Engaging the Health Sector in BSS implementation

global challenges and strategies

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The new International BSS were adopted by the WHO in May 2012.

6. Technical and health matters

6.1 Pandemic Influenza Preparedness Framework for the sharing of influenza viruses and access to vaccines and other benefits

Document EB131/4

6.2 Radiation protection and safety of radiation sources: International Basic Safety Standards

Document EB131/11
Some challenges to implement BSS requirements in the health sector

- **Low level of awareness** about radiation doses and risks among health professionals, and about roles and responsibilities in BSS implementation.

- **Lack of integration** of radiation safety into (i) healthcare policies, strategies and regulations (e.g. universal health coverage, HTA, service delivery, patient safety, essential medicines & medical products, health technologies & medical devices) and (ii) occupational health strategies and services in healthcare facilities.

- **Limited dialogue/cooperation** between health authorities and radiation protection regulators.

- **Huge disparities in access** to health services, technologies, human and financial resources between (and within) regions/countries.
To identify and interpret what is relevant for the health authorities and health professionals

1. Introduction (1.1 – 1.55)
2. General requirements (2.1 – 2.52)
3. Planned exposure situations (3.1 – 3.184)
4. Emergency exposure situations (4.1 – 4.21)
5. Existing exposure situations (5.1 – 5.33)

“Which requirements are relevant for me?”

“What can I do to implement them?”

World Health Organization
All 3 categories of exposure occur in health care settings

- **Generic requirements** (3.5 – 3.67)
- **Occupational exposure** (3.68 – 3.116)
- **Public exposure** (3.117 – 3.143)
- **Medical exposure** (3.144 – 3.184)

- Although only 40 requirements in the BSS are specific for medicine, all categories of exposure took place in medical settings.
- Need for **education, training and tools** to interpret and use BSS
- The **Safety Guide** “Radiation Protection and Safety in Medical Uses of Ionizing Radiation” covers all the exposure scenarios and modalities: important tool to support implementation of the BSS in the health sector (*IAEA, PAHO, WHO, ILO*).
- BSS Workshops, specific training activities, factsheets, …
Multiple regulators are involved in the medical applications of radiation at national level e.g. health authorities, nuclear regulatory bodies, medical device regulators, drug regulators.

While regional and global platforms for interaction inside specific areas do exist, there is a lack of dialogue, collaboration, cooperation and/or coordination between the regulators from different areas.
BSS implementation as part of good medical practice

The strategy for implementing the BSS should be linked to **quality in health care**, which includes:

- Appropriateness
- Accuracy
- Affordability
- Accountability
- Safety
- Timeliness
- Patient centricity
Universal Health Coverage is a high priority in the agenda of health authorities and health policy makers - we need to align our messages to let them know that ensuring **safe and appropriate use of radiation in medicine** contributes to their agenda of work.
Integration of radiation safety into the curricula of the medical and dental schools, post-graduate E&T and CME has to be implemented by national authorities working with public and private educational institutions, and supported by a broad coalition of stakeholders.
BSS cosponsors are joining global efforts to engage the health sector in the implementation of BSS

Bonn Call for Action

10 actions to improve radiation protection in medicine in the next decade

1. Enhancing implementation of justification of procedures
2. Enhancing implementation of optimization of protection and safety
3. Strengthening manufacturers’ contribution to radiation safety
4. Strengthening RP education and training of health professionals
5. Shaping & promoting a strategic research agenda for RP in medicine
6. Improving data collection on radiation exposures of patients and workers
7. Improving primary prevention of incidents and adverse events
8. Strengthening radiation safety culture in health care
9. Fostering an improved radiation benefit-risk-dialogue
10. Strengthening the implementation of safety requirements (BSS) globally

http://www.who.int/ionizing_radiation/about/med_exposure/en
Global actions being done to improve BSS implementation in healthcare facilities

- **Advocacy, awareness raising, education and training** of health care providers *(RP in pre- & post-graduate education, CME)*

- **Guidance and tools** to interpret and implement the BSS safety requirements *(e.g. safety guide, implementation and use of imaging referral guidelines in symptomatic patients, policy guidance on justification of imaging asymptomatic individuals for IHA, DRL guidance, risk communication tools)*

- **Guidance** for enhancing **radiation safety culture** in health care facilities *(primary prevention, reporting & learning, prospective risk analysis)*

- **Engagement of stakeholders** *(e.g. health authorities, RP regulators, radiological medical practitioners, dentists, technologists, medical physicists, referring physicians, patients & families, professional associations, scientific societies, manufacturers, academia, …)*

- **Fostering dialogue and cooperation** between health authorities, radiation protection regulators and professional bodies
Examples of actions to improve BSS implementation in healthcare facilities
Examples of global collaboration to support BSS implementation

“...WONCA is committed to working with WHO, IAEA and other international organizations to enhance appropriateness of radiological examinations” (Nov 2016)
The **Bonn Call for Action** is being adopted as a roadmap by several international, regional and national organizations.

Pioneer campaigns such as **Image Gently** and **Image Wisely** (2017) have been followed by other regional and national campaigns: **Eurosafe Imaging** (2014), **AfroSafe**, **Canada Safe**, **Japan Safe**, **Lisbon Commitment** (2015), **Latin Safe** (2016), plans for **ArabSafe** (2017), …
Both the International BSS and the EURATOM BSS have a robust set of safety requirements concerning radiation safety in medical exposures.

European countries are currently working on the transposition of the BSS, already thinking about the implementation: a good opportunity for strengthening collaboration between BSS cosponsoring organizations.

It may impact not just within EU, but beyond - at global level (guidance and tools developed by EC have proved to be useful in other regions).