

Guidelines on hygiene and infection control procedures during RFA testing

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Work capacity assessment as performed at the rehabilitation and functional assessment (RFA) centres forms an integral part of risk-based medical surveillance in industry, quantifying medical risk into functional terms. The test methodology entails a work physiological approach with the focus on cardiorespiratory fitness to work, an important component in health risk assessment in view of the novel coronavirus (SARS-CoV-2) outbreak. A safe assessment environment is of utmost importance for staff members as well as workers who will be exposed to physical assessments during this challenging time. A standard operating procedure (SOP) aimed to provide guidelines for hygiene and infection control was compiled and introduced at all RFA centres. This procedure should be regarded as technical guidance to be used in combination with company-specific procedures, and

adaptation to be done based on each RFA centre's layout, referral processes etc. Ongoing revision and updating of procedures as new information becomes available, and the disease process unfolds, should be done. The full SOP can be viewed on the *Occupational Health Southern Africa* website (www.occhealth.co.za).

The guidelines provided include general aspects related to limiting the spread of the virus, which include:

1. General hygiene and required RFA centre-specific procedures: procedures must include aspects such as areas requiring cleaning/disinfecting, frequency of cleaning, cleaning action, safety precautions during cleaning, biological monitoring, training of staff responsible for cleaning, and monitoring of compliance.
2. Medical screening prior to RFA: workers are referred to the RFA centre following screening at the occupational health centre (OHC). Workers presenting with vital signs in excess of the norm, or any other risk factors for SARS-CoV-2 as identified during screening at the OHC, are not referred to the RFA centre.
3. Hand hygiene: sanitisation must be implemented upon entry to the centre, as well as during assessment.
4. Personal protective equipment: both staff members and workers referred for assessment must wear surgical or other masks deemed appropriate. Insofar possible, surgical gloves should be worn underneath safety gloves during functional work capacity (FWC) testing.
5. Screening of vital signs at the RFA centre: screening of temporal temperatures at the RFA centre must be performed in the case of a worker presenting for assessment a day after having been screened at/referred from the OHC. Confirmation of temporal temperatures ≥ 37.3 °C must be performed using a tympanic thermometer. If the tympanic temperature measurement is 37.4 °C or above, the client must be referred to the OHP at the OHC for medical investigation.
6. Physical distancing: a distance of 1.5–2 metres between clients, and clients and staff members, must be maintained at all times by providing visual clues for keeping the required social distance on the floor and seating by means of markers in all areas within the RFA centre, as well as in any waiting areas outside the RFA centre. Proper



Figure 1: Hand sanitiser dispenser

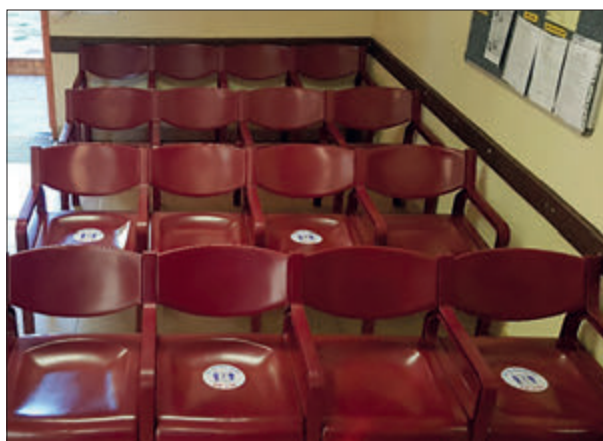


Figure 2: Social distancing: reception area



Figure 3: Hand hygiene posters

organisation is also of the essence to allow for social distancing in the change rooms. Access control at change rooms is recommended to control the number of clients entering at one time.

7. Work procedures: the number of referrals, and number of workers accommodated in the RFA centre at a given time, must be regulated according to the layout and size of the specific centre. FWC testing should also be limited to critical assessments.
8. Disinfection of feet: hygiene measures in this regard should include post-test disinfection.
9. Fitting of Polar equipment: Polar belts for transmission of heart rate during assessment are usually fitted by the test administrator. Contact with workers is to be limited by means of demonstration of fitting of transmitter belts, and having workers fitting their own belts.

10. Induction and education: the usual RFA induction must be extended towards inclusion of information on COVID-19, and hygiene procedures as practiced at the RFA centre. Posters with information on COVID-19 must be displayed in the centre.
11. Waste management: a waste management procedure must be available, and containers used for waste disposal must have lids available.
12. There must be a checklist and compliance register for use at the centres.

The use of an automated system for heart rate recording during assessment is another initiative for consideration, as physical contact with the client is decreased, and data integrity is protected to a greater extent than with manual recordings. The classic method for recording heart rate data during RFA testing requires the test administrator to use Polar equipment for heart rate recordings. Contact with workers to record the pre- and post-test heart rates on physical work capacity (PWC) testing is far greater than when using the automated system.

The automated system, developed by Dankospark, records heart rate data without user interaction, and transfers data directly to the RFA web-based software system. Client information captured during the registration process on the RFA software automatically interfaces with the application on a tablet.

The test subject wears a heart rate monitoring belt for the duration of the PWC test, allowing a profile of his/her heart rate (physiological response to a moderate workload) to be recorded during the assessment. Pre-exercise heart rates and recovery heart rates are also recorded.

Real-time test data are available to the test administrator, with a warning system if clients exceed their maximal permissible heart rates. Under the latter circumstances, the assessment is discontinued to avoid overexertion, contributing to the safety of clients during the assessment.

Development of a semi-automated FWC section of the RFA test is in the final phase of testing.

Apart from creating a paperless test environment, users also report that the test environment is more relaxed as measurements are automatically captured.

To access the RFA hygiene and infection control SOP, please [click here](#).



Figure 4: COVID-19 awareness posters displayed in the RFA centre – PPE



Figure 5: COVID-19 awareness posters displayed in the RFA centre – Social distancing

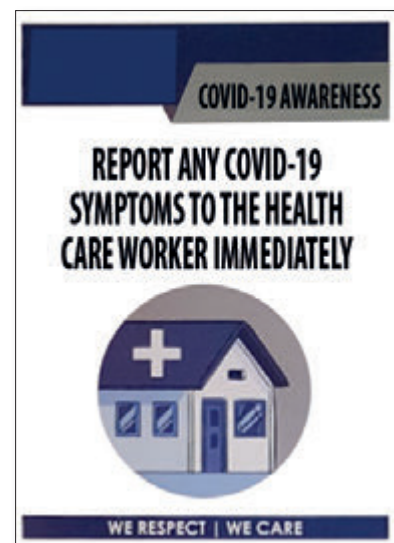


Figure 6: COVID-19 awareness posters displayed in the RFA centre – Reporting of symptoms