

Title:			
Working with Blood Borne Viruses Policy			
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Version Control

Date	Author	Version/Page	Reason for change
2010	Consultants in Occupational Medicine and Public Health Medicine	1.0	Initial version
2014	Consultants in Occupational Medicine and Public Health Medicine	2.0	Approved by LICAC
2016-21	Consultants in Occupational Medicine and Public Health Medicine	2.1	Under review. Recommended to PAG by H&S Committee
May 2021	Consultants in Occupational Medicine and Public Health Medicine	3.0	Approved by the NHS Lothian Policy Approval Group
Oct 2023	Consultants in Occupational Medicine and Public Health Medicine	3.1	Technical update

Executive Summary

The overall aim of the policy is to control the risk to patients and staff from health care workers (HCW) infected with blood borne viruses (BBV), to control the risk to HCWs from BBV infected patients and to reinforce good practice. The policy outlines how NHS Lothian will ensure compliance with the Scottish Government's guidance on health clearance for HCW for BBV (Hepatitis B, Hepatitis C and Human Immunodeficiency Virus (HIV)).

Key points include:

- Clarification of roles and responsibilities for delivery of this policy. All HCW involved in clinical roles have a professional duty to protect patients and should be aware of the procedures outlined in this policy. Individuals who believe they may have been exposed to a BBV must seek medical advice. The establishment of BBV fitness criteria and associated testing regimes for staff employed in, or applying for, posts involving Exposure Prone Procedures (EPP - defined as those invasive procedures where there is a risk that injury to the worker may result in the exposure of the patient's open tissues to the blood of the worker).
- This involves the establishment and operation of:
 - Detailed lists of posts assessed as involving EPP and staff employed within these posts.

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- Effective recruitment and pre-employment procedures ensuring no staff commence EPP work prior to confirmation that the BBV status is compatible with the policy.
- Effective ongoing monitoring, surveillance, self-reporting and staff support systems to ensure BBV status of staff in EPP posts continues to be in accordance with the policy.
- The establishment of policy for the ongoing management and support of BBV-infected HCW, according to the NHS Lothian Redeployment policy.
- The establishment of policy for reporting procedures and risk assessment where a BBV-infected HCW is found to have performed EPP.
- Details of the current [NHS Lothian Needlestick Injury Management Procedure](#), including rapid access for reporting, effective access to post-exposure prophylaxis and follow-up according to agreed guidelines

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1.0 Purpose

The overall aim of the policy is to control the risk to patients and staff from health care workers (HCW) infected with blood borne viruses (BBV), to control the risk to HCW from patients and to reinforce good practice.

2.0 Policy statement

In the UK, the policy on the management of healthcare workers (HCWs) infected with blood borne viruses (BBVs) has evolved over time. This evolution has been informed by evidence on the risk of HCWs transmitting blood borne viruses to their patients, the outcomes of patient notification exercises and the recommendations of the Expert Advisory Groups.

In October 2017, a consolidated guideline incorporating previously existing guidance on health clearance of healthcare workers and management of healthcare workers living with BBVs into one document was issued. This guideline, [Integrated guidance on health clearance of healthcare workers and the management of healthcare workers living with bloodborne viruses \(hepatitis B, hepatitis C and HIV\)](#), is regularly updated, with the most recent iteration being in November 2022

This policy updates and replaces the previous Lothian policies for infected healthcare workers namely 'Protecting healthcare workers and patients from Hepatitis B – Action Plan and Supplement' (October 2000), 'Hepatitis C Infected Health Care Workers Action Plan' (December 2003), Scottish Executive guidance 'HIV Infected Healthcare Workers: Guidance on Management and Patient Notification' issued with SE HDL(2005)33 in July 2005, Hepatitis B infected healthcare worker and antiviral therapy CEL 38(2009)2, Practice of exposure prone medical procedures by healthcare workers living with HIV or Hepatitis B 'issued as SGHD/CMO (2014)2; and the Blood Borne Virus aspects of the Health Clearance for TB, Hepatitis B, Hepatitis C and HIV', issued by the Scottish Government 2008.

The aim of this policy is to control the risk to patients and staff from Health Care Workers (HCW) infected, or potentially infected, with blood borne viruses (BBVs) by documenting NHS Lothian requirements and systems for the management of such HCWs. It also aims to control the risk to HCW from patients and reinforce good practice. It represents the definitive plan for implementing, within Lothian, the UK requirements for protecting patients from Hepatitis B, C and HIV as outlined in most recent guidance documents¹. In addition, the policy maintains the confidentiality and safe working of staff infected with BBVs and Annex 1 details the NHS Lothian procedure for dealing with incidents involving potential exposure to blood borne viruses.

This policy outlines how NHS Lothian will ensure compliance with the Scottish Government's guidance on health clearance for HCW for BBV (Hepatitis B, Hepatitis C and Human Immunodeficiency Virus (HIV)), and sets out:

- BBV fitness criteria and associated testing (see section 6.0) regimes for staff employed in, or applying for, posts involving EPP.
- Responsibilities (see section 5.0) within NHS Lothian for the delivery of this policy

- the NHS Lothian policy for the ongoing management and support of BBV-infected HCWs, according to the [NHS Lothian Redeployment Policy](#)
- a procedure for dealing with incidents involving potential exposure to blood borne viruses is maintained, which allows rapid access for reporting, effective access to Post Exposure Prophylaxis (PEP) and follow-up according to agreed guidelines (see section 6.4)
- the NHS Lothian procedure for the reporting of BBV-infected healthcare workers who have performed EPP to the Director of Public Health (DPH), and outline the
- procedures (see section 6.8) for subsequent risk assessment and patient notification exercise if appropriate.

3.0 Scope

This policy covers NHS Lothian employees, including bank and locum staff and workers who may be coming from high prevalence areas. Agencies supplying staff to NHS Lothian must also comply in full. Education and training establishments and other NHS employers providing staff or students to work at NHS Lothian sites must ensure their staff or students are compliant with no less rigorous standards. General Practitioners, General Dental Practitioners, the Spire Murrayfield Hospital and independent practitioners will be responsible for implementation in relation to themselves and their staff and students, liaising with the Lothian NHS Occupational Health Service (OHS), as required.

This policy specifically relates to all NHS Lothian healthcare workers with direct patient contact.

The BBVs covered by this policy are Human Immunodeficiency Virus (HIV), Hepatitis B Virus (HBV), and Hepatitis C Virus (HCV). The transmission of these viruses to patients from infected staff is an identified risk, which needs to be controlled. However, there is a greater risk to HCWs from the body fluids of infected patients.

Basic control of infection measures provide an important element of BBV infection control, and must be followed by all HCW³.

After examining the risks, expert UK guidance suggest that formal pre-employment and “in post” clearance for BBV carriage should be limited to those HCWs involved in carrying out EPPs, working in exposure prone environments and performing clinical duties in renal units or any other settings involving renal dialysis.

This policy operates in conjunction with the NHS Lothian Immunisation Policy and NHS Lothian Needlestick Management Protocol for dealing with incidents involving potential exposure to blood borne viruses (Annex 1).

4.0 Definitions

4.1 Healthcare workers (HCW)

HCWs are persons, including students and trainees, whose activities involve contact with patients or with blood or other body fluids from patients in a healthcare setting.

For considerations of Health Clearance, in terms of blood borne virus, the Scottish Government advice relates to HCWs with 'direct patient contact'.

This is defined as 'staff who have regular clinical contact with patients and who are directly involved in patient care'. These include doctors, dentists, midwives, nurses, clinical support workers, paramedics and ambulance drivers, occupational therapists, physiotherapists and radiographers. Students and trainees in these disciplines and volunteers who are working with patients must also be included.

4.2 Non-clinical staff

Non-clinical staff are workers who have social or professional contact with patients, but are not directly involved in patient care. This group includes receptionists, ward clerks, porters and cleaners.

4.3 Exposure Prone Procedures (EPP)

Exposure Prone Procedures (EPP) are defined as follows:

Invasive procedures where there is a risk that injury to the worker may result in the exposure of the patient's open tissues to the blood of the worker (bleed-back). These include procedures where the worker's gloved hands may be in contact with sharp instruments, needle tips or sharp tissues (e.g. sharp spicules of bone or teeth) inside a patient's open body cavity, wound or confined anatomical space, where the hands or fingertips may not be completely visible at all times.

Procedures where the hands and fingertips of the worker are visible and outside the patient's body at all times, and internal examinations or procedures that do not involve possible injury to the worker's gloved hands from sharp instruments and/or tissues, are not considered to be exposure prone, provided routine infection control procedures are adhered to at all times.

Examples of such procedures include:

- taking blood (venepuncture)
- setting up and maintaining intravenous lines or central lines (provided any skin tunnelling procedure used for the latter is performed in a non-exposure prone manner)
- minor surface suturing
- the incision of external abscesses
- routine vaginal or rectal examinations

- simple endoscopic procedures
- Examples of UKAP’s advice on which procedures are, and are not, exposure prone are available¹.

5.0 Implementation roles and responsibilities

5.1 Staff responsibilities

5.1.1 Medical Director

The overall responsibility for the operation of this policy rests with the Medical Director, who is required to ensure that the key elements are subject to regular audit.

5.1.2 Director of Human Resources

The Director of Human Resources has the responsibility to ensure that the policy is published and is known by NHS Lothian HCWs.

5.1.3 Local management

The policy requires specific action from management (including service managers, clinical directors and departmental heads), Human Resources, Recruitment Departments, and Occupational Health and Safety.

As a minimum, Department heads must assess this policy for relevance to their employees. Where the policy has relevance i.e. where employees have direct patient contact, the policy should be read and understood by the employees.

5.1.4 Healthcare workers

All HCW involved in clinical roles have a professional duty to protect patients and should be aware of the procedures outlined in this policy. Individuals who believe they may have been exposed to a BBV must seek medical advice.

Staff should be aware of the relevant regulatory bodies’ statements on professional responsibilities:

- General Medical Council 2006. Good Medical Practice. www.gmc-uk.org
- General Dental Council. www.gdc-uk.org
- Nursing and Midwifery Council. 2008. The Code – Standards of conduct, performance and ethics for nurses and midwives. www.nmc-uk.org

5.1.5 Other stakeholders

In addition, the following will be responsible for implementation of the policy in relation to themselves, their staff and students:

- a. Agencies, education and training establishments and other NHS employers providing staff and students to work at NHS Lothian sites

- b. General Practitioners
- c. General Dental Practitioners
- d. Other independent practitioners including the Spire Murrayfield Hospital

5.2 Ongoing monitoring and surveillance

- a. Individuals who believe they may have been exposed to BBV infection, at work or in their personal life, must seek medical advice and if appropriate, undergo diagnostic testing. Where such testing shows positive results, the worker must self-refer to Occupational Health to review their “fitness to work” and may need to cease EPP.
- b. Where accidental exposure to blood and body fluids occurs during work within NHS Lothian the [NHS Lothian Needlestick Injury Management Procedure](#) should be referred to.

This policy outlines responsibilities and procedures for dealing with needlestick-type injuries in

- healthcare workers, and;
 - members of the public presenting to healthcare services.
- c. For healthcare workers this includes a risk assessment to be carried out by their line manager:
 - by completing the Sharps/Contamination incident form available on the NHS Lothian intranet. The form can be accessed via:

<https://lht.cohort.hosting/Cohort10/External/ExternalRegister.aspx>
 - OR
 - by searching NHS Lothian Occupational Health

<https://weare.nhslothian.scot/occupationalhealthcommercial/>) and entering

‘Contact us (<https://weare.nhslothian.scot/occupationalhealthcommercial/contact-us/>) Occupational Health

Onward referral can then be made for specialist advice as required.

- d. Senior managers and departmental heads must ensure that they retain and maintain documented clearance for all staff carrying out EPP.
- e. EPP staff subject to OHS follow-up requirements should attend for the required screening or immunisation when requested by the OHS. Where Occupational Health Clearance is withdrawn or where the review dates are exceeded without any clearance, the individual must cease EPP.
- f. Clinicians should remind any BBV infected HCW under their care to refer themselves to OHS. If they become aware that an infected HCW is performing EPP or has done so in the past and has not followed the professional requirements of this policy to refer themselves to the OHS, or to modify their practice due to BBV infection, the clinician has a responsibility to inform Occupational Health.

- g. Occupational Health will risk assess the situation and notify the Medical Director/Nurse Director as appropriate. The Medical / Nurse Director will then consider who else should be notified.
- h. The Medical Director/Nurse Director must ensure that NHS Lothian DPH is notified of any case where a HCW has performed EPP, when their BBV status does not meet the EPP standards as laid down in this policy. The responsibility for instituting and co-ordinating any patient notification exercise rests with the DPH (Annex 7).
- i. HCWs, who have carried out EPP when their BBV status does not meet the requirements of this policy, have a personal responsibility to cease EPP and inform the OHS where they will be given support and advice.

5.3 Confidentiality

HCWs' BBV status is subject to the same rights of medical confidentiality as any patient in receipt of medical care or investigation. Every effort should be made to avoid disclosure of the affected worker's identity, or information that would allow deductive disclosure.

6.0 Associated materials

- [Operational Procedures for Working with Blood Borne Viruses](#)
- [Needlestick Injury Management Procedure](#)
- [Blood Borne Viruses – Background for Risk Assessment](#)
- [Blood Borne Viruses Exposure Risk Form](#)
- [Current recommended HIV Post-Exposure Prophylaxis \(PEP\)](#)
- [Needlestick Injuries and Prevention of HIV Infection](#)
- [Post-Exposure Prophylaxis \(PEP\) Antiretroviral Starter Pack](#)
- [Disease-specific procedures for management of HCW's – Hepatitis B](#)
- [Disease-specific procedures for management of HCW's – Hepatitis C](#)
- [Disease-specific procedures for management of HCW's – HIV](#)
- [Requirement for Identified and Validated Samples \(IVS\)](#)
- [Procedure for reporting and risk assessment of a HCW diagnosed with BBV](#)

The documents listed above were approved by the NHS Lothian Health & Safety Committee.

- [Toolbox Talk – Working with BBV Policy](#)

6.1 Lists of EPP posts – (held locally by departments)

Service Managers and Departmental Heads, in conjunction with the clinical director for the service, are responsible for assessing all their clinical posts and must maintain current lists of posts involving EPP.

Posts should only be designated as involving EPP where they meet the definitions in 4.3 above. Over-designation of EPP posts leads to unjustified and inappropriate clinical investigations for screening for which there are ethical implications. Advice to managers is available from the Medical Director and from Consultant Occupational Physicians.

6.2 Recruitment and pre-employment procedures

The recruitment process must:

- a. Inform all prospective clinical HCW of NHS Lothian policy for staff who believe they may have been exposed to BBV (point 3.1 below);
- b. Inform all prospective EPP staff of NHS Lothian policy for pre-employment BBV screening requirements, which they must complete prior to commencing the relevant post

Prospective EPP staff:

Must comply in full with BBV screening requirements of this policy; failure to do so will determine that the individual will not be employed or allowed to work with NHS Lothian. If appointed, disciplinary action may result if it is discovered that test result misrepresented their BBV status.

The OHS **must**:

- a. Assess the BBV status of all prospective EPP staff notified to the service by the recruitment process. Assessment is based on examination of results of previous tests, by conducting tests using identified validated samples or by a mixture of both.
- b. Inform the HCW of the results of their evaluation, including the provision of advice on the implications for future employment.

In addition:

- I. Where the HCW is already employed by NHS Lothian in another post, the OHS will review their continued fitness for this post based on the new information;
- II. When the pre-employment testing is carried out by NHS Lothian OHS, the service is responsible for advising the HCW on the need for further specialist or GP referral.

Service Managers, Clinical Directors and Departmental Heads must ensure that individuals selected for EPP posts do not commence EPP until clearance is provided by the OHS via the relevant recruitment department. [Recruitment information & processes.](#)

6.3 Redeployment procedures

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- a. Where OHS assessments of existing staff determines that the worker is unfit for their employed role or identifies the need to modify practice, the Employee Relations advisor, in liaison with Partnership representatives, will work with the manager of the employee to arrange suitable alternative work which may involve referral to the NHS Lothian Redeployment Policy.

- b. Where the OHS assessment indicates occupational causation of the infection, it will be reported statutorily under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations, and the employee will be retained in employment without detriment in pay and conditions.

6.4 Needlestick Injury Management Procedure

[A practical step by step procedure](#) on what to do after potential exposure to BBV following a needlestick or other non-sexual incident is contained in the 'NHS Lothian Needlestick Management Protocol' incidents involving potential exposure to blood borne viruses through needlestick injuries and other non-sexual exposures' (hyperlink to be inserted).

6.5 Operational procedures for 'Working with Blood Borne Viruses Policy'

[This procedure](#) outlines the practical steps required for the implementation of this policy with regard to recruitment and pre-employment procedures and ongoing monitoring and surveillance.

6.6 Disease specific procedures for management of healthcare workers

These three separate documents detail the NHS Lothian procedures for the management of:

- [Hepatitis B virus](#)
- [Hepatitis C virus](#)
- [HIV in healthcare workers](#)

They outline the procedures for pre-employment testing of staff and management of healthcare workers found to be infected with the viruses.

6.7 [Requirements for Identified Validated Samples \(IVS\)](#)

[This procedure](#) outlines the Occupational Health requirements for identified validated samples when testing HCWs for BBVs.

6.8 [Procedure for reporting BBV infected HCWs](#)

[This procedure](#) outlines the steps to take when a HCW is identified as being infected with a BBV. It details roles and responsibilities, process of risk assessment, need for patient notification and further reporting of cases

7.0 Evidence base

- [Integrated guidance on health clearance of healthcare workers and the management of healthcare workers living with bloodborne viruses \(hepatitis B, hepatitis C and HIV\), UK](#)

Advisory Panel for Healthcare Workers Living with Bloodborne Viruses (UKAP),
November 2022

- Scottish Workforce Directorate Employment and Retention Division. *Best Practice Guidance: Hepatitis B infected healthcare workers and antiviral therapy.*
http://www.sehd.scot.nhs.uk/mels/CEL2009_38.pdf
- National Infection Prevention and Control Manual - <http://www.nipcm.hps.scot.nhs.uk/>

8.0 Stakeholder consultation

Consultation with relevant stakeholders occurred when the policy was written. As this is a review of an existing policy, the stakeholders will be made aware of its update.

- Independent Medical & Dental Practitioners
- Spire Murrayfield
- Higher Education Institutions.

9.0 Monitoring and review

This policy will be reviewed and appropriately amended if necessary at two yearly intervals or earlier in line with changes in policy and guidelines.