



PIDE

COVID-19 BLOG

No. 3

Protecting the Saviours Healthcare workers and COVID-19

The capacity of the health care system in Pakistan to handle the COVID-19 pandemic is woefully limited. The country's case tally has reached 892 patients, and nobody knows how many more would be infected in the coming days. The impact of this Corona pandemic on healthcare system is astronomical in two ways. First, it has the potential to stress the capacity of the health care system easily. Second, it has adverse effects on healthcare workers, which includes the risk of getting infection and transmission of the virus to other colleagues, patients, and household members.

In Pakistan, we are deplorably unprepared to protect health care personnel. The current estimates show that the likelihood of getting an infection for a healthcare provider is more than three times as high as the general population. In China, more than 3,300 health care workers were infected with COVID-19. Likewise, in Italy, 20% of the health care workers are COVID-19 positive.

Without a shadow of a doubt, the most valuable resource in any country right now is the healthcare personnel. Healthcare workers are at high risk of exposure to the virus. We have already lost a 26 years old doctor who was part of the team to screen people for COVID-19. What should be our smart response to protect the health care workers—first, an adequate and uninterrupted supply of Personal Protective Equipment (PPE). Second, smart management and deployment of healthcare personal.

Right now, we are facing a shortage of Personal Protective Equipment (PPE). PPE includes but is not limited to gloves, gowns/aprons, goggles, or face shields/masks and respirators. Health care personnel are required to wear gowns, gloves, glasses, and masks that fit tightly over the nose and mouth to filter out virus particles before they are inhaled. The government is trying to ensure a steady supply of PPE. However, both supplies of PPE and ground realities are not encouraging.

Today, I talked to more than a dozen doctors serving in tertiary care public hospitals in Pakistan, based in Islamabad, Rawalpindi, Lahore, Gujranwala, Abbottabad, Peshawar, and Muzaffarabad (AJK). Not a single doctor is satisfied with the current supply of PPE in hospitals. A doctor mentioned, "I get one kit for one week, and that's not enough. I need to change it daily. Disposable masks are meant to be used once—that's the minimum protocol for protection". Another doctor said, "We surely do not have enough PPE. In pandemics like this, all the staff in health facilities needs to take protective measures including doctors, nurses, paramedics, or even the housekeeping staff."

The protection of health workers is a must. Govt. can engage local manufactures (by providing subsidies and tax relaxation) to ensure an adequate supply of PPE. A call for an emergency fund exclusively dedicated to ensuring these supplies available for health care providers could be another measure.

Now coming to the second issue that is the human resource management when the pandemic is accelerating, we need to be creative. We have a high patient and healthcare provider ratio. The country has only one doctor for 957 people. For a population of 207 million, there are only 103,777 registered nurses. The following measures can be considered.

- Healthcare workers with health conditions that have elevated risk for severe infection (if they get COVID-19) can be redeployed away from the highest risk sites. Also, an age-based strategy can be used for redeployment.
- Online (e-health) services can also be introduced nationwide for daily medical consultation (an alternative to out-patient services where possible).
- Quick self-assessment test apps (for COVID-19) can be made. Check (bit.ly/2WyIPf9)
- Mental health care services, especially counseling for health care providers, can be considered as providing care at risk of their own lives could be quite traumatic.
- In case a health worker gets the virus, return to work criteria should be devised. The Center for diseases control and prevention (USA) has issued standards for return to work for healthcare personnel with confirmed or suspected COVID-19. The criteria include both test-based and non-test based strategies ([cdc.gov](https://www.cdc.gov)). This approach can be followed in the case of Pakistan too.

Health care workers should be given a fighting chance to deal with this pandemic without losing their own lives. They do not have to fight for their lives while fighting for our's!

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