

Shielding frontline healthcare workers should be the priority



MD SALIMUZZAMAN BHUIYAN

THE coronavirus crisis continues to engulf the country as well as the rest of the world. A large number of doctors in Bangladesh (62 as of July 5)—mostly senior clinicians working on the front line—have died due to Covid-19. Many more frontline healthcare workers (over 5,000) have become infected. This is unusual compared to the situation in the western world. The entire healthcare sector was rightly shocked by this development and wants to know how the situation has deteriorated to this point.

I have spoken to a few of my professional friends in Bangladesh over the last few days. I have no doubt in my mind that this was mostly due to the Personal Protective Equipment (PPEs) currently in use by the frontline healthcare workers. In this connection, I would like to highlight the following issues.

Inadequate PPEs: In the beginning of the coronavirus crisis in Bangladesh, the government health services and the private healthcare authorities were unprepared. Healthcare workers were not provided with sufficient PPEs to protect them from coronavirus infections. Some clinicians even attended patients without using PPEs. Many of them made their own PPEs while awaiting delivery from their authorities. Supply of PPEs was delayed in many cases. Even we could

hear the urgent call for help and requests for PPEs from a thousand miles away. I am aware that a few Bangladeshi volunteers from the UK and the USA have sent PPEs to help their fellow frontline fighters in Bangladesh.

Poor quality of PPEs: Many of the PPEs produced locally were not up to the World Health Organization (WHO) standards. There was hardly any quality control by the appropriate authorities in the beginning. This has meant a serious breach of the health and safety standards of healthcare and put the lives of frontline healthcare workers at risk.

Training on PPEs: Training on how to put on the PPEs (donning) and how to dispose of them (doffing) is limited

in Bangladesh. Safe disposal of used PPEs is very important because these are most likely to be infected. There is a high risk of contracting the disease during doffing. Every healthcare facility in the country where Covid-19 patients are looked after needs to train their healthcare workers how to do donning and doffing safely. I have seen an excellent video on this issue posted by One Health Bangladesh in the social media. I would recommend every healthcare worker to watch this video carefully.

Mask fit test: An important element of the PPEs is face mask. The coronavirus spreads from the infected person to the healthcare workers via nose and mouth. We need to wear WHO-recommended face masks. We in the

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needs a protocol, testing methods and training. The electronic machine is expensive and needs software, a protocol, testing methods, accessories and training. One of the electronic machines is PortaCount Respirator Fit Tester 8048.

Shielding high-risk healthcare workers: In the UK, the NHS England has taken the policy of risk assessment of all high-risk frontline healthcare workers based on ethnicity, age, sex (male) and comorbidities. The high-risk vulnerable group of workers were either shielded at home or moved to a safer non-Covid-19 area of work. In New Zealand, high-risk healthcare workers (10 percent of the workforce) were sent home in the beginning of the Covid-19 infection. Now those workers are coming back to work.

We need to support and protect our vulnerable healthcare workers from the dangers of Covid-19. First we need to identify the high-risk group of health professionals based on age (50+plus years) and associated comorbidities, e.g. serious heart condition, chronic obstructive pulmonary disease (COPD), diabetes, chronic kidney disease, obesity and immunocompromised state. Then we urgently need to shield the vulnerable healthcare workers at home.

Covid-19 is a serious threat to our nation including the lives of the frontline workers, especially the experienced doctors. We need to save them from getting infected or worse. Otherwise, we may end up with a seriously damaged and broken healthcare system in Bangladesh in the future.

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PHOTO: AMRAN HOSSAIN

A lab technician, wearing personal protective equipment (PPE), collects samples for coronavirus testing at the Fever Clinic in Dhaka's Shahbagh area.

UK use mostly FFP3 masks and, in Bangladesh, N95 masks are being currently used. Every single healthcare worker in the UK, the USA, Australia and New Zealand had to go through the mask fit test. If you fail to pass a test for a particular type of mask, you are not allowed to use that mask during patient care. The risk of using a poor-quality, faulty or unfitted mask is contamination with the virus by breathing infected air around the edges of the mask and into the lungs. Mask fitting is usually difficult for a person with beard who may fail the standard mask fit test. However, beard-friendly respirators or masks are also available.

Unfortunately, as far as I know, the mask fit test is not available in Bangladesh. There are a variety of both manual and electronic quantitative mask fit testing machines available in the market. The manual (Medical Respirator N95 Fit Test) is simple but

How about a Hippocratic Oath in the police code of ethics?



MUHAMMAD NURUL HUDA

ANY idea of incorporating a Hippocratic Oath in the police code of ethics might sound utopian or unusual at the least. However, recent developments in the sphere of

criminal law enforcement around the world compel us to revisit the ethical dimension of policing. In Bangladesh, where at least 44 policemen have died from coronavirus infection while trying to provide essential services, it is also an opportune moment to dwell upon the salutary preventive role of a conventionally coercive organisation like the police. Since human liberty is inextricably linked with policing, the police officials—quite like the physicians—need to develop a sensitivity to respect the sanctity of human life and proactively help keep people out of harm's way.

Considering the recent incidents of police misconduct in the USA and elsewhere and the renewed push for police reforms, it is imperative that police departments anywhere in the world "learn a new language" and evaluate the purpose and priorities of their job. The profession of policing needs to evolve with the needs and demands of the 21st century.

The unconscionable tragedy of George Floyd's death in the USA, in May, laid bare the deficiencies of

American policing, a reality which resonated with cities and communities across many countries. The sad fact is, the protests that have sprung up against racism and police brutality ever since have done little to bring about the desired reforms.

There is no denying that those involved with policing need to do some soul-searching and reconsider what they stand for professionally. Rewriting the police code of ethics would be a desirable starting point. Those who have knowledge of the work culture of criminal law enforcement know that many aspects of the current law enforcement code of ethics date back to the mid-20th century. Changing the code of ethics, therefore, would be unprecedented and profoundly impactful.

In drafting a new code of ethics worthy of a democratic society, policing should turn to Hippocrates. It is well known that the Hippocratic Oath for physicians is commonly summarised as "Do no harm". We also know that a physician's job is to examine the patient, diagnose the medical condition underlying present symptoms, and prescribe an effective course of treatment. A doctor who only attends to the visible symptoms, provides ineffective medicine, or treats in a manner that is ultimately harmful has failed the patient. Going by the above standards, policing in many countries including the USA may be guilty of malpractice.

Experts believe that a police code of ethics designed around the Hippocratic Oath should incorporate four key themes that are not highlighted in

the present policies and practices. The themes are: evidence-based policing, emphasis on crime prevention, professional identity, and sanctity of human life.

Over the last few decades, a vast body of scientific evidence has emerged regarding what works in policing and, perhaps more importantly, what does not. Policing is not an abstract intellectual issue. We know how police interventions directly impact the lives of community members. So ignoring the evidence in favour of so-called tradition or age-old practices or a personal opinion will be an irresponsible thing to do. Unscientific policing is unethical policing.

The present code is largely focused on enforcement and the desire to apprehend is entrenched in the policing system. This orientation needs to give way to heightened crime prevention. It is the gradual decrease of crime and disorder that policing should seek to achieve.

The police code of ethics must be able to clearly establish that police are, first and foremost, members of the community—not some higher caste standing between good and evil. It should advocate the protection of the weak and innocent while opposing unnecessary use of force and violence.

Policing must fundamentally acknowledge the sanctity of human life and duty to protect every person, even individuals who have placed themselves or others in jeopardy. The police have an ethical duty to render aid to prevent loss of life.

One may recall that Hippocrates viewed the art of medicine as

something fundamentally connected with the love of humanity. The very fabric of policing, therefore, needs to go through a transformation until the same can be said about law enforcement. It is time for a new code.

It may well be that the traditional

sensitive, who are agents of assistance rather than control, accountable not just for what they do but how they do it, and are no longer the unthinking, unquestioning functionaries responsible only to their seniors. The move toward this new code of ethics



Police officers wearing face masks patrol the Bazar Station Road area of Sirajganj Sadar Upazila.

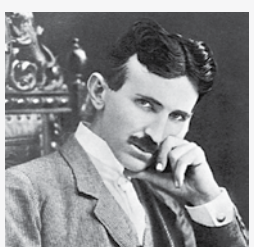
PHOTO: COLLECTED

discipline code is now less useful to a modern police service than a properly introduced code of ethics and sound training in its principles. The change in policing ethos brings with it a new image of the police officers—officers who are required to be culturally

and replacing older styles of discipline is a significant one. Societies are changing, as are people's expectations from the police—the police should respond appropriately.

Muhammad Nurul Huda is a former IGP.

QUOTABLE Quote



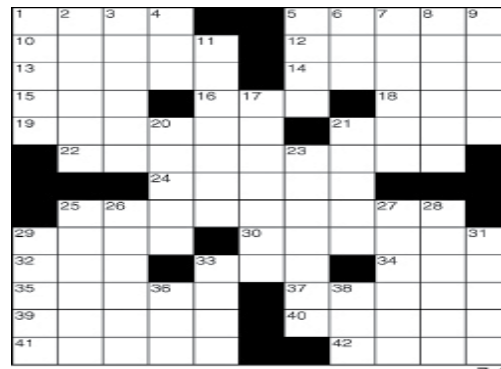
NIKOLA TESLA (1856-1943)

Serbian American inventor and engineer who discovered and patented the rotating magnetic field.

I don't care that they stole my idea... I care that they don't have any of their own.

CROSSWORD BY THOMAS JOSEPH

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|--------------------|--------------------------|-----------------------------|
| ACROSS | 32 Crude abode | 7 Film set on Pandora |
| 1 Close follower | 33 Iris setting | 8 They're underage |
| 5 Washington | 34 Blue | 9 Play part |
| 10 Not dissonant | 35 Bakery come-on | 11 "Smiley's People" author |
| 12 Municipal | 37 Boring movie | 17 "Shoot!" |
| 13 Follow | 39 Mink's cousin | 20 Nino's mother |
| 14 Laughable | 40 Natural in Vegas | 21 Sculptor Moore |
| 15 Long, long time | 41 Bar orders | 23 Female in a pride |
| 16 Heel | 42 Throw | 25 Patriot's day |
| 18 Hauler's unit | | 26 Completely |
| 19 Pinter works | DOWN | 27 Balkan region |
| 21 Fast runner | 1 Spirited horse | 28 Traps |
| 22 Independence | 2 Graduate's distinction | 29 Lack of order |
| Day sights | 3 Open, in a way | 31 Perfect places |
| 24 Sink feature | 4 Letter after sigma | 33 Shucking units |
| 25 Independence | 5 Corrosive stuff | 36 Got together |
| Day sights | 6 Clamor | 38 Trawling need |
| 29 Volcano shape | | |
| 30 Whoever | | |



YESTERDAY'S ANSWERS



BEETLE BAILEY



BY MORT WALKER



BABY BLUES



BY KIRKMAN & SCOTT



WRITE FOR US. SEND US YOUR OPINION PIECES TO dsopinion@gmail.com.