

Occupational health and safety for nurses

The International Council of Nurses (ICN) believes that every nurse has the right to work in a healthy and safe environment without risk of injury or illness resulting from that work. Occupational health and safety involves anticipating, recognising, evaluating and controlling hazards arising in or from the workplace that could impair the health and wellbeing of workers, taking into account the possible impact on the surrounding communities and the general environment.¹

The working environment of healthcare workers is considered to be one of the most hazardous occupational settings and nurses are often exposed to health hazards. Occupational injuries and illnesses increase psychological distress and job dissatisfaction often leading to increased turnover which further aggravates the nursing shortage and exacerbates nursing workforce issues.² Protecting the health and wellbeing of nurses has extensive positive outcomes for the individual nurse, patients, families and communities, as well as healthcare organisations and systems. Safe work environments in the health sector are essential to deliver quality care and contribute to workforce strengthening.^{3, 4}

Hazards found in the healthcare environment include biological (viruses, bacteria), chemical (glutaraldehyde, cytotoxic drugs), ergonomic (overexertion, falls, lifting), physical (radiation, sharps) and psychological (shift work, excessive workloads, violence, stress) hazards. The likelihood of exposure to these hazards is often increased by increased demands for nursing and healthcare, poor ergonomics, and inappropriate staffing and shift patterns.^{5,6,7} Furthermore, the availability of adequate and appropriate personal protective equipment (PPE) is essential for preventing exposure to occupational hazards. However, PPE is not universally available and when it is, compliance in its use is often suboptimal.⁸ Certain work settings place nurses at an even higher risk of experiencing occupational health hazards - community settings, including clients homes' and environments in which hazards are not appropriately controlled; geographically and professionally isolated settings where the nurse may be the only healthcare provider; and conflict and disaster settings.⁹

In certain countries, there is no occupational health and safety legislation for the healthcare sector. In others, the means to monitor its implementation and the machinery to discipline the offending employers is ineffective or non-existent. Additionally, most governments fail to regularly collect data on the incidence of accidents, injuries and illness of nursing personnel and other healthcare workers as the basis for sound policy formulation. Where data is collected regularly, data collection can be hampered by underreporting of work-related injuries and illnesses.⁶





ICN Position & Recommendations

As the global voice of nursing, ICN:

- Believes that all healthcare stakeholders, including national nurses associations (NNAs), employers, nurses and other healthcare professionals, nursing professional and regulatory organisations, labour unions, national and local governments, and nurse educators and researchers have an ethical, moral and legal responsibility to actively promote a safe work environment in the health sector.
- Promotes the development and application of international, national and local policies or instruments that will safeguard the nurses' right to a safe work environment, including continuing education, immunisation and PPE.
- Strongly supports the International Labour Organisation's (ILO) Constitution and the supporting Occupational Safety and Health Convention, 1981 (No.155) that sets out the principle that all workers should be protected from sickness, disease and injury arising from their employment.¹⁰
- Encourages research in the area of occupational health and safety and endeavours to circulate relevant information on a regular basis to appropriate stakeholders.
- Believes that particular attention should be paid to older persons in the context of an ageing workforce as this group of workers is considered to be at particular risk to occupational illness and injury.¹

ICN encourages national nurses' associations (NNAs), in collaboration with their respective government, to:

- Urge their respective governments to ensure that national policy frameworks for occupational health and safety of workers are integrated into national health strategies, supported by legislation, regularly monitored and evaluated and are implemented in collaboration with other sectors.
- Initiate and/or support research on safety and suitability of the work environment of nurses as well as risk behaviours, attitudes, procedures and activities.
- Urge ministries of health to adopt and implement all necessary measures to safeguard the health and wellbeing of nurses including ensuring the availability of appropriate protective equipment.
- Systematically monitor compliance with the regulations for the health and safety of personnel in health services.
- Raise awareness among nurses, employers and the public of occupational hazards in the health sector, including violence and abuse.





- Raise nurses' awareness of their rights (as workers) to a safe environment and of their obligations to protect their safety and promote the safety of others.
- Encourage governments to provide appropriate information and new directives on occupational health hazards.
- Support nurses' claims for compensation in relation to occupational disease and/or injury.
- Work with governments to obtain and disseminate information on the incidence of work-related accidents, injuries and illnesses of nurses.
- Increase collaboration between ministries of health and labour to address occupational health and safety issues in healthcare settings.

ICN calls on healthcare employers, to:

- Comply with legislation, relevant guidelines, and new directives on occupational health and safety.
- Create positive practice environments with an adequate number of staffing, manageable workloads, managerial support and high quality leadership.¹¹
- Develop and implement policies and programmes to identify occupational health hazards to prevent work-related accidents, injuries and illnesses.
- Ensure access to PPE for all staff members at no cost.
- Create or facilitate user-friendly, confidential and effective reporting mechanisms.
- Provide training on prevention and management of occupational hazards including ongoing training specific to areas indicated by risk assessments.

ICN calls on individual nurses in their role as clinicians, educators, researchers, policy influencers or executives, to:

- Formally report any incidents of work-related accidents, injuries and illnesses.
- Be aware of risks and hazards in the workplace and follow appropriate procedures to ensure safe and protect their health.
- Undergo routine medical examination and vaccination against infectious diseases relevant to their work.
- Participate in educational training on prevention and management of occupational hazards.

Adopted in 1987 Reviewed and revised in 1993, 2000, 2006, 2017

References

¹ Alli BO. Fundamental principles of occupational health and safety. 2nd ed. [Internet]. Geneva: International Labour Organization;2008 [cited 2017 Apr 20]. Available from: http://www.ilo.org/wcmsp5/groups/public/@dgreports/@dcomm/@publ/documents/publication/wc ms_093550.pdf

² International Council of Nurses. The global nursing shortage: Priority areas for intervention [Internet]. Geneva:International Council of Nurses;2006 [cited 2017 Apr 20]. Available from: http://www.icn.ch/images/stories/documents/publications/GNRI/The_Global_Nursing_Shortage-Priority_Areas_for_Intervention.pdf

³ International Council of Nurses, International Hospital Federation, International Pharmaceutical Federation, World Confederation for Physical Therapy, World Dental Federation, World Medical Association (WHPA). Fact Sheet: Positive practice environment for health care professionals [Internet]. Geneva: WHPA; 2008. Available from: http://www.whpa.org/ppe_fact_health_pro.pdf

⁴ World Health Organisation. Occupational health: Workplace health promotion: The workplace: A priority setting fort health promotion [Internet]. Geneva: World Health Organisation [cited 2017 Apr 20]. Available from: http://www.who.int/occupational_health/topics/workplace/en/index1.html

⁵ Gershon RR, Stone PW, Zeltser M, Faucett J, MacDavitt K, Chou SS. Organizational climate and nurse health outcomes in the United States: a systematic review. Ind Health [Internet]. 2007 Nov [cited 2017 Apr 20];45(5):622-36. Available from: DOI: 10.2486/indhealth.45.622

⁶ De Castro AB, Cabrera SL, Gee GC, Fujishiro K, Tagalog EA. Occupational health and safety issues among nurses in the Philippines. AAOHN J [Internet]. 2009 Apr [cited 2017 Apr 20];57(4):149-57. Available from: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2797477/

⁷ American Nurses Association. 2011 ANA Health and Safety Survey [Internet]. 2011 [cited 2017 Apr 20]. Available from:

http://www.nursingworld.org/MainMenuCategories/WorkplaceSafety/Healthy-Work-Environment/Work-Environment/2011-HealthSafetySurvey.html

⁸ Gammon J, Morgan-Samuel H & Gould D. A review of the evidence for suboptimal compliance of healthcare practitioners to standard/universal infection control precautions. J Clin Nurs [Internet]. 2008 Jan [cited 2017 Apr 20];17(4),157–67. Available from: DOI: 10.1111/j.1365-2702.2006.01852.x

⁹ Terry D, Le Q, Nguyen U, Hoang H. Workplace health and safety issues among community nurses: a study regarding the impact on providing care to rural consumers. BMJ Open [Internet]. 2015 [cited 2017 Apr 20];5(8):e008306. Available from: DOI: 10.1136/bmjopen-2015-008306

¹⁰ International Labour Organization. C155 - Occupational Safety and Health Convention, 1981 (No. 155). Geneva: International Labour Organization; 1981 [cited 2017 Apr 20].

¹¹ Stone PW, Gershon RR. Nurse work environments and occupational safety in intensive care units. Policy Polit Nurs Pract [Internet]. 2006 Nov [cited 2017 Apr 20];7(4):240-7. Available from: DOI: 10.1177/1527154406297896

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