

Protecting and improving the nation's health

Integrated guidance on health clearance of healthcare workers and the management of healthcare workers living with bloodborne viruses (hepatitis B, hepatitis C and HIV)

## **Quick Reference Guide**

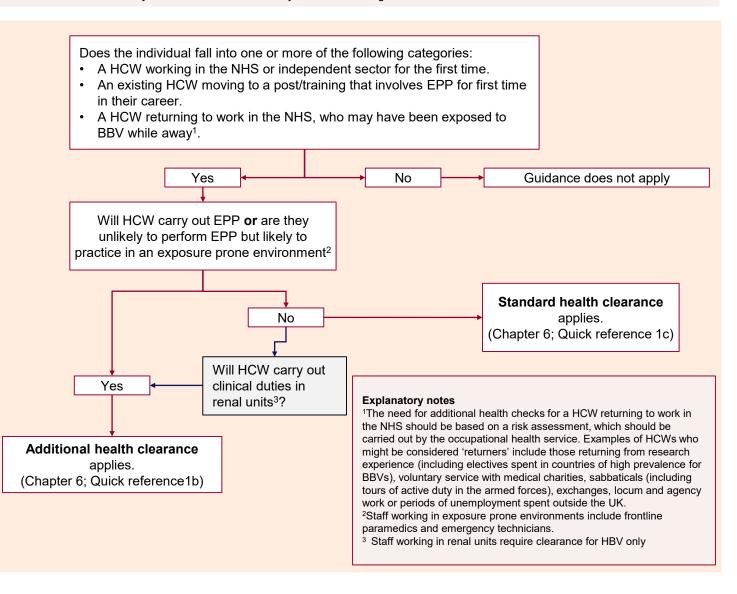
This document is intended as an aide-mémoire only and should be read in conjunction with the <u>guidance document</u>.

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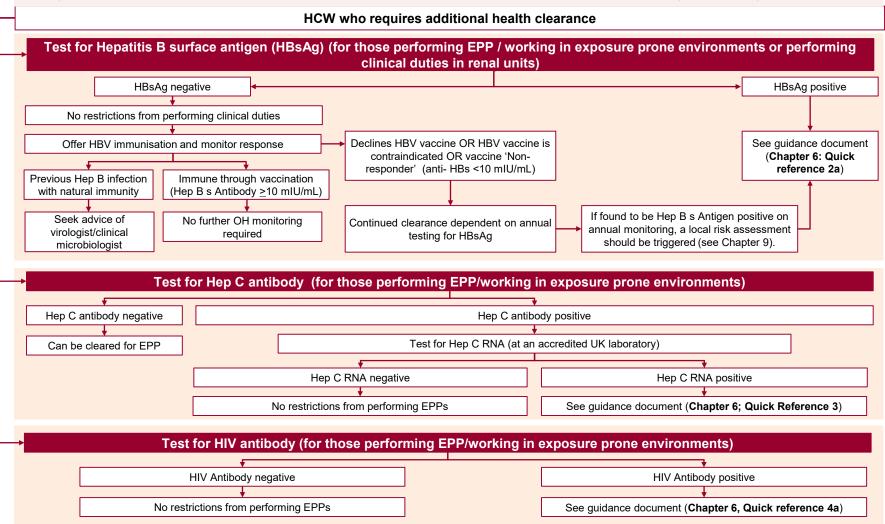
## 1a) Health clearance for new healthcare workers: Identification of 'new healthcare workers' (Chapter 6)

- The decision to clear individual HCWs to undertake EPPs is the responsibility of the consultant occupational physician in consultation with the treating physicians. UKAP may be consulted on the application of the policy, as needed.
- · This flowchart is intended as an aide-mémoire only and should be read in conjunction with the guidance document.



## 1b) Health Clearance for HCWs performing EPP/working in exposure prone environments (Chapter 6)

- The decision to clear individual HCWs to undertake EPPs is the responsibility of the consultant occupational physician in consultation with the treating physician. UKAP may be consulted on the application of the policy, as needed.
- Those commissioning tests to assess the BBV status of HCWs/monitor effectiveness of treatment should ensure that identified and validated samples (IVS) are used. Testing should be carried out by an accredited laboratory that is experienced in performing such tests.
- This flowchart is intended as an aide-mémoire only and should be read in conjunction with the guidance document.
- In the case of any HCW diagnosed with hepatitis B, hepatitis C or HIV, a local risk assessment may be required. A patient notification exercise (PNE) will only be recommended if the risk assessment identifies factors that increase the risk of BBV transmission from the HCW (see Chapter 9).



# 1c) Standard Health Clearance for all HCWs (including students) who have direct contact with blood, blood-stained body fluids or patient's tissues (Chapter 8)

This flowchart is intended as an aide-mémoire only and should be read in conjunction with the guidance document.

#### HCW who requires standard health clearance

#### **HBV** vaccination

Offer immunisation against hepatitis B and tests to check their response to immunisation, including investigation of non-response.

Guidance on immunisation against hepatitis B, which includes information about dosage, protocols and supplies, is contained in the relevant Chapter of the Green Book.

Declining a vaccination for HBV, or non-response to vaccine will not affect the employment or training of HCWs who will not perform EPPs/perform clinical duties in renal units.

#### **Testing for HCV antibody**

Offer a pre-test discussion and an HCV antibody test (and if positive, an HCV RNA test), in the context of their professional responsibilities.

Declining a test for hepatitis C, of having hepatitis C will not affect the employment or training of HCWs who will not perform EPPs.

### **Testing for HIV**

Offer an HIV antibody test with appropriate pre-test discussion, including reference to their professional responsibilities.

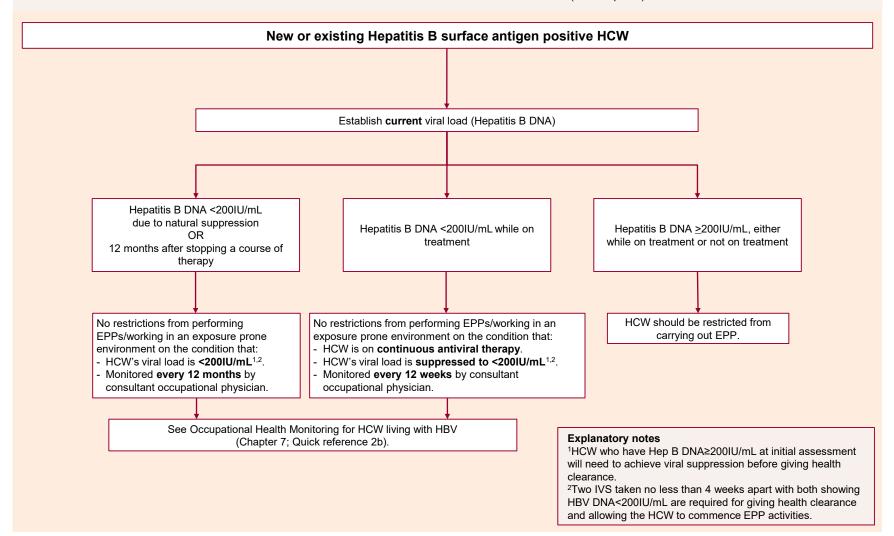
Declining a test for HIV, or having HIV **will not** affect the employment or training of HCWs who will not perform EPPs. Occupational health physicians should, however, consider the impact of HIV positivity on the individual's susceptibility to other infections when advising on suitability for particular posts.

### Restrictions on practice for HCW who do not perform EPP or work in exposure prone environments

HCW living with either hepatitis B, hepatitis C or HIV who do not perform EPP do not require ongoing occupational health supervision.

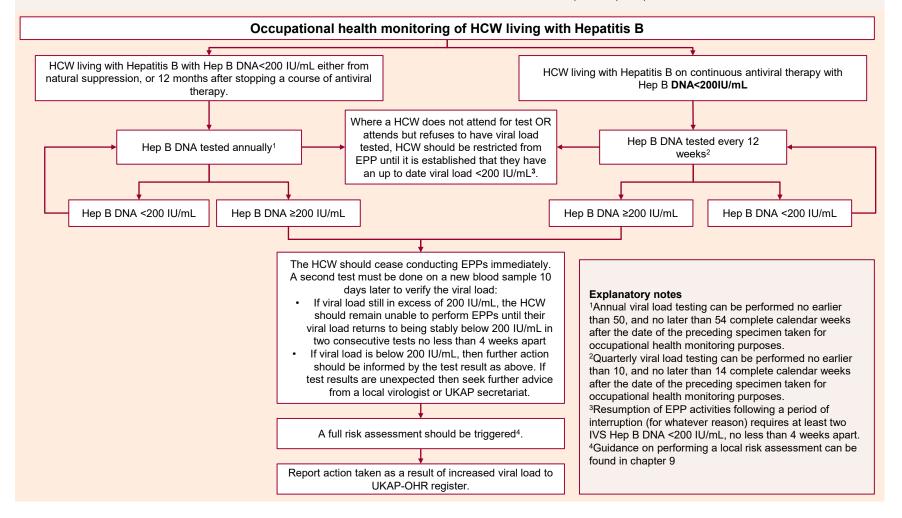
## 2a) Guidance for healthcare workers living with Hepatitis B: Initial health clearance (Chapter 6)

- · For HCWs who will perform EPPs/work in an exposure prone environment or perform clinical duties in renal units
- The decision to clear individual HCWs to undertake EPPs is the responsibility of the consultant occupational physician in consultation with the treating physician. UKAP may be consulted on the application of the policy, as needed.
- Those commissioning tests to assess the BBV status of HCWs/monitor effectiveness of treatment should ensure that identified and validated samples (IVS) are used. Testing should be undertaken by an accredited laboratory.
- This flowchart is intended as an aide-mémoire only and should be read in conjunction with the guidance document.
- In the case of any HCW diagnosed with hepatitis B, hepatitis C or HIV, a local risk assessment may be required. A patient notification exercise (PNE) will only be recommended if the risk assessment identifies factors that increase the risk of BBV transmission from the HCW (see Chapter 9).



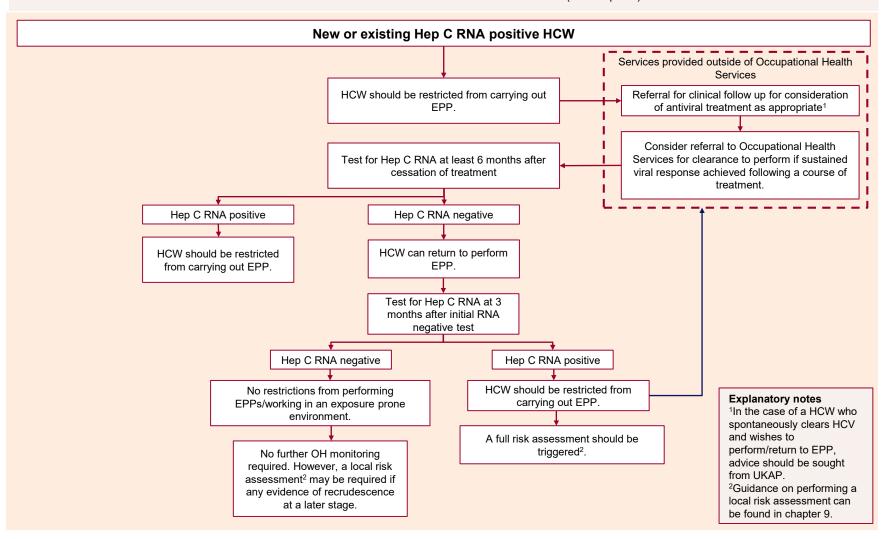
# 2b) Guidance for healthcare workers living with Hepatitis B: Occupational health monitoring (Chapter 7)

- · For HCWs who will perform EPPs/work in an exposure prone environment or perform clinical duties in renal units
- The decision to clear individual HCWs to undertake EPPs is the responsibility of the consultant occupational physician in consultation with the treating physician. UKAP may be consulted on the application of the policy, as needed.
- Those commissioning tests to assess the BBV status of HCWs/monitor effectiveness of treatment should ensure that identified and validated samples (IVS) are used. Testing should be undertaken by an accredited laboratory.
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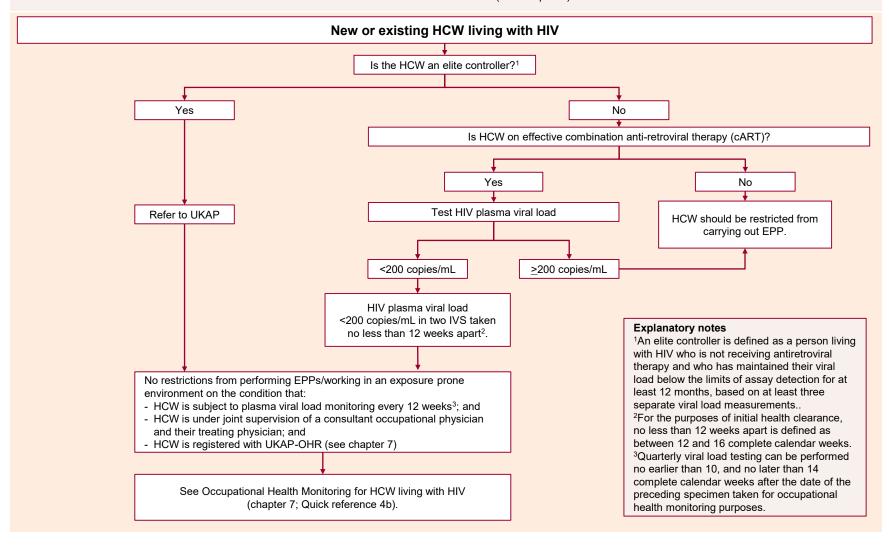
### 3) Guidance for healthcare workers living with Hepatitis C (Chapters 6 and 7)

- · For HCWs who will perform EPPs/work in an exposure prone environment
- The decision to clear individual HCWs to undertake EPPs is the responsibility of the consultant occupational physician in consultation with the treating physician. UKAP may be consulted on the application of the policy, as needed.
- Those commissioning tests to assess the BBV status of HCWs/monitor effectiveness of treatment should ensure that identified and validated samples (IVS) are used. Testing should be undertaken by an accredited laboratory.
- · This flowchart is intended as an aide-mémoire only and should be read in conjunction with the guidance document.
- In the case of any HCW diagnosed with hepatitis B, hepatitis C or HIV, a local risk assessment may be required. A patient notification exercise (PNE) will only be recommended if the risk assessment identifies factors that increase the risk of BBV transmission from the HCW (see Chapter 9).



## 4a) Guidance for healthcare workers living with HIV: Initial health clearance (Chapter 6)

- · For HCWs who will perform EPPs/work in an exposure prone environment
- The decision to clear individual HCWs to undertake EPPs is the responsibility of the consultant occupational physician in consultation with the treating physician. UKAP may be consulted on the application of the policy, as needed.
- Those commissioning tests to assess the BBV status of HCWs/monitor effectiveness of treatment should ensure that identified and validated samples (IVS) are used. Testing should be undertaken by an accredited laboratory.
- This flowchart is intended as an aide-mémoire only and should be read in conjunction with the guidance document.
- In the case of any HCW diagnosed with hepatitis B, hepatitis C or HIV, a local risk assessment may be required. A patient notification exercise (PNE) will only be recommended if the risk assessment identifies factors that increase the risk of BBV transmission from the HCW (see Chapter 9).



## Flowchart 4b) Guidance for healthcare workers living with HIV: Occupational health monitoring (Chapter 7)

- · For HCWs who will perform EPPs/work in an exposure prone environment
- The decision to clear individual HCWs to undertake EPPs is the responsibility of the consultant occupational physician in consultation with the treating physician. UKAP may be consulted on the application of the policy, as needed.
- Those commissioning tests to assess the BBV status of HCWs/monitor effectiveness of treatment should ensure that identified and validated samples (IVS) are used. Testing should be undertaken by an accredited laboratory.
- This flowchart is intended as an aide-mémoire only and should be read in conjunction with the guidance document.
- In the case of any HCW diagnosed with hepatitis B, hepatitis C or HIV, a local risk assessment may be required. A patient notification exercise (PNE) will only be recommended if the risk assessment identifies factors that increase the risk of BBV transmission from the HCW (see Chapter 9).

