**Information for employers of healthcare workers who perform exposure prone procedures**

The new *Australian national guidelines for the management of healthcare workers living with blood borne viruses and healthcare workers who perform exposure prone procedures at risk of exposure to blood borne viruses* (the Guidelines) have been updated and reflect the effectiveness of antiviral treatment for the following blood borne viruses – hepatitis B virus (HBV), hepatitis C virus (HCV) and human immunodeficiency virus (HIV). The Guidelines allow healthcare workers living with a blood borne virus (BBV) to be eligible to perform exposure prone procedures (EPPs), provided they comply with the Guidelines.

The Guidelines also support timely testing and treatment of healthcare workers. All healthcare workers who are performing EPPs are required to take reasonable steps to know their BBV status and should be tested for BBVs at least once every three years and are required to have appropriate and timely testing after potential BBV exposures, both occupational and non-occupational.

Why do we have the Guidelines?

There is a very low risk of transmission from a healthcare worker with a BBV to a patient during the performance of EPPs, even with best practice infection prevention and control. Due to the nature of EPPs, healthcare workers who perform these procedures are at a higher risk of acquiring a BBV from a patient and, rarely, also of transmitting a BBV to a patient. The purpose of the Guidelines is to mitigate the risk of transmission of a BBV from a healthcare worker to a patient.

The Guidelines have been updated to reflect current medical evidence around the effectiveness of antiviral treatment for hepatitis B, hepatitis C and HIV. Worldwide, since widespread availability of antiviral medication, there has not been a published case of transmission of a BBV from an effectively treated healthcare worker to a patient.

A broad range of health professional groups were consulted and provided feedback during the development of the Guidelines.

What are exposure prone procedures (EPPs)?

EPPs are procedures where there is a risk of injury to the healthcare worker resulting in exposure of the patient’s open tissues to the blood of the healthcare worker.

These procedures include those where the healthcare worker’s hands, even when gloved, may be in contact with sharp instruments, needle tips or sharp tissues (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.

Non-exposure prone procedures are procedures where the hands and fingers of the healthcare worker are visible and outside of the body at all times and procedures or internal examinations that do not involve possible injury to the healthcare worker’s hands by sharp instruments and/or tissues, provided routine infection prevention and control procedures are followed.

More information on which procedures are exposure prone can be found in the [*Guidance on classification of exposure prone and non-exposure prone procedures in Australia 2017*](http://www.health.gov.au/internet/main/publishing.nsf/content/cda-cdna-bloodborne.htm)*.*

The relevant specialist colleges for each profession can provide further advice and guidance on which procedures in each particular specialty constitute EPPs.

When will the Guidelines apply?

The updated Guidelines apply now. Health practitioner Boards who register practitioners who may perform EPPs are developing their own guidelines to support implementation of these Guidelines.

What are the responsibilities under the Guidelines of employers of healthcare workers who perform EPPs?

The Guidelines do not prescribe additional responsibilities on employers of healthcare workers or students living with a BBV. The Guidelines support employers to understand the:

* public health requirements for all healthcare workers who perform EPPs and
* criteria for healthcare workers who were previously excluded from performing EPPs to perform EPPs again.

It is recommended that employers ensure that all employees who perform EPPs are made aware of the Guidelines.

When deciding how to apply the Guidelines, employers of healthcare workers must consider the relevant public health, antidiscrimination, privacy, industrial relations and equal employment opportunity legislation in their jurisdiction.

What will healthcare workers who perform EPPs have to do to comply with the Guidelines?

Healthcare workers who perform EPPs must take reasonable steps to know their BBV status and should be tested for BBVs at least once every three years. They are also expected to:

* have appropriate and timely testing and follow up care after a potential occupational exposure associated with a risk of BBV acquisition
* have appropriate testing and follow up care after potential non–occupational exposure, with testing frequency related to risk factors for virus acquisition
* cease performing all EPPs if diagnosed with a BBV until the criteria in the Guidelines are met
* confirm that they comply with these Guidelines when applying for renewal of registration if requested by their Board

Additional details can be found in the [Guidelines](http://www.health.gov.au/internet/main/publishing.nsf/content/cda-cdna-bloodborne.htm).

What will healthcare workers living with BBV who perform EPPs have to do to comply with the Guidelines?

Healthcare workers living with a BBV who are performing EPPs are expected to:

* be under the ongoing care of a treating doctor with relevant expertise
* be compliant with prescribed treatment
* have ongoing viral load monitoring at the appointed times
* not perform EPPs if particular viral load or viral clearance criteria are not met (see detailed information in the Guidelines according to the specific BBV)
* seek advice regarding any change in health condition that may affect their fitness to practice or impair their health
* release monitoring information to their treating doctor
* if required, release de-identified information to the relevant area of their jurisdictional health department/Expert Advisory Committee
* if required, release health monitoring information to a designated person in their workplace in the event of a potential exposure incident to assess the requirement for further public health action

Additional details can be found in the [Guidelines](http://www.health.gov.au/internet/main/publishing.nsf/content/cda-cdna-bloodborne.htm).

How do healthcare workers living with a BBV become eligible to perform EPPs?

Healthcare workers who are currently restricted, or become restricted from performing EPPs, can become eligible to perform EPPs provided they meet the criteria outlined in the Guidelines and obtain initial clearance from their treating doctor who has the relevant expertise.

Healthcare workers will also need to meet relevant requirements for registration of their specialist medical college, including recency of practice and compliance with any restrictions to practice that are in place. ([AHPRA](http://www.ahpra.gov.au))

Retraining and supervision for healthcare workers returning to EPPs after a break from performing these procedures may be considered on a case by case basis as recommended by their specialist college.

Can employers ask for evidence of BBV status or initial clearance?

Healthcare workers have the same right to access confidential testing, counselling and treatment as the general population.

Employers of healthcare workers must consider the relevant public health, antidiscrimination, privacy, industrial relations and equal employment opportunity legislation in their jurisdiction.

Depending upon the jurisdiction and/or employment arrangements, employers may need to request evidence of viral clearance from the treating doctor.

The protection of public health may require that health monitoring information (including viral load and relevant clinical information) may need to be released to a designated person in the workplace in the event of a potential exposure incident to assess the requirement for further public health action.

What if a patient is potentially exposed to a BBV?

If an occupational exposure occurs where a patient is accidentally exposed to the blood of a healthcare worker known to be living with a BBV, the incident should be reported to the appropriate person according to local protocols.

Exposures may also occur where the BBV status of the healthcare worker is unknown or not recently assessed. These exposures should also be evaluated using existing local protocols, which may include urgent testing of the healthcare worker.

The relevant person should evaluate the significance of the exposure and determine the follow-up required. In doing so, they may need to consult with local public health authorities. Health monitoring information (including viral load and relevant clinical information) may need to be released to a designated person in the workplace to assess the requirement for further public health action.

Why is regular BBV testing important?

BBV infections can be asymptomatic or only cause minor symptoms, so it is possible to be unknowingly infected for extended periods. Delay in diagnosis can lead to the development of health complications in the healthcare worker, and increase the risk of transmission to family, other close contacts, and patients.

Regular testing and early diagnosis of a BBV allows appropriate timely management and support, enables prompt treatment, reduces the risk of complications due to disease progression, and reduces the risk of transmission.

It was recognised that excluding healthcare workers living with a BBV from performing EPPs was not justified based on the risk of transmission and could act as a deterrent to appropriate and timely testing and treatment. In combination with new treatments for BBVs, the new Guidelines offer a pathway to return to work performing EPPs which mitigates the already very low risk to patients.

What happens if a healthcare worker does not comply with these Guidelines?

A healthcare worker performing EPPs who does not comply with the guidelines should be notified to AHPRA and the relevant board.

Under public health legislation, in order to protect the public, a healthcare worker who is not in compliance with the Guidelines can be notified to the relevant area of jurisdictional health department.

Are healthcare students covered under the Guidelines?

Healthcare students who perform EPPs are required to comply with the Guidelines. For more information see [healthcare student information sheet](http://www.health.gov.au/internet/main/publishing.nsf/content/cda-cdna-bloodborne.htm).

Where can I get more information?

Additional information can be found in the [Guidelines and other supporting material](http://www.health.gov.au/internet/main/publishing.nsf/content/cda-cdna-bloodborne.htm).

Support and advice to healthcare workers living with a BBV is available from their relevant specialist college.

Jurisdictions are able to provide advice regarding relevant local regulations or legislation.