Pregnant Healthcare Workers (HCWs), Vulnerable HCWs and HCW with Other Pre-Existing Disease Version 5, 15/04/2020

Introduction

In order to ensure the health and safety of our HCWs, this guidance provides advice for vulnerable HCWs, HCWs with pre-existing disease and HCWs who are pregnant, and their managers.

Advice for Pregnant Healthcare Workers

The Royal College of Physicians of Ireland’s, Institute of Obstetricians & Gynaecologists have provided guidance for pregnant HCWs on page 49 in the COVID-19 Infection Guidance for Maternity Services.

Advice for ‘Vulnerable’ Health Care Workers

As per the government guidance the following workers should not be at work – See guidance from the Department of Health. The HCW can provide their manager with a letter from their treating specialist confirming their ‘Vulnerable HCW’ status. There is no requirement for Occupational Health input.

1. HCWs who are solid organ transplant recipients

2. HCWs with specific cancers
   a. HCWs with cancer who are undergoing active chemotherapy or radical radiotherapy for lung cancer.
   b. HCWs with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment.
   c. HCWs having immunotherapy or other continuing antibody treatments for cancer.
   d. HCWs having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors
3. HCWs who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs

4. HCWs with severe respiratory conditions including cystic fibrosis, severe asthma and severe COPD as confirmed by their specialist.

5. HCWs with rare diseases and inborn errors of metabolism that significantly increase the risk of infections (such as SCID, homozygous sickle cell)

6. HCWs on immunosuppression therapies, sufficient to significantly increase risk of infection. In order to identify if a HCW who may have an increased risk of infection due to on-going regular immunosuppressant therapy, please refer to the 'HSE COVID-19: Interim Clinical Guidance – Immunosuppressant Therapy,'

7. HCW who are pregnant with significant heart disease, congenital or acquired

8. HCW over 70 years of age

**HCW with Other Pre-Existing Disease**

1. HCWs with other medically managed pre-existing disease are unlikely to be at greater risk of acquiring COVID-19 virus infection compared with other HCW’s if the appropriate personal protective equipment is worn.
2. These HCWs can continue to work UNLESS there is a specific recommendation from their treating specialist.

**Conclusion**

All HCWs must adhere to ‘Current recommendations for the use of Personal Protective Equipment (PPE) in the management of suspected or confirmed COVID-19’.

- Pregnant HCWs should be allocated to patients, and duties, that have reduced exposure to patients with, or suspected to have, COVID-19 infection. It is specifically recommended to avoid rostering pregnant staff to COVID-specific units or wards, and redeployment to lower risk duties should be considered

- Vulnerable health care workers as described in this document should not be at work and can submit a report from their specialist, to their manager/HR department to confirm their status.
HCW with other pre-existing disease, do not need to be excluded from providing care to such patients, unless indicated by a specialist report, which can be submitted to their manager/HR department.

Where possible and consistent with expressed preference of the healthcare worker it is pragmatic to allocate all these healthcare workers to the care of other patients if feasible, based on staffing availability.

References:


