

## **Cochrane Work COVID-19 priority programme**

Systematic reviews on  
occupational health and safety  
interventions in relation to  
COVID-19

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# About us

We exist so that occupational health and safety decisions get better



# 1 Cochrane Work

Cochrane Work is one of the reviews groups collectively known as Cochrane. Cochrane is an international, non-profit organization that aims to help people make well-informed decisions about health care by preparing, maintaining and promoting reviews on the effects of occupational health and safety interventions. We seek non-commercial funding for four systematic reviews on priority topics relating to COVID-19.

## 1.1 Contact details

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## 1.2 Our mission

Our mission is to promote evidence-informed decision-making in occupational health by producing high-quality, relevant, accessible systematic reviews. Our work is internationally recognized as the benchmark for high-quality information about the effectiveness of occupational health and safety measures.

We aim to provide accessible, credible information to support informed decision-making which has never been more important or useful for improving global health. In the Internet age, people have much greater access to health information, but it is often difficult to know whether this information is accurate and unbiased. We do not accept commercial or conflicted funding. It is vital for us to generate authoritative and reliable information, working freely, unconstrained by commercial and financial interests.

## 1.3 The focus of our systematic reviews

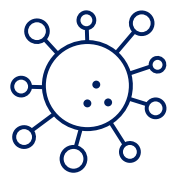
Our focus is on:

- Health and safety risks posed by exposures at the workplace;
- Prevention of occupational and work-related diseases;
- Work participation;
- Health promotion at the workplace.

## 1.4 Four important priority topics of our COVID-19 priority programme need funding

This document highlights four priority topics relating to the coronavirus pandemic that need funding before they can be developed:

1. Workplace interventions to reduce exposure to SARS-CoV-2
2. Interventions to improve return to work in people diagnosed with COVID-19
3. Experiences and needs of people after COVID-19 that impact return to work
4. Interventions to prevent exposure to SARS-CoV-2 aerosols in healthcare workers due to aerosol generating procedures



# Our COVID-19 priority programme

We want to provide accessible,  
credible information to support  
informed decision-making in  
relation to COVID-19 at the  
workplace



## 2 Our COVID-19 priority programme

Cochrane Work has actively engaged in [Cochrane's response programme to Covid-19](#). Cochrane Work is responding to the COVID-19 pandemic by working on COVID-19 priority topics in the field of occupational health and safety. In this programme we address questions of those needing to make informed decisions at this time or in the future and questions from front-line healthcare workers.

### 2.1 What we already have done

In May 2020 we published the updated review on [Personal Protective Equipment \(PPE\) for COVID-19 in health care workers](#). In January 2021 Cochrane Work actively collaborated with the Cochrane Oral Health group to synthesize the evidence on [measures to protect dentists from contaminated aerosols](#) resulting in one published review and one on its way. In May 2020 we developed the Special Collection [Coronavirus \(COVID-19\): optimizing health in the home workspace](#).

### 2.2 What we want to do further

The importance for working life of COVID-19 cannot be underestimated and will last also for years to come. We therefore launched four systematic reviews that should help collecting the evidence for other important lasting workplace problems. There are two reviews about preventive workplace interventions and two reviews about return to work after COVID-19. We have set up an international call for author teams and found four highly qualified author teams willing to conduct the following reviews(see page 8 and further for details about these systematic reviews):

1. Workplace interventions to reduce exposure to SARS-CoV-2;
2. Interventions to improve return to work in people diagnosed with COVID-19;
3. Experiences and needs of people after COVID-19 that impact return to work;
4. Interventions to prevent exposure to SARS-CoV-2 aerosols in healthcare workers due to aerosol generating procedures.

### 2.3 What we need

We are seeking funders who can contribute to our COVID-19 priority programme with a grant. The grant is for helping the author teams of the above mentioned reviews to:

- Prepare the Cochrane protocol
- Search and select literature
- Conduct risk of bias assessments
- Conduct meta-analyses
- Synthesize evidence using other methods
- Prepare Summary of findings tables
- Apply GRADE methodology and rate the certainty of the evidence
- Advise on knowledge translation and dissemination
- Write a plain language summary

Each review will take about six months to complete. The review team consists of about ten persons. The total costs of the team and the guidance of the editorial base are estimated at € 75 000 over this half year. The host institutions of the authors are willing to contribute in kind through allowing working time spent to the amount of € 50 000. We are looking for funders who appreciate the importance of these topics and are willing to contribute € 25 000 as a grant to the review team and the editorial base of Cochrane Work.

***Workplace interventions to reduce exposure to SARS-CoV-2***

Interventions to prevent healthcare workers and dentists from infection with SARS-CoV-2 are covered in other Cochrane reviews. Interventions for other workers are not systematically assessed, yet:

- workers in close contact with potential infectious clients, such as taxi-drivers and cashiers in shops, and
- workers without close contact to clients, but who can be infected by colleagues.

The focus of this Cochrane review are interventions for those types of workers. Interventions you can think of, are for example (Barned and Sax, NEJM 2020): personal hygiene such as hand disinfection, workspace cleaning, employee screening by the employer, redesigning workspaces such as greater distance and improved ventilation, telework or working from home for segments of workers, etc.

This Cochrane review will include any controlled study aimed at reducing infection conducted at workplaces (other than health care) among workers exposed to SARS-CoV-2 or comparable upper airway viruses.

***Interventions to prevent exposure to SARS-CoV-2 aerosols in healthcare workers due to aerosol generating procedures***

Aerosol generating procedures (AGPs) put health care workers at special risk of respiratory infection. This is further stressed by current experiences with COVID-19 patients. In guidelines, health care workers are required to put on more and more stringent PPE to protect themselves compared to other situations in which they care for infectious patients. The strategy of hierarchy of controls, as used in occupational hygiene, would require first considering elimination of the source of the exposure, then considering engineering controls and only as a last resort the use of PPE. Aerosol generating procedures are a longstanding problem in dental care and many interventions have been applied to either control the source of the aerosol in the patient or to extract the aerosol close to where it is generated. Similar interventions are possible in AGPs in health care in general. The objective of this review is to list and evaluate the effects of interventions that eliminate the source or use engineering controls to prevent infections arising from aerosols in health care workers.

***Interventions to improve return to work in people diagnosed with COVID-19***

A large group of people experience ongoing psychological and physical health problems long after having the COVID-19 disease. This may impact their ability to participate in paid work. For example, fatigue has been reported as a long term complaint in many people with COVID-19. Workers that have suffered from COVID-19 will have to return to work and for some this will be challenging. They might experience long term effects and challenges in returning to work similar to other infectious diseases.

The focus of this Cochrane review are interventions that are aimed at return to work after COVID-19. For example interventions targeting the workers' physical condition, working conditions or coping strategy.

This Cochrane review will include controlled intervention studies aimed at improving return to work in patients after COVID-19, or any other comparable upper airway infection.

***Qualitative review on the experiences and needs of people after COVID-19 that impact return to work***

The aim of this review is to make an inventory of the reported health complaints and the challenges and barriers that are experienced that could impede the ability to return to work after COVID-19.

We plan to do a qualitative evidence synthesis, which would allow a deeper understanding of the problem of RTW during and after the COVID-19 pandemic. Using this methodology, we also explore what elements are essential to target in return-to-work support, advice and interventions. It focuses on:

- increasing understanding of a phenomenon of interest (e.g. workers conceptualization of what good work or RTW looks like during/after COVID-19 pandemic);
- identifying associations between the broader environment within which people live and the interventions that are implemented;
- increasing understanding of the values and attitudes toward, and experiences of, health conditions and interventions during COVID-19 by those who implement or receive them; and
- providing a detailed understanding of the complexity of experiences to inform the (future) development of interventions and their impacts and effects on different subgroups of people and within different contexts.



Help us in providing accessible, credible information to support informed decision-making in relation to COVID-19 at the workplace.

Please contact us for more information and funding our COVID-19 priority programme:

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