

GUIDELINE FOR THE ROLE OF THE OCCUPATIONAL HEALTH AND SAFETY SERVICE IN THE PREVENTION AND CONTROL OF INFECTION

TARGET AUDIENCE	NHSL WIDE, Acute, Health and Social Care Partnerships
PATIENT GROUP	All in patients and outpatients

Clinical Guidelines Summary

A 2011 publication by the Scottish Government states that NHS Scotland staff should not be made ill or injured by their work and their health and wellbeing will be promoted and improved within the workplace. NHS Scotland Boards are expected to build upon existing systems of management, including those covering occupational health and safety risk and controls by promoting a safe working environment and prevent ill health and injury (Scottish Government, 2011).

Therefore, an aim of NHS Lanarkshire Occupational Health & Safety is not only to prevent the adverse effect of exposure to environmental, microbiological and chemical agents, but also to assist ensure that work is suitably adapted to both the physiological and psychological needs of the worker and that, conversely, the worker is fit to do the job.

Lead Author	Jacqueline Barmanroy	Date Approved	October 2024
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INTRODUCTION

The role of Salus Occupational Health, Safety and Return to Work Service is to assist protect and promote the health of workers by preventing and controlling occupational diseases and accidents and to enhance the physical, mental and social well-being of workers. It provides a clinical preventative function whose aim is to be pro-active rather than reactive whenever possible.

Aim, purpose and outcome

A 2011 publication by the Scottish Government states that NHS Scotland staff should not be made ill or injured by their work and their health and wellbeing will be promoted and improved within the workplace. NHS Scotland Boards are expected to build upon existing systems of management, including those covering occupational health and safety risk and controls by promoting a safe working environment and prevent ill health and injury (Scottish Government, 2011).

Therefore, an aim of NHS Lanarkshire Occupational Health & Safety is not only to prevent the adverse effect of exposure to environmental, microbiological and chemical agents, but also to assist ensure that work is suitably adapted to both the physiological and psychological needs of the worker and that, conversely, the worker is fit to do the job.

Scope

Who is the Guideline intended to Benefit or Affect?

The policy will benefit all Healthcare workers (HCWs).

Who are the Stakeholders

This policy is aimed at all healthcare staff working in NHS Lanarkshire (NHSL).

Principle content

The Control of Substances Hazardous to Health (COSHH) Regulations 2002 Amended

The Control of Substances Hazardous to Health Regulations 2002 Amended, place specific responsibilities on employers to carry out risk assessments and implement measures to control exposure to harmful substances in the workplace. These regulations cover substances which include biological agents.

In addition to the duties imposed on employers, employees are placed under an obligation to:

- Take responsibility for their own health, safety and wellbeing and whilst at work co-operate with their employer with regards to any requirement imposed under statutory provision to enable the employer to comply with statutory legislation requirements.
- Co-operation with control of infection, prevention and control measures are therefore mandatory under certain circumstances.

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Protecting Staff from Infection

The role of NHS Lanarkshire Occupational Health & Safety in the prevention and control of infection is, above all, to deal with matters which affect staff, including those that come under the scope of the COSHH Regulations. This is done by the following means:

- An initial assessment of staff, normally, takes the form of pre-placement screening with the use of a health questionnaire; an Occupational Health professional will carry out this screening.
- In some instances screening of staff for freedom from certain infections will be undertaken prior to them being passed fit to commence in post.
- Carrying out comprehensive occupational immunisation programmes aiming to ensure prevention of infection as far as possible.
- The screening of staff and providing immunisation/s are an essential part of the preventative work of Occupational Health and assist protect staff, patients and the wider community against infection/s. For example - seasonal Influenza.
- Providing information and education.
- Assist in the identification of potential infection hazards in the workplace.
- Screening of staff for infection in an outbreak situation if this is required. See policy Staff Screening during Incidents & Outbreaks - <https://www.nhslanarkshire.scot.nhs.uk/download/staff-screening-during-incidents-and-outbreaks-policy/>
- Providing advice / support and / or counselling and follow-up care for individuals who have been exposed to an infection/s or infected.
- When required, work closely with the Infection Prevention & Control team / Public Health team with the aim of protecting staff health & safety and, in turn, that of patients and the wider community
- Health surveillance may be necessary to control risks to staff in the NHS setting, managers should risk assess the need for this.
- Use of appropriate Personal Protective Equipment (PPE) by staff, such as respirators, may be required. The need for this should be identified by risk assessment, which is undertaken by the manager.

Referral to the Occupational Health Service

The Human Resource Department / manager will normally request the Pre-placement screening of a potential employee. Staff will be screened, as required following including the 2 sets of guidance:- *Health Clearance for Tuberculosis, Hepatitis B, Hepatitis C and HIV for New Healthcare Workers with Direct Clinical Contact with Patients (2008)* and *the Integrated guidance on health clearance of healthcare workers and the management of healthcare workers living with bloodborne viruses (hepatitis B, hepatitis C and HIV) (2024)*

As a result of the development of an early relationship with NHS Lanarkshire Occupational Health Team, it is hoped that staff will feel more comfortable in requesting other services available, such as confidential counselling following exposure to blood or body fluids or other exposure to infection. No formal or management referral is required for any member of staff who wishes to use the Occupational Health Service. They can contact the NHS Lanarkshire Occupational Health Team via the advice line on 01698 759333

On-going intervention for the promotion and protection of staff health including immunisation / follow up post exposure to blood or body fluid (e.g. needle stick injury) /outbreak surveillance programmes is managed directly from NHS Lanarkshire Occupational Health Team or as a self-referral from the staff member.

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If, following risk assessment of a particular situation an Incident Management team (IMT) / Problem Assessment Group (PAG) or similar multidisciplinary group is convened, the group will advise the NHS Lanarkshire Occupational Health Team what is required to ensure the appropriate management / follow up of staff.

Confidentiality

Due to the specialised nature of the service provided by NHS Lanarkshire Occupational Health Team, Occupational Health records are held electronically and will not be accessible to non-Occupational Health Service staff without appropriate consent or legal documentation. Clinical and sensitive personal information will be handled in accordance with the Data Protection Act, General Medical Council (GMC) guidance on Confidentiality and GDPR.

Roles and responsibilities

All NHSL staff are responsible for implementing and following the information provided in this guideline.

Communication plan

This guideline will be launched using the weekly staff briefing and will be accessible on First Port.

This guideline will be discussed at the relevant management team meetings and the local partnership meetings.

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References

Scottish Government (2011), Safe and well at Work: Occupational Health and Safety Strategic Framework for NHS Scotland, Scotland: Scottish Government.

<https://www.gov.scot/publications/safe-well-work-occupational-health-safety-strategic-framework-nhsscotland/>

The Control of Substances Hazardous to Health Regulations (2002) amended, UK; Stationary office Limited

<https://www.legislation.gov.uk/uksi/2002/2677/contents>

Scottish Government (2008) Health Clearance for Tuberculosis, Hepatitis B, Hepatitis C and HIV for New Healthcare Workers with Direct Clinical Contact with Patients

<https://www.gov.scot/publications/health-clearance-tuberculosis-hepatitis-b-hepatitis-c-hiv-new-healthcare-workers-direct-clinical-contact-patient/pages/1/>

Public health England (July 2019) Integrated guidance on health clearance of healthcare workers and the management of healthcare workers living with bloodborne viruses (hepatitis B, hepatitis C and HIV)

<https://assets.publishing.service.gov.uk/media/6627a9b0d29479e036a7e622/integrated-guidance-for-management-of-BBV-in-HCW-April-2024-update.pdf>

Appendix 1

Managing and advising staff with symptoms of Unexplained Diarrhoea and / or Vomiting

Standard Operating Procedure

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Reporting staff symptoms	<ul style="list-style-type: none"> • If a staff member develops/reports unexplained diarrhoea and/or vomiting whilst at work they should be sent home from work. • If 2 or more staff develop/report unexplained diarrhoea and/or vomiting inform the following: <ul style="list-style-type: none"> ➢ Senior Charge Nurse/Nurse in charge/Consultant for medical staff. ➢ NHS Lanarkshire Occupational Health Team and IPCT should be informed for advice on return to work etc. ➢ Infection Prevention & Control should be contacted for advice on risk of infection to patients and decontamination of equipment/environment.
Standard Infection Prevention and Control Precautions (SICPs)	<ul style="list-style-type: none"> • Hand Hygiene compliance amongst staff should be reinforced – soap and water for Hand Hygiene should be advised after using toilet facilities or symptomatic of D+V. • PPE compliance should be reinforced.
Decontamination of surrounding area/toilet	<ul style="list-style-type: none"> • If a staff member has been symptomatic at work identify where they had symptoms. Ensure this area has been cleaned and disinfected of any body fluid by using Disinfectant wipes/ chlorine releasing agent. • If the staff member was symptomatic in the staff toilet ensure that all surfaces of the toilet including dispensers etc are disinfected. They can then be cleaned by the Domestic staff.
Staff tea room/rest room	<p>Check compliance with Food hygiene standards and that these have been applied to minimise cross transmission:</p> <ul style="list-style-type: none"> • Hands must be washed prior to entering the staff tea/rest room. • Fridge should be clean and not over stocked. • Temperatures of all fridges recorded at least daily. • Action taken when fridge above recommended temperature. • All work tops should be kept clean and clear. • No food should be left on surfaces. • Buffet type food should not be left out for longer than 3 hours before discarding. • Room should be maintained in a clean and clutter free state • Any infestations reported and actioned promptly. • If windows in food prep area opened then should be should be protected by a mesh screen.

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Specimens	<ul style="list-style-type: none"> Specimens are not routinely required for staff as most episodes of D&V are self-limiting after a few days; however, if symptoms persist staff should seek advice from OHS and/or their GP. <p>Staff Screening Staff screening is not undertaken lightly and would be undertaken by Salus at the request of an Incident Management Team (IMT) in charge of the management of a significant incident or outbreak of infection within a healthcare setting (including D&V) and they would decide whether staff screening is necessary to identify potentially pathogenic microorganisms or symptomatic infection among staff groups. This is a key element of the Incident Management Team’s risk assessment, and may be one of the priority actions required to manage an incident or outbreak in order to protect the health and safety of patients, staff and visitors. Please see policy - “Staff screening during incidents & Outbreaks” - https://www.nhslanarkshire.scot.nhs.uk/download/staff-screening-during-incidents-and-outbreaks-policy/</p>
Staff returning to work	Staff should remain off work until 48 hours following their last symptom of vomiting and/or diarrhoea.

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Author:	NHS Lanarkshire Occupational Health Team
Responsible Lead Executive Director:	Clinical Director Salus
Endorsing Body:	Infection Control Committee (ICC)
Governance or Assurance Committee	NHS Lanarkshire Healthcare Governance Committee
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Responsible Person:	Lead Nurse Occupational Health

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CONSULTATION AND DISTRIBUTION RECORD	
Contributing Author / Authors	<ul style="list-style-type: none"> • NHS Lanarkshire Occupational Health Team • Nurse Advisors • Governance Review Group (GRG) • Infection Prevention and Control Team
Consultation Process / Stakeholders:	<ul style="list-style-type: none"> • Occupational Health and Safety Team • All NHSL Healthcare Workers • GRG • Infection Control Committee
Distribution:	<ul style="list-style-type: none"> • Infection Prevention and Control – Firstport • NHS Lanarkshire external website • NHS Staff Brief

CHANGE RECORD			
Date	Author	Change	Version No.
18/09/2017	Occupational Health and Safety Nurse Advisor	Section reviewed and minor changes	V1.2
30/09/2017	GRG	Changed form a Policy to a guideline	V1.3
22/09/2021	GRG	Updated in line with the Vale of Leven requirements	V2
27/07/2023	GRG	Date extended by 1 year in line with NHSL guidelines, policies and SOPs	V2.1
11/09/2024	GRG	Updated in line with NHSL guidance	V3

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