

HUMAN RESOURCES

OCCUPATIONAL HEALTH: IMMUNISATION AGAINST HEPATITIS B

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South Yorkshire
Fire & Rescue
WORKING FOR A SAFER
SOUTH YORKSHIRE

IMMUNISATION AGAINST HEPATITIS B POLICY

INTRODUCTION

1. Operational Fire Fighters have been identified by The Department of Health as a group at risk of transmission of Hepatitis B and recommends vaccination against the virus.
2. Health and Safety legislation places the responsibility for ensuring an employee's health with the employer. The Control of Substances Hazardous to Health (COSHH) Regulations 2002 requires employers to undertake their own risk assessment and to bring into effect measures necessary to protect employees.
3. Whilst it is not compulsory for Fire Fighters to undergo immunisation, as a responsible employer South Yorkshire Fire and Rescue (SYFR) recommends and supports individuals to undergo immunisation against Hepatitis B.
4. As a member of the Dignity at Work Partnership¹, SYFR is committed to promoting a positive working environment where the dignity and respect, to which all employees are entitled, is not undermined. No employee should be treated less favourably on the grounds of race, gender or gender reassignment, disability, sexual orientation, religion or spiritual belief, colour, nationality, national or ethnic origin, marital/parental status, family ties, trade union or political belief, hours worked, or any other reason, either directly or indirectly.
5. This policy should be read and used in conjunction with the associated documents listed below:
 - a. Health and Safety Manual Part A – Policy
 - i. Section 4 Workplace Health, Safety and Welfare
 - ii. Section 6 PPE
 - b. Occupational Health Unit Advice Leaflet Blood Borne Viruses
 - c. Chief Fire Officer's Memorandum No 90 (Revised) Reimbursement of Medical Charges

WHAT IS HEPATITIS B

6. Hepatitis B is an infection of the liver caused by the hepatitis B virus. Individuals with the disease may or may not have symptoms and the illness will only be detected by a blood test.
7. The Hepatitis B virus is found in the body fluids of an infected person. The virus circulates in the blood stream and causes inflammation of the liver, which may lead to jaundice. Most people do recover from Hepatitis B with treatment, although it can take six months or longer. Around 10% of Hepatitis B sufferers become chronic carriers and carry the disease for life. The long term complications can include cirrhosis and cancer of the liver.

¹ The Dignity at Work Partnership is a partnership between the Government, Unite (the UK's largest union) and major public and private sector organisations. For further information on the Partnership, see www.dignityatwork.org

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HOW IS HEPATITIS B TRANSMITTED

8. In the workplace the most common routes of infection are:
 - a. Puncturing of the skin with blood/body fluid contaminated objects
 - b. Exposure through cuts or breaks in the skin e.g. acne, eczema or other skin conditions
 - c. Splashing of contaminated blood or body fluids into eyes, mouth or on to broken skin
 - d. Human bites or scratches which cause bleeding or other visible skin puncture.

PREVENTION

9. Education, risk assessments and adherence to safe working practices, including the correct use of personal protective equipment along with adoption of an immunisation programme can prevent the transmission of Hepatitis B.
10. The Hepatitis B vaccination is a course of three injections given at 0, 1 and 6 months after the first dose. Antibody testing is carried out two months after completion of the course, if the antibody result is satisfactory a booster dose is given five years later.
11. The Department of Health suggests that on present evidence a single booster dose five years after completion of a primary course is sufficient to retain immunity in those who continue to be considered at risk.
12. No further doses or antibody testing is required except in the event of a significant blood or bodily fluid exposure.

ACCESSING THE VACCINATION

13. The Occupational Health Unit is not resourced to carry out immunisations; fire fighters are advised to access immunisations through their General Practitioners.
14. In some instances General Practitioners may be reluctant to carry out immunisations as they have no obligation to administer vaccination for occupational reasons. However, General Practitioners do have a duty to provide Hepatitis B vaccination under essential services when treatment is necessary, for example in the case of bites or post exposure.
15. Individuals should in the first instance request immunisation from their own General Practitioner.
16. Where a charge may occur, Fire Fighters on the recommendation of the Chief Fire Officer and the Clerk and Treasurer in November 1998 will be reimbursed in respect of Hepatitis B immunisation carried out by General Practitioners. Where a charge occurs Fire Fighters must inform the Occupational Health Unit in order for payment to be

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processed.

17. In cases where an individual is unable to access immunisation, Occupational Health should be contacted for advice.

If you require any further guidance on this document or wish to view any related documents please contact an Occupational Health Nurse Advisor.