

COMMONWEALTH NURSES AND MIDWIVES FEDERATION

WHO GUIDANCE ON MENTAL HEALTH AND MASKS FOR CHILDREN



The WHO has published useful practical advice on maintaining mental health during the COVID-19 pandemic. As countries introduce measures to restrict movement as part of efforts to reduce the spread of COVID-19, more and more people are having to make major changes to their daily routines. Adapting to lifestyle changes, such as working from home; temporary unemployment; home-schooling of children; lack of physical contact with family members, friends and colleagues; and fear of either ourselves or those closest to us contracting the virus, is really challenging and can affect our mental health. The WHO outline many things that can be done to look after our own mental health and to help others who may need extra support and care during these difficult times. Go to https://www.who.int/campaigns/connecting-the-world-to-combatcoronavirus/healthyathome/healthyathome---mental-health.

CHILDREN AND MASKS

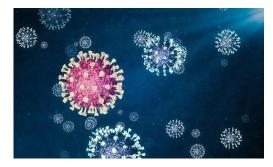


The WHO has released responses to commonly asked questions about children and mask wearing. There is also a more detailed referenced guidance from the WHO and UNICEF. Go to:

https://www.who.int/news-room/q-a-detail/q-a-children-and-masks-related-to-covid-

e-News Vol.13 Issue 9 September 2020

COVID-19 AND THE SAFETY OF THE HEALTH WORKFORCE



The CNMF reported on COVID-19 and the safety of the health workforce in the August issue of the e-News. The *Nursing Standard* has reported on research conducted by Oxford University Hospitals NHS Foundation Trust (OUH) in the UK which found that nurses and health care assistants are at greater risk of contracting COVID-19 infection than doctors or administrative staff. The study involved testing 9,809 symptomatic and asymptomatic staff volunteers from across the Oxford University Hospitals for COVID-19 and antibodies to the virus between 23 April and 8 June 2020. The researchers analysed the different levels of risk faced by health care staff.

The results revealed that 11% (1,083) of OUH staff showed evidence of having COVID-19, but this rose to 21% for staff working on COVID-19 wards. Researchers also found infection rates varied according to area of work, with rates higher in acute medicine than intensive care or the emergency department. Differences were also demonstrated by staff role:

- Porters and cleaners 18%
- Physiotherapists, occupational therapists, and speech language therapists 14.7%
- Nurses and health care assistants 14%
- Junior doctors 12.7%
- Senior medical staff 7.8%
- Administrative staff 7.2%.

The figures also showed higher infection rates for black, Asian and minority ethnic (BAME) staff (17%) compared with overall staff infection rates of 14.7% and an infection rate of 8.7% for white staff. As a result of the research, Oxford University Hospitals have drawn up recommendations for all staff across its four hospital sites that include non-clinical staff such as porters and cleaners.

https://rcni.com/nursing-standard/newsroom/news/covid-19infection-rates-higher-among-nurses-doctors-say-researchers-162571?utm_source=Adestra&utm_medi----

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COMMONWEALTH NURSES AND MIDWIVES FEDERATION

ADHERENCE TO PPE GUIDELINES

https://bjssjournals.onlinelibrary.wiley.com/doi/10.1002/bjs.12001

Earlier in the year, the CNMF disseminated a survey on adherence to personal protective equipment on behalf of Brigham and Women's Hospital, Boston, Massachusetts USA. Responses were received from physicians (43.8%); nurses (29.6%); midwives (19.8%); paramedics (3.8%); and technicians (3.1%). The results have now been published.

The authors note that protection of frontline health care personnel through adequate PPE has remained a key concern throughout the pandemic. Although the selected guidelines used in the study were based on the best available evidence, adherence varied greatly.

The reasons for this variability, the authors' state, included PPE shortages disproportionately affecting countries, forcing health care institutions to resort to alternative approaches such as decontamination and re-use. Frequent guidelines modifications by public health organisations such as the WHO, as well as individual hospital administrators, made it difficult for health care personnel to remain up to date with rapidly evolving recommendations. The full article can be accessed at the URL above.

LINKING WITH UK DIASPORA GROUPS FOR NURSES AND MIDWIVES

Nurses and midwives from many Commonwealth countries work in the United Kingdom. Over time, country specific nursing and midwifery diaspora associations have been established, not only so nurses and midwives from particular countries can provide support to each other, but also so that together, they can support nurses and midwives in their home country.

The CNMF has established an informal mechanism to connect with these UK diaspora groups for nurses and midwives as CNMF projects often occur in countries they represent. To date we have been able to link with diaspora groups from Sierra Leone, Ghana, Nigeria, Gambia, Cameroon, Pakistan, Barbados, Jamaica, Guyana, South Africa, Uganda, and Zimbabwe. Other diaspora nursing and midwifery groups in the UK would be very welcome to be linked. Contact the CNMF at cnf@commonwealthnurses.org to register interest. e-News Vol.13 Issue 9 September 2020

MEDICAL AID FILMS

Medical Aid Films have two excellent educational resources available about hand washing. The first is to assist in the education of health professionals and the second is for the health education of the general community. These videos are both important to the effort of preventing the spread of COVID-19.

Both films can be downloaded free to a range of multimedia. Go to:

https://www.medicalaidfilms.org/watch-2/?keyword&audience&topic=General%20Health&lan guage=English.

HAND WASHING IN HOSPITALS



MR TEMBO COMES CLEAN Hand Washing in Communities



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