Information leaflet for employees of the HSE West regarding Occupational Blood Exposure (OBE)

This leaflet provides general information for HSE West employees regarding an Occupational Blood Exposure-OBE (Needlestick/Sharps injury,splash, scratch or bite)

Q: What is an Occupational Blood Exposure (OBE)?

- An OBE is where an employee has been exposed to blood either via a needle stick/sharp instrument breaking their skin or a blood splash to their eye or mouth in the course of their work.
- The HSE has an updated policy since June 2008 called 'Standard Operating Procedure for Needlestick Injuries and other Exposure Incidents' in place for the management of OBE's in HSE West (Limerick, Clare & N.Tipp)

Q: How can I prevent an OBE?

- Think about disposal before you use sharps
- Prepare equipment-NB sharps container near you for sharps-you use it you must bin it!
- Dispose into sharps container immediately after use
- Don't overfill sharps containers
- Ensure adequate sharps containers,
- Don't re-sheath used sharps
- Discard syringe & needle as single unit
- Gloves should be widely available and used

- Use PPE provided eg Eye Protection ,masks
- Use Needleless Systems (Safety devices)if available in your area
- Hepatitis B Vaccination-All New staff should attend the Occupational Health Dept for their Hep B status to be assessed if possible within 2 weeks of commencing employment.

Q: What should I do if I have a Needlestick Injury or a exposure Incident (Sharps Injury/Body Fluid Splash/Human Bite/Scratch)

- Immediately attend to First Aid
- Wash and bleed wound under running water
- Splashes to eyes and mouth should be washed with copious amounts of water
- Inform Head of Department /manager/Supervisor who should advise on the policy
- Manager should record accurately in the Incident Reporting Form (Stars web) the incident as described by the injured worker.
- The manager and the recipient of an injury should complete part 1 of the NSI management form
- The report should be submitted to the Risk Management Department in accordance with HSE West, Limerick, Clare & North Tipperary, Incident Reporting Procedures.
- The employee must attend the Emergency Department for assessment as soon as possible -preferably within one (1) hour. Emergency Department are

- based in MWRH Limerick, Clare & N. Tipp.
- Inform Occupational Health Department by phone 061482179 Mon-Friday and leave voice message if department closed.

Q: What if the source patient is identifiable?

If the source patient is identifiable.

The manager should as per policy June 2008

- Arrange for the staff member to attend the Emergency Department
- Report Incident on the Incident Report Form (Action Sheet 2).
- Complete N.S.I. / Other Exposure Injury Management Form - (Part 1 - Appendix 5)
- Investigate the cause and take action to prevent a recurrence.
- Locate source patient if possible use resource pack for doctor responsible for source patient (Appendix 6).
- Arrange for duty SHO / Registrar to carry out a risk assessment and to seek source patient's consent to have blood tested for HBV, HCV and HIV (Action Sheet 3 & 4).
- Arrange for immediate transport of the sample to the laboratory.
- Ensure completion of Part 1 and 2 of N.S.I. /
 Other Exposure Injury mgt Form and give it
 to the injured staff member to take to the
 Emergency Department (Part 2 Appendix 5).
- The OHD will inform you of the results of the source patients bloods and risk assessment, when available.

Q: What if the source is not identifiable?

If the source is not identifiable

 If the source is not identifiable you will need to have 3 follow up blood tests: six weeks, 3 months and 6 months after the injury.

- These blood samples are coded to ensure your confidentiality
- You will be advised by the Emergency Dept/OHD about appropriate lifestyle precautions which may need to be taken during this time.

General Information

Risk of Blood Borne Virus Transmission

- The important blood borne Virus (BBV) are HIV. Hepatitis B. Hepatitis C
- Significant exposures are:
 - ▶ Body fluid splash into eye or mouth
- ▶ Bites with breach of skin
 - ► Body fluid splash onto non-intact skin (e.g. wound <24 hours old)
 - ► Needlestick injury that drew blood where there was body fluid on the sharp
- Note: Urine, vomit, saliva or faeces are low risk body fluids. Unless blood stained, they do not constitute a significant exposure.
- Risk of transmission is directly related to the concentration of the virus (viral Load) in the blood of the source patient at the time of exposure

Q: What is the risk of transmission of a blood borne virus from a NSI to a Healthcare Worker?

Risk of transmission of a BBV to a Healthcare Worker (HCW) from an infected patient following a single open bore needle-stick injury is:

30%: if source is Hepatitis B positive if HCW non immune to Hepatitis B

(1 in 3)

3%: if source is Hepatitis C positive

(1 in 30)

0.3%: if source is HIV positive

(1 in 300)

Recommendations

- To avoid confusion listen to the facts the OHD and ED dept give you.
- If you do not understand or have ANY doubts or queries please contact the OHD 061482179

Look after yourself , this can be a difficult and stressful time

Q: If I need further support who do I contact?

- If you feel would like to access the staff counselling service the OHD can arrange this for you. (061 48 - 2179).
- Q What happens if I do not attend my follow up appointments with Occupational Health Department following an occupational blood exposure?

The Occupational Health Department cannot accept responsibility if you do not attend your follow up appointments. It is **your responsibility** as it is related to your health



Feidhmeannacht na Seirbhíse Sláinte Health Service Executive

Occupational Health Department (OHD)

HSE West

(Limerick, Clare & Tipperary North)



Information leaflet for <u>Employees</u>
of the HSE West regarding an
Occupational blood exposure
(OBE)

Needlestick/Sharps injury or splash or bite