**Health Care Worker (HCW) Hepatitis B Non-Immunity Awareness Declaration**

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| **Surname:** | |  | | | **First Name:** |  | | |
| **DOB:** | | | |  | **Employee no.:** | |  | |
| **Position:** |  | | | | **Area currently worked:** | | |  |
| **SA Health Service:** | | |  | |  | | |  |
| **Email:** | | |  | | **Contact no.:** | | |  |

To maintain the safety and wellbeing of our workforce, it is important SA Health Clinical Worker Health Teams (or equivalent) assess, screen and vaccinate HCWs against specified vaccine preventable diseases (VPDs) as outlined in SA Health’s[*‘Addressing vaccine preventable disease: Occupational assessment, screening, and vaccination’*](https://www.sahealth.sa.gov.au/wps/wcm/connect/Public+Content/SA+Health+Internet/Clinical+Resources/Clinical+Programs+and+Practice+Guidelines/Immunisation+for+health+professionals/Health+care+worker+immunisation+and+screening+requirements)Policy (2022). The intent is to minimise the risk of transmission of these infections.

**Applicant Declaration**

* I agree to participate in the SA Health Hepatitis B immunisation screening program as directed by the SA Health *[‘Addressing vaccine preventable disease: Occupational assessment, screening, and vaccination’](https://www.sahealth.sa.gov.au/wps/wcm/connect/Public+Content/SA+Health+Internet/Clinical+Resources/Clinical+Programs+and+Practice+Guidelines/Immunisation+for+health+professionals/Health+care+worker+immunisation+and+screening+requirements)* Policy 2022.
* I acknowledge that SA Health Clinical Worker Health teams (or equivalent) are required to implement immunisation screening to minimise the risk of transmission of vaccine preventable diseases to protect HCWs, other employees, patients, clients and visitors.
* I am aware that I am non-immune to Hepatitis B.
* I have read and understood the attached ‘SA Health Clinical Worker Health Service - Hepatitis B - post exposure prophylaxis (PEP) Information Sheet’ (page 2).
* If I am exposed to the Hepatitis B virus, I am aware SA Health recommends I have Hepatitis B immunoglobulin within 72 hours, though it is most effective if given as early as possible.
* I agree to follow standard precautions to reduce my risk of injury and potential exposure to blood borne viruses such as Hepatitis B, Hepatitis C and HIV. This includes:
  + Hand Hygiene – Performing the 5 moments of hand hygiene before and after every patient contact.
  + The use of Personal Protective Equipment (PPE) – selecting the most appropriate PPE based on the probability of exposure to blood and body fluids.
  + Safe sharps management - The safe use and disposal of sharps, immediately disposing of used sharps into a point-of-use sharps container, not recapping used sharps, or passing used sharps from hand to hand.
  + Skin Care – Ensuring any open wounds below my elbows are covered with a waterproof occlusive dressing to ensure my skin integrity is maintained

**Health Care Worker’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_**

*(Please return completed form to the relevant SA Health Clinical Worker Health Team (or equivalent))*

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| **For more information:**  **Specialist Services**  **Communicable Disease Control Branch**  **Level 3, 11 Hindmarsh Square ADELAIDE SA 5000Telephone: 1300 232 272 www.sahealth.sa.gov.au**  **© Department of Health and Wellbeing, Government of South Australia. All rights reserved.** |  |
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Clinical Worker Health Services Information Sheet

Hepatitis B - post exposure prophylaxis (PEP)

[Hepatitis B](https://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/conditions/infectious+diseases/hepatitis/hepatitis+b+-+including+symptoms+treatment+and+prevention) is spread when infectious body fluids (blood, saliva, semen, and vaginal fluid) come into contact with body tissues beneath the skin (for example, through needle puncture or broken skin) or mucous membranes (the thin moist lining of many parts of the body such as the nose, mouth, throat and genitals).

**Post exposure prophylaxis (treatment to prevent disease)**

After possible exposure to the Hepatitis B virus, Hepatitis B post-exposure prophylaxis (PEP) can be used to decrease the chance of getting Hepatitis B.

Hepatitis B PEP consists of:

* a single injection of [Hepatitis B immunoglobulin](https://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/clinical+resources/clinical+programs+and+practice+guidelines/infectious+disease+control/hepatitis+b+exposure+pep/hepatitis+b+exposure+post+exposure+prophylaxis+pep#Stocks%20of%20hepatitis%20B%20immunoglobulin)  (a solution containing human antibodies that is made from blood products); plus
* three injections of [Hepatitis B vaccine](https://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/conditions/immunisation/vaccines/hepatitis+b+vaccine/hepatitis+b+vaccine) spread over several months.

**Hepatitis B PEP must be given within 72 hours, though it is most effective if given as early as possible.**

Hepatitis B immunoglobulin is a solution made from blood products containing a high level of antibodies specific to the Hepatitis B virus. It is offered after needle stick injuries unless the source is known to be negative for Hepatitis B. Hepatitis B PEP does not reduce the risk of infection with other blood borne viruses such as Hepatitis C or HIV. It is available from hospital emergency departments.

If Hepatitis B PEP is provided in a public hospital emergency department, after the first attendance you will be referred to your GP or other HCW for counselling, follow-up, and ongoing care.

**Window period -** After infection with Hepatitis B, it may take some time for the infection to be detected in blood tests. This is called the window period, which can be up to 6 months. However, Hepatitis B PEP is only likely to be effective if given within 72 hours.

**Exposure at work** – Follow relevant LHN/SSAS BBFE management guidelines if you may have been exposed to Hepatitis B at work. Remember to complete a safety learning system (SLS) notification to ensure timely and correct follow up post your BBFE incident through the relevant SA Health service Clinical Worker Health Team (or equivalent).

**Post exposure precautions:**

* exclusion from work is not necessary however always use standard precautions
* any open sores, cuts or abrasions should be covered with waterproof dressings
* practice safe sex.

**Resources:**

* SA Health has numerous Hepatitis B clinical resource webpages:
  + [Hep B exposure – PEP](https://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/clinical+resources/clinical+programs+and+practice+guidelines/infectious+disease+control/hepatitis+b+exposure+pep/hepatitis+b+exposure+post+exposure+prophylaxis+pep#Stocks%20of%20hepatitis%20B%20immunoglobulin) + [Hepatitis B - including symptoms, treatment and prevention](https://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/conditions/infectious+diseases/hepatitis/hepatitis+b+-+including+symptoms+treatment+and+prevention)
* [Hepatitis SA](https://hepsa.asn.au/)  - contact them t: 1800437 222 or [chat online](https://hepsa.asn.au/)
* Local GP and Health Care Provider