

# WELSH HEALTH CIRCULAR



Llywodraeth Cymru  
Welsh Government

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**CATEGORY: PUBLIC HEALTH**

**Title: UPDATE OF GUIDANCE ON CLEARANCE AND MANAGEMENT OF HEALTHCARE WORKERS LIVING WITH A BLOODBORNE VIRUS (BBV)**

**Date of Expiry / Review N/A**

**For Action by:**

Chief Executives – Health Boards and NHS Trusts

**For information:** Independent Healthcare providers

Distribution list at Annex 1

**Action required by:** Immediately

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Professor Jean White CBE, Chief Nursing Officer  
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**Enclosure(s):** Annex 1 – Distribution List

Dear Colleagues

## **UPDATE OF GUIDANCE ON CLEARANCE AND MANAGEMENT OF HEALTHCARE WORKERS LIVING WITH A BLOODBORNE VIRUS (BBV)**

Further to [WHC/2017/045](#) issued in November 2017, we are writing to inform you that the guidance on the clearance and management of healthcare workers (HCWs) living with a BBV, has been updated. The changes are summarised below and the updated guidance can be accessed here:

<https://www.gov.uk/government/publications/bbvs-in-healthcare-workers-health-clearance-and-management>

### **Changes to recommendations regarding healthcare workers (HCWs) living with Hepatitis B (HBV)**

The guidance on restrictions of HCWs living with HBV to perform exposure-prone procedures (EPPs) has been updated. Previous guidance restricted the practice of HCWs living with HBV if they were e-Antigen (HBeAg) positive and/or they had a pre-treatment viral load of >20,000 IU/mL ( $10^5$  gEq/ml). These restrictions have now been removed provided HCWs meet the criteria for clearance and comply with monitoring by an Occupational Health Service, as described in the updated guidance published by the UK Advisory Panel for Healthcare Workers Infected with Blood-borne Viruses (UKAP). This change is due to the lower risk of virus transmission with new effective treatments which are now available for HBV.

In addition, these HCWs living with HBV who wish to perform EPPs need to be registered on a confidential national register, the UKAP-OHR (*UK Advisory Panel for Healthcare Workers Infected with Blood-borne Viruses – Occupational Health Monitoring Register for BBV Infected HCWs*). The UKAP-OHR will be managed by Public Health England (PHE). Further information about how to register HCWs onto the UKAP-OHR can be found [here](#).

### **Changes to recommendations regarding 'lookback' / patient notification exercises**

Previous guidance recommended a series of investigations following the diagnosis of a BBV (i.e. HIV, HBV and Hepatitis C (HCV)) in a HCW who had undertaken EPPs; these included i) lookback initiatives to identify procedures undertaken by the HCW, ii) the cross-matching of resultant records with databases holding records of people diagnosed with BBVs to determine if any procedures had led to a subsequent diagnosis of a BBV and, where appropriate, iii) patient notification exercises involving the provision of information and the offer of BBV screening to those patients deemed at risk.

A review by UKAP found that, in instances where an HCW was identified as BBV infected but there was no initial evidence of HCW to patient transmission, patient notification exercises never identified any such transmissions; furthermore, such investigations are resource-intensive and patient notification often causes anxiety among those contacted. As a result of this review, the criteria for undertaking a detailed public health investigation and patient notification have been revised and these will now only be undertaken in circumstances where it is known (or suspected) that a patient has acquired infection from a HCW or where there is concern about the practice of the HCW which could have led to increased risk of exposure.

The changes described above are important in ensuring that the management of HCWs living with BBVs is proportionate, reflects the changing treatment options now available and our understanding of the long-term aspects of living with these infections, and at the same time ensures that patient safety is not compromised.

We hope that the removal of restrictions on EPP practice and the recommendation that patient notification / lookback exercises are only undertaken in exceptional circumstances will reassure HCWs and mean that they feel confident to seek advice and testing for BBVs, if they are concerned about exposures either in the workplace or in other settings.

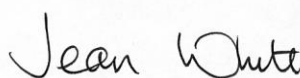
We would also like to take this opportunity to remind everyone of the very considerable benefits of identifying and then treating a BBV. Treatments for HBV (if required) and HIV are generally safe, easy to take and highly effective in suppressing virus. For HCV, a short course of treatment is safe, easy to take and, for almost everyone, curative.

Further information about the contents of this letter can be obtained [here](#), or by contacting UKAP ([Ukap@phe.gov.uk](mailto:Ukap@phe.gov.uk))

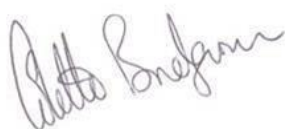
Yours sincerely



**Dr Frank Atherton**  
Chief Medical Officer/Medical  
Director NHS Wales



**Professor Jean White CBE**  
Chief Nursing Officer/Nurse  
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**Dr Colette Bridgman**  
Chief Dental Officer

## Annex 1

### Circular Distribution list

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Committee Secretary	WHSSC
Interim Ambulance Services Commissioner	EASC
Chair	EASC
Committee Secretary	EASC
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