviewing some of the key respondents such as the supervisory staff of various cadres of staff to understand the various challenges they witnessed during the last 5 years and also the behavioural aspects among the hospital staff. Two focus group discussions will also be undertaken to understand the perception of the staff about the threat and their perception about the activities which were undertaken in the last 5 years.

Findings of the study can provide objective understanding of the end benefits of various measures in minimizing the occupational hazard at the health care facilities both directly and also through the

behavioral changes consequent to the interventions. The findings can benefit not just the hospitals involved in treating TB patients, but can actually be of value for all medical facilities which handle other air borne infectious diseases as well. As TB is on its emergence, it is the right time to strengthen our practices and systems not just against TB but also against a larger number of emerging hospital based infections while ensuring safety both to the sick and the personnel who are engaged in caring for the sick.