Infectious diseases

West Yorkshire Police has established procedures to reduce the risk of an officer or member of staff contracting an infectious disease should they become exposed to another person’s blood or body fluid during the course of their work.

The aims of the policy are to explain:
• how to minimise the risk of infection;
• what course of action you should take if exposed to blood or other bodily fluids; and
• what protective equipment is available when dealing with an incident.

This policy applies to all officers and staff who may come into contact with blood and/or other body fluids while carrying out their duties.

Primarily, it is concerned with incidents of significant exposure, where there is potential to transmit the following blood-borne virus infections:
• Hepatitis B;
• Hepatitis C; and
• AIDS/HIV;

It addresses the prevention, transmission, management and treatment of exposures.

The policy also provides information in relation to:
• Hepatitis A;
• Tetanus;
• Tuberculosis;
• Scabies, lice and fleas;
• Weil’s disease; and
• Diseases transmitted by animals.

This document is based on up-to-date guidance from the Department of Health, ‘The Green Book’.

It is also compliant with the following legislation:
• Health and Safety at Work Act 1974;
• Control of Substances Hazardous to Health (COSHH) Regulations 2002
• Management of Health and Safety at Work Regulations 1999; and
• Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR)
Further advice

If you need help after a contamination incident, or require advice or assistance not contained in these guidelines, contact Occupational Health Unit on ext. 27627 or 01924 208127.

Chapter 1 Principles

All staff

Every employee of West Yorkshire Police must:
• comply with this policy procedure;
• adhere to safe systems of work;
• keep up-to-date with appropriate training;
• wear protective equipment as required, for example, latex, powder free or blue Nitrile gloves;
• be aware of their Hepatitis B immunisation status and maintain a safe level of immunity. This can be done via the Occupational Health Unit;
• if a contamination incident occurs, instigate first aid as appropriate (refer to the contamination process); and
• report any incidents immediately to their line manager, who will contact the Force’s healthcare provider.

Chapter 2 Diseases and immunisation

Hepatitis A

Hepatitis A is found in water contaminated by sewage or effluent. The symptoms are flu-like and therefore many people will have had the virus without being aware of it. Once infected, your body becomes immune. It is not an illness associated with severe long-term ill-health.

Hepatitis B

The methods of transmitting the Hepatitis B virus are basically the same as those for AIDS/HIV. However, Hepatitis B is much more infectious than HIV and, unlike HIV, has been found in virtually all body secretions and excretions of significant quantities.

Vaccination is an effective method of preventing Hepatitis B. In cases where a person has not been vaccinated, effective treatment can be given, if administered within 72 hours.

All staff at high risk of coming into contact with blood or body fluids are advised to seek immunisation.

You can obtain the Hepatitis B vaccination via Occupational Health Unit. To arrange an appointment, telephone extension 27627 or 01924 208127.

Two to three months after a course of Hepatitis B, you should have your immunity level checked.
**Hepatitis C**

Hepatitis C is a known risk in the intravenous drug using community. Currently, there is no vaccine available for Hepatitis C, for post-exposure to Hepatitis C contamination, a series of blood tests are available.

**AIDS/HIV**

AIDS is caused by a virus called HIV - the Human Immunodeficiency Virus. AIDS stands for the Acquired Immune Deficiency Syndrome.

The main ways in which people get HIV are:
- unprotected sexual intercourse, either vaginal or anal, with an infected person;
- inoculation of infected blood, mainly by sharing drug injecting equipment; or
- by an infected mother passing the virus to her baby during pregnancy, childbirth or breast feeding.

There is currently no vaccination to the HIV virus. However, it is possible to have post-exposure treatment, which is a course of medication taken orally for 28 days following contamination or until HIV is ruled out in the source.

**Tetanus**

All staff are advised to see their own GP or practice nurse to keep their tetanus immunisation at a satisfactory level.

**Tuberculosis**

If you have any issues regarding Tuberculosis, contact OHU for advice.

**Weil's disease**

Leptospirosis (Weil's disease) can be contracted from two main sources, namely:
- cattle by urine or foetal fluids; and
- rats or rat urine.

All water such as sewers, ditches, ponds, canals and slow moving rivers or animal foodstuffs on farms are a potential source of the disease. Care should also be taken when searching derelict buildings because of the presence of rats and their urine. After contact, bacteria can enter the body through:
- cuts;
- scratches; or
- through the lining of the mouth, throat and eyes.

If you have been involved in a rescue in water where you may have swallowed water or have open cuts, you should contact Occupational Health Unit immediately for advice. While the disease is rarely fatal, early treatment will prevent the more serious effects.
<table>
<thead>
<tr>
<th>Admin</th>
<th>Last reviewed:</th>
<th>September 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Scheduled for review:</td>
<td>September 2016</td>
</tr>
</tbody>
</table>