



Creating a healthy environment for health care workers and their families

Policy



World Health Organization



Swaziland Government

Wellness Centre Mission Statement

The Swaziland Wellness Centre for Health Care Workers and their Immediate Families is dedicated to offering quality, confidential and comprehensive health care services, responding to the needs of Swaziland's health workers and their families and aiming to strengthen health care services for the people of Swaziland.

Pre-amble

All health care workers are vulnerable to the effects of the prevalent infections in their day to day work. They are challenged by increasing clientele, psychological effects and ill health, but strive for excellence and achievement of the improvement of the health situation in the country.

The programme's prime target is health care workers who are in the front line of health care service delivery in the country.

The Wellness Centre for health care workers and their immediate families (Wellness Centre) is a place where the health care workers will be able to find refuge to deal with psychological, physical and emotional challenges, resulting in a strengthened health workforce that is better able to deliver the quality health services needed in Swaziland.

This Policy document is a product of a participatory consultative effort led by the Swaziland Nurses Association, with contributions from a number of key stake holders including; the Wellness Centre Board, relevant Swaziland government ministries, intergovernmental and non-governmental organizations and private institutions.

This Policy gives direction to the Wellness Centre, Wellness Centre Board, staff, SNA board members, stakeholders and partners on how to support the activities of the centre.

Acknowledgements

The Swaziland Wellness Centre Board wishes to thank all individuals and organizations who made the development of this Policy a success. Special thanks go to the core team who worked tirelessly over a two days intensive workshop to think through the structure and contents of the policy.

Our gratitude also goes to the Swaziland office of the World Health Organization (WHO) for the technical and financial support from the WHO Italian Initiative. Last but not least our thanks go to our partners who support the vision and the implementation of the Wellness Centre programme.



Chairperson – Wellness Centre Board

Foreword

One important action to reduce the disease burden in this country is to ensure the health and wellness of the health care workforce.

I am impressed with the kind of services offered at the Wellness Centre and the benefit it renders to Swaziland Health Care Workers and their families. It is gratifying to note that this important group will receive care and support to meet their personal health and emotional needs. The Centre comes at a time when there is both a high level of attrition among the health care workforce and an increase in the client load. This effort I believe will help a great deal in creating a healthy environment for Health Care Workers and their families, strengthening the health work force so they can better serve the population.

The Ministry of Health and Social Welfare on behalf of the Swaziland Government pledges total support of this initiative in terms of adding human resources and sustainability. To care for carers is a Government responsibility and total obligation. It is clear here to acknowledge the major initiative taken by SNA in giving a hand to Government in order for her to meet her obligation.



Honourable Benedict Xaba
Swaziland Minister of Health and Social Welfare

ACRONYMS

AIDS	Acquired Immuno Deficiency Syndrome
ART	Antiretroviral Therapy
BCC	Behaviour Change Communication
BD...	Beckton and Dickenson
CBCS...	Community Based Care Services
DNO	Danish Nurses Organization
HTC	HIV and AIDS Testing and Counselling
HBC	Home Based Care
HCW	Health Care Workers
HIV	Human Immunodeficiency Virus
IEC	Information Education and Communication
ICN	International Council of Nurses
MOU	Memorandum of Understanding
MOH&SW ...	Ministry of Health and Social Welfare
PEP	Post Exposure Prophylaxis
PMTCT	Prevention of Mother To Child Transmission
PLWHA...	People Living with HIV and AIDS
QPPE	Quality Profession Practice Environment
SNA	Swaziland Nurses Association
SLF....	Stephen Lewis Foundation
TB	Tuberculosis
VCT...	Voluntary Counselling and Testing
WHO	World Health Organization

Definition of Terms

Gender

Social inequalities between men and women

Health Care Worker....“All persons working in health service delivery including: private practices and health-related institutions, plus personnel working in units that supply medical or related aids for people with disabilities, staff in the administration of health sector, health information systems, health ministry staff, and the respective staff developing and producing health products like drugs, aids, spectacles and supplies or equipment for health care units like beds and technical equipment, as well as teaching staff, students, catering and maintenance staff.” WHO December 2000.

For the purposes of the Swaziland Wellness Centre initiative, **Health Care Workers refers to** “All persons working in health service delivery including: private practices and health-related institutions, staff in the administration of health sector, health information systems, health ministry staff, as teaching staff and students of health related training institutions as well as catering and maintenance staff.”

Immediate family members

Referrers to four (4) dependants of the health care worker (index person) duly registered as such in the records of the Wellness Centre.

Universal precautions....

Standard of infection control used to minimize risk

Vulnerability

Socio-economic disempowerment increasing ones susceptibility to the risk of infection

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1. INTRODUCTION

1.1 Background

In Swaziland, the health care system is experiencing a severe shortage of Health Care Workers (HCW) due to difficult working conditions, migration and the HIV pandemic. This human capacity crisis is colliding with the overwhelming health needs of the country, weakening already fragile systems, bringing challenges in delivering both basic and life-saving health services.

Nurses and other Health Care Workers in Swaziland are personally affected by communicable diseases and the HIV and AIDS pandemic, at a similar magnitude as the general population. This situation brings the added burden of care and treatment of the sick in extremely difficult conditions. This state of affair has a substantial negative impact on service delivery and patient care, particularly as it reinforces low morale and attrition, due to other compounding factors. Loss of skilled staff in key positions at service and central levels has a particular significance as it exacerbates negative impacts in service delivery.

Communicable diseases continue to be a major challenge for the country. According to Health Statistics Reports, respiratory conditions account for more than a quarter of all outpatient visits, increasing from 25.3% in 1995 to 26.6% in 2002. The reasons for admissions included pulmonary tuberculosis, malaria, gastro-enteritis, colitis, and pneumonia.

Over and above all health problems, the HIV and AIDS epidemic poses a major challenge for the country. According to sentinel surveillance data, the prevalence of HIV infection among pregnant women who attend antenatal services has increased over the years from 3.9% in 1992 to 42.6% in 2004 (MOHSW, 2004). By March 2001, the country had reported a cumulative total of 8, 458 AIDS cases. From the WHO and UNAIDS estimates, approximately 36,500 people in Swaziland are eligible to antiretroviral treatment (ART). By December 2005, over 13,000 people had enrolled in the national ART programme, meeting the “3 by 5” target set for the country (Swaziland National Health Policy 2007).

Tuberculosis has also become a very serious public health concern for the country, particularly given the high rates of HIV/TB co-infection. The incidence of tuberculosis has increased from 300 per 100,000 people in 1990 to over 1,000 per 100,000 people in 2003 (MOHSW, 2003). Malaria is endemic in selected parts of the country and is generally well managed. An analysis of the overall disease trend indicates that there has been a significant reduction in the burden of disease in the last 4 – 5 malaria transmission seasons. The number of laboratory confirmed cases has dropped from an average of 4 000 per year during the period 1995 to 2000 to less than 300 per year during 2004/2005 Malaria transmission season (Swaziland National Health Policy 2007).

The Swaziland Nurses Association aims to address the severe health worker crisis in Swaziland through directing its attention to the health, well-being and capacity building of the health workforce. In collaboration with other partners, including the International Council of Nurses (ICN), the Swaziland Nurses Association wishes to ensure quality care for all and the creation of sound health policies. The first move towards these profound actions was the establishment of a Wellness Centre for Health Care Workers and their Immediate Families (Wellness Centre); in public and private sector and including non-formal sectors.

The Centre was officially opened in September 2006 and the offices are in Manzini. The centre offers a range of quality and confidential health care services responsive to the needs of health care workers and their families. These include; healthy life-style education and support, psychological care and support (grief healing and stress management), counselling for HIV prevention and behaviour change, HIV treatment and care services (PEP, PMTCT, ANC, HTC/VCT, ART, CBCS, Male Circumcision), palliative care. This centre has been pointed to as a model for good practice by many global organizations, including the World Health Organization and Physicians for Human Rights.

The Wellness Centre intends to strengthen the health care delivery system in Swaziland and receives financial and technical support from the Ministry of Health and Social Welfare, Swaziland National AIDS Programme (SNAP), World Health Organization (WHO), International Council of Nurses (ICN), Beckton and Dickenson (BD), Danish Nurses Organization (DNO) and the Stephen Lewis Foundation (SLF).

1.2 Rationale

The emerging conditions of severe scarcity of Health Care Workers (HCW) and the impacts caused by the increasing health challenges faced by the health care workers are further exacerbated by the HIV pandemic. The Government of Swaziland has shown positive signs in seeking lasting solutions in solving the health care human resources issue. Local and international partners have pledged, and continue to pledge, support for sustaining the contributions of the Health Care Workers. Widespread collaboration with government, the private sector and People Living with HIV and AIDS (PLWHA) has been successfully established. This has enriched the new initiative and sustainable efforts of the Wellness Centre in dealing with the many barriers to health and wellness services which health care workers now face, allowing for a strengthened health care workforce who will be better able physically, emotionally, mentally, socially and spiritually, to meet the health needs of the population.

Embracing the health workers immediate family in the programme will alleviate stress and the demand for family care that now confronts them and allow HCWs to better fulfil their valued roles in delivering health care.

This policy seeks to provide a framework, direction and guidelines for the HCW and the Wellness Centre to offer and also receive full spectrum of quality confidential and comprehensive wellness services in order to achieve:

- ✓ Promotion for health services and healthy life styles, including health worker dietary and physical activity guidelines.
- ✓ Increased disclosure among HCWs themselves and deal with fear of stigma, discrimination, inertia and lack of support.
- ✓ Creation of inherent motivation and high spirited HCW through challenging the working conditions stressful situations, and issues of depression within the health sector.
- ✓ Prolonging life and individual contribution to the world of work.

1.3 Policy goal

To promote healthy and supportive environment for sustainable health care delivery through caring for Health Care Workers.

1.4 Policy objectives

- ✓ To ensure HCW have access to prevention, treatment, care, support and rehabilitation services.
- ✓ To improve the retention of HCWs in Swaziland.
- ✓ To provide a model for best practice in health human resource management.

1.5 To fulfil these policy objectives, staff, Wellness Centre Board members and partners will abide by the following Guiding Principles

In order to fulfil the policy objectives, the work of the Wellness Centre will be guided by the following:

- Service provision shall be guided by the national health policy.
- A healthy lifestyle approach shall form an integral part of services provided.
- Confidentiality shall be strictly observed and the provision of services.
- Fundamental human rights will be respected in all activities and service delivery.
- The centre shall take an active role in advocating for the welfare of healthcare workers and their families.
- All services provided by the centre will be gender sensitive.
- Grief healing approach shall form an integral part of services provided in the centre.
- The centre shall adhere to strict professional code of conduct and ethics for service delivery.
- The centre shall establish partnerships with organisations and centres with similar interests for learning and sharing of best practices.

1.6 Policy application

Issues outlined in this policy shall be used to reference the development of necessary documents for the Centre for Comprehensive Wellness Services for Health Care Workers and Immediate Families, such as:

- The strategic plan
- Personnel policy
- Advocacy and resource mobilizing strategy

2 POLICY STATEMENTS

2.1 Healthy lifestyle education and support

2.1.1 The promotion of health services and of healthy lifestyles for health workers, including physical and dietary interventions, shall be enforced.

2.1.2 Recreational activities shall be established as promotion of healthy lifestyle.

2.2 Psychological care and support

2.2.1 Psychological care shall be provided to health care workers with a variety of mental health challenges by professionals in the field, such as psychologists and counsellors

2.2.2 Grief-healing garden shall be established to promote grief healing and stress management

2.2.4 Establishment of peer support groups for the infected and affected health care workers shall be facilitated and implemented

2.2.5 Collaboration and partnerships with other stakeholders will be established for the support of health care workers' and their immediate family members.

2.3 Counselling for HIV prevention and behaviour change

2.3.1 Materials for HIV prevention and behaviour change communication shall be specifically developed for HCW and their immediate families.

2.3.2 IEC materials shall be provided at the Wellness Centre and outreach points throughout the country.

2.3.3 Communication shall aim to encourage behaviours that promote risk assessment, risk avoidance and risk reduction;

2.3.4 Quality affordable male and female condoms shall be promoted and supplied to HCWs and their immediate family members at the site and in all its outreach sites

2.3.5 Universal precautions shall be applied in delivery of services at the centre and all outreach sites

2.3.6 The centre shall advocate for implementation of universal precautions in all health facilities

2.4 HIV treatment and care services

2.4.1 HTC services (provider and client-initiated) shall be provided by qualified health care practitioners and it shall adhere to the principles of 3 Cs, confidentiality, counselling and consent

2.4.2 .Chronic HIV care with antiretroviral therapy shall be provided to all health care workers and their immediate families.

2.4.3 Community based care and support shall be offered to chronically ill health care workers and their immediate families

2.4.4 Palliative care services shall be offered to health care workers and their immediate families

2.4.5 A referral mechanism shall be established to facilitate linkages with other health care facilities to enhance provision of quality care to health care workers

2.5 Cross cutting issues

2.5.1 Gender

The Wellness Centre acknowledges that HIV and AIDS impacts on male and female Health Care Workers differently in regards to physiological susceptibility to infection, reproductive health and roles in caring for those with AIDS related illnesses. The Wellness Centre shall advocate for;

- Promotion of gender equality and the exclusion of discrimination and sexual exploitation based on differences in gender.

2.5.2 Stigma and Discrimination

- Education and training of health care workers on reduction of stigma and discrimination within health care services shall be conducted

2.5.3 Training

- Training shall be the cornerstone for the centre and it will be done to create uniformity of knowledge and skills as well as giving information updates;

2.5.4 Human Rights

- Fundamental human rights will be respected in the course of provision of health services to all health care workers and their immediate family members.

2.7 Resource mobilization and management

The Wellness Centre Board shall set up a resource mobilization committee who shall undertake fundraising activities.

The Wellness Centre Secretariat shall manage funds and resources according to relevant policies approved by the Wellness Centre Board.

The Wellness Centre Secretariat shall keep all legal documents, policies and assets in proper record books.

The Board shall be the sole recipient and executor of the Wellness Centre funds.

The Wellness Centre board shall advocate for increased sustainable Government commitment through the provision of resources and external support from bilateral partners.

3 COORDINATION & MANAGEMENT OF THE POLICY

- A strong and well defined coordination and management mechanism for the policy shall be put in place, to encourage greater collaboration among the stakeholders and partners involved at the Wellness Centre.
- The Wellness Centre Project Coordinator will coordinate all Wellness Centre activities.
- The Wellness Centre shall have organizational structures with clear roles, functions and communication lines at all levels.

3.1 Composition of Wellness Centre Board

The composition of the Wellness centre Board shall be determined by stakeholders with the following terms of reference;

- The Wellness Centre Board, chaired by SNA President shall be established in line with the agreement between the ICN, DNO, SNA, MOHSW and other partners.
- The Wellness Centre Board shall, in consultation with the stakeholders, facilitate the establishment of operational guidelines for effective policy implementation.
- The Wellness Centre Board shall coordinate and facilitate the process of developing, implementing and costing the Wellness Centre strategic plan.

- The Wellness Centre Board shall screen and coordinate support from potential partners
- The Wellness Centre Board shall be responsible for the Wellness Centre policy Review and hold three Wellness Centre Board meetings per annum.
- The Wellness Centre Board shall have a term of office of four (4) years.
- The terms of reference shall be reviewed as need arise.

3.2 Technical Advisory Committee

The Technical Advisory Committee shall be established by the Wellness Centre Board with a term of office of four (4) years.

3.3 Institutional Capacity

- The secretariat shall be appointed by the Wellness Centre Board on contractual basis

3.4 Annual General Meetings (AGM)

There shall be an Annual General Meeting for all Wellness Centre stakeholders.

4 Policy Implementation

This policy is an important governing document for the Wellness Centre. It shall be approved by the Wellness Centre Board after thorough consultations with all stakeholders.

5 Review of Policy

The review of this policy shall be done in light of National, regional and global development and contemporary challenges.

Review of policy shall be approved by the stakeholders through Annual General Meetings.

