

Episode: *Author Interview: “How Should Health Care Organizations Protect Personnel in Environmental Services and Related Fields?”*

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[bright theme music]

TIM HOFF: Welcome to another episode of the Author Interview series from the *American Medical Association Journal of Ethics*. I'm your host, Tim Hoff. This series provides an alternative format for accessing the interesting and important work being done by Journal contributors each month. Joining me on this episode is Abbey Lowe, an Assistant Professor in the Department of Allied Health Professions and Co-Director of the National Disaster Medical System Infectious Disease Training Program for the Global Center for Health Security at the University of Nebraska Medical Center in Omaha, Nebraska. She's here to discuss her article coauthored with Dr Shawn Gibbs, *How Should Health Care Organizations Protect Personnel in Environmental Services and Related Fields?*, in the September 2022 issue of *The Journal*, [What We Owe Health Workers Earning Low Wages](#). Abbey, thank you so much for being on the podcast with me today. [music fades]

ABBEY LOWE: Thanks so much for having me.

HOFF: So, what's the main ethics point that you and Dr Gibbs are making in this article?

LOWE: Yeah. So, I think in an emerging infectious disease, health care workers are typically familiar with the risk of caring for patients with infectious diseases. They also typically benefit from training on how to properly implement evidence-based infection prevention and control protocols, and that really bolsters their safety as well as the safety of patients in the communities where they live and work. I think what we saw over the COVID-19 pandemic, though, is that infection prevention and control guidance tended to emphasize the importance of adequate protections for some frontline workers, but often neglected personnel in other key roles.

So, we know that effective infection prevention and control plans for emerging infectious diseases really need to include hospital personnel in a variety of roles. And one critical piece is environmental services and related fields, workers in those roles. They enter, maintain, repair, and clean all areas of the hospital, including a patient's room, and other key roles such as waste management staff are also really important in terms of consideration in protocol development as well. And even though these workers have really essential roles during disease containment, they're seldom mentioned in literature on infection prevention and control and industrial hygiene. And so, this neglect or lack of inclusion of environmental service workers and related fields in the guidelines results in less effective infection prevention and control practices in hospitals. And so, we saw, as we all saw throughout COVID-19, these workers really suffered disproportionate risks in terms of exposure, as well as poor health outcomes in the pandemic. And in part, this was due to protections at work.

HOFF: And so, what do you think is the most important thing for health professions students and trainees to take from this article?

LOWE: Yeah, I think that really ensuring more equitable infection prevention and control practices for workers in environmental services and related fields. And so, over the course of our article, we scope a few recommendations. One being health care organizations really need to be proactive about emerging infectious disease threats and inclusive in response planning. The second would be health care organizations must treat workers' risk equitably. So, regardless of their status as a frontline clinician or personnel in environmental services and related fields who are sometimes also contract workers, they need to be equally protected.

And I think that this point about contract workers is important because the scope of protections in contracts sometimes don't consider the changing environments of an infectious disease transmission risk. And so, this can leave workers with less protection that they need to stay safe. Even so, the contract should not be a reason for lesser protections. And then the third thing that I would kind of scope as being important for health professions students is that infectious disease experts really need to recognize that workers in environmental services and related fields are key stakeholders in planning for emerging infectious diseases because they have a critical role in the organizational functioning and in infection prevention and control execution, both prior to and during an infectious disease outbreak.

And I guess to kind of follow along that line, I do want to scope that a couple, that solutions do exist, and some might be low hanging fruit, adjusting a protocol. The hospital could, in the case of COVID-19, conserve N95s and better safeguard waste management workers by simply asking health care workers to pass waste containers to waste management workers who are outside of the room. So, that's kind of an example of that. But I do think the other important pieces on the contract point that I had mentioned earlier, lack of contractual protection, really requires institutions to negotiate those barriers that impact worker health prior to an infectious disease outbreak.

HOFF: And finally, if you could add a point to your article that you didn't have the time or space to fully explore, what would that be?

LOWE: So, I think early in the pandemic, or certainly early in any infectious disease outbreak, there are going to be disproportionate burden, and that really creates obligations for regulators and employers to keep workers as safe as possible. And that not only keeps workers safe, but it also minimizes harms to others, including family, community, patients, and health care workers. So, I think that this approach calls for commitments to reposition these workers in ways that account for structural voids in pandemic protections. That keeps in mind this idea of treating risks to workers equitably and planning accordingly for that. So, pandemic planning and research to do that really needs to explicitly include hospital personnel in environmental services and related fields. And health care systems, governments, and patients that all benefit from their labor really have a moral obligation to advocate for that protection.

So, as we saw during the initial wave of the pandemic, the level and adherence to infection prevention and control interventions will determine a lot of the extent of transmission. Morbidity, mortality, all the things that keep our communities safe really start with infection prevention and control, especially until vaccines and therapeutics are widely available. So, I think creating evidence-based and consensus-driven protections for vulnerable workers is a really important step forward in mitigating both structural discrimination as well as health and safety of communities and establishing essential workers as having rights and

obligations of us as society to their protection in future epidemics, pandemics, or emerging infectious disease outbreaks. [theme music returns]

HOFF: Abbey, thank you so much for your time on the podcast today and for your and Dr Gibbs' contribution to the Journal this month.

LOWE: Thanks again for having us.

HOFF: To read the full article, as well as the rest of the September 2022 issue for free, visit our site, [JournalofEthics.org](https://www.journalofethics.org). We'll be back soon with more *Ethics Talk* from the *American Medical Association Journal of Ethics*.