

## CONTAMINATION INCIDENT POLICY

### Purpose and Context

The objectives of this policy are to

- (a) Set out the procedures in place for the management of contamination incidents amongst staff and students of the University of Huddersfield.
- (b) To ensure that the exposure to hazardous substances is prevented or adequately controlled as far as reasonably practical. The University of Huddersfield acknowledges its responsibilities under the Health and Safety at Work etc. Act (1974) and the Control of Substances Hazardous to Health (2002) (COSHH).
- (c) To ensure all staff and students understand their role, responsibilities and actions required to comply with this policy. Students working outside of the University (on placement) must also comply with local policies and procedures in host organisations (NHS or Private) that they are allocated to.

### Scope

To ensure all staff and students understand their role, responsibilities and actions required to comply with this policy.

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### Introduction

1.1 Key legislation and best practice guidelines relating to contamination injuries that specifically identify assessment of contamination incidents are:

- (a) Control of Substances Hazardous to Health (2002)
- (b) Health and Safety at Work etc. Act (1974)
- (c) PHE Report: Eye of the Needle: United Kingdom surveillance of significant occupational exposures to bloodborne viruses in healthcare workers (2014)
- (d) Uk Health Security Agency Guidance: The Green Book: Immunisation against infectious disease 2025) [Immunisation against infectious disease - GOV.UK](https://www.gov.uk/government/guidance/immunisation-against-infectious-disease)

1.2 Definitions

- (a) Blood Borne Virus (BBV): BBV's are viruses that some people carry in their blood and can be spread to another person. For the purposes of this policy the 3 BBV's that are of concern are Hepatitis B, Hepatitis C and Human Immunodeficiency Virus (HIV).

- (b) Percutaneous Incident: skin penetrating wounds caused by sharps objects such as needles, surgical instruments or glass.
- (c) Mucocutaneous Incident: when blood or other body fluids splash in to the eyes, nose, oral cavity or onto broken skin.
- (d) Contamination Incident: an injury involving needles/clinical instruments, bites, scratches, and splashes of body fluids to the eyes, nose, oral cavity or broken skin.

### 1.3 Responsibilities

#### 1.3.1 Deans of Schools and Directors and Heads of Professional Services

- (a) Deans of Schools, Directors and Heads of Professional Services have overall responsibility for ensuring local arrangements are in place for First Aid, including up-to-date contact details are displayed on signs in all teaching and communal areas.
- (b) Contamination incidents that have occurred on University premises should be reported to the University of Huddersfield Occupational Health Department immediately who will take responsibility for appropriate assessment and recommend the type of follow up required. This may involve the individual being advised to attend the nearest accident and emergency department as a matter of urgency.
- (c) Any student on placement should report the injury following their placement providers' local arrangements and attend the Occupational Health service onsite at their placement. The student or placement provider Occupational Health service should inform the University of Huddersfield Occupational Health Department of the incident.
- (d) If there is no Occupational Health service available at the placement area the student must contact the Occupational Health Department at the University of Huddersfield and the student or staff member should also attend accident and emergency for assessment and treatment as a matter of urgency.
- (e) For students out on placement it is their responsibility to contact the Occupational Health Department at the University of Huddersfield to inform them of the contamination incident.
- (f) Any student or staff member who sustains a contamination incident, either on University premises or whilst out on placement, should also complete the online health and safety incident reporting system [Incident reporting - University of Huddersfield](#).

#### 1.3.2 Managers with distinct areas of responsibility are responsible for ensuring:

- (a) An assessment of first aid needs has been carried out in their work areas or student's placement areas.
- (b) As part of the risk assessment process workplace hazards and exposures should be considered when deciding on what first aid facilities, personnel and equipment should initially be available after a contamination incident occurs. There are sufficient numbers of first aiders in or around their work area
- (c) Both employees and students are aware of what they should do if they sustain a contamination incident.
- (d) Ensuring both employees and students know how to initially report any incidents to Occupational Health whilst on placement and to the University of

Huddersfield Occupational Health Department. They should also be made aware that they need to complete the Health and Safety incident reporting system, [Incident reporting - University of Huddersfield](#) regardless of whether the injury was on University premises or whilst out on placement.

#### 1.3.3 The University of Huddersfield Occupational Health Department.

The Occupational Health department is responsible for:

- (a) Responding to all contamination incidents reported to them during normal hours (9am-4pm Monday to Friday) and completing the Inoculation/Contamination Incident form at the time of report.
- (b) Completing an initial assessment of the incident if it occurs on the University of Huddersfield premises within normal working hours.

#### 1.3.4 Staff and student responsibilities

- (a) If the contamination incident occurs whilst the student is on placement the student must report the incident to the placement area Occupational Health service immediately. The placement Occupational Health service will initially assess and treat the student in accordance with national guidelines. The placement Occupational Health service should inform the University of Huddersfield Occupational Health Department by completing Appendix A and emailing to; [occupational.health@hud.ac.uk](mailto:occupational.health@hud.ac.uk)
- (b) The student who sustained the contamination injury must also contact the University of Huddersfield Occupational Health department to inform them of the incident. The student should also report the incident to Health and Safety using the incident reporting system: [Incident reporting - University of Huddersfield](#)
- (c) Any staff member or student who sustains a contamination incident outside of normal Occupational Health (both University or Placement) working hours, either on University premises or on clinical placement, must attend accident and emergency immediately for assessment. It is the staff member or student's responsibility to report the incident to the placement Occupational Health service and the University of Huddersfield Occupational Health Department once the departments are open again.

#### 1.4 Blood Borne Viruses

- (a) For the purpose of this policy blood borne virus refers to three viruses, HIV, Hepatitis B and Hepatitis C.
- (b) Where a risk of exposure to Hepatitis B has been identified in the course of their work staff and students should be routinely offered Hepatitis B Vaccination. There is no current vaccination for HIV or Hepatitis C.

#### 1.5 Immediate Action Post Contamination Incident

##### 1.5.1 Percutaneous Incidents:

- (a) Encourage the wound to bleed (do not suck the wound)
- (b) Wash the wound with clean water (do not scrub)
- (c) Cover the wound with waterproof dressing

### 1.5.2 Mucocutaneous Incidents:

- (a) Wash the area thoroughly with clean running water
- (b) If the contaminant has entered the eyes access a decontamination irrigation kit and wash out the contaminant. If possible, seek the assistance of a colleague and follow the instructions on the kit. NEVER place your head/eyes under a tap of running water. This has the potential to damage the eyes.

### 1.6 Post Exposure Management

#### 1.6.1 Blood Borne Virus risk and exposure:

The risk of a BBV being transmitted depends on:

- (a) the viral load in the infected source patient
- (b) the depth of the injury
- (c) whether the procedure involved placing a needle in a patient's vein or artery

#### 1.6.2 Significant exposures

- (a) A significant exposure is a percutaneous or mucocutaneous exposure to blood or other body fluids from a source patient who is infected with:

HIV

hepatitis B surface antigen positive (HBsAg positive)

hepatitis C

- (d) Depending on the outcome of the initial assessment by occupational health and the risk level identified, the recipient may need to be seen at 6,12 and 24 weeks for post incident follow up blood testing in accordance with national guidelines. For students on placement this is offered by Occupational Health at the University of Huddersfield. For those staff and students who sustain the injury on University premises the University of Huddersfield Occupational Health department will follow this up accordingly once notified of the incident.

#### 1.6.4 Donor source blood results and follow up bloods

- (a) For those students out on placement who have a contamination injury, where possible bloods should be taken from the patient / donor source for BBV screening. If the donor source does have their bloods taken the placement area Occupational Health Department should notify the University of Huddersfield Occupational Health department once they have the donor source blood results. These results will determine the follow up required.

### References

1. Health & Safety executive, Health & safety at work act etc. HSE 1974
2. Health & Safety executive, The management of Health & Safety at work regulations HSE 1999

3. Health & Safety executive, Control of Substances Hazardous to Health regulations HSE 2002
4. Health & Safety executive, Reporting of Injuries, Diseases and Dangerous occurrences regulations, HSC 1995
5. [HIV: surveillance, data and management](#)
6. [UK guideline for the use of HIV post-exposure prophylaxis 2021](#), British HIV Association (BHIVA)
7. Hepatitis B [Hepatitis B: guidance data and analysis](#)
8. [Immunisation against infectious diseases: the green book](#) on vaccination against hepatitis B and immunisation of healthcare and laboratory staff.
9. Hepatitis C [Guidance on the investigation and management of occupational exposure to hepatitis C](#), Communicable Disease and Public Health (CDPH) 1999
10. Management of bloodborne viruses in healthcare workers
11. [UK Advisory Panel](#) for healthcare workers living with bloodborne viruses gives advice about the transmission and management of BBVs in healthcare workers and keeps a confidential register of infected workers.
12. The Green Book: Immunisation against infectious disease. Public Health England 2014

<b>POLICY SIGN-OFF AND OWNERSHIP DETAILS</b>	
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<b>Owner (if different from above):</b>	
<b>Document Location:</b>	<a href="https://www.hud.ac.uk/media/policydocuments/Contamination-Incident-Policy.pdf">https://www.hud.ac.uk/media/policydocuments/Contamination-Incident-Policy.pdf</a>
<b>Compliance Measures:</b>	Post-incident reviews
<b>Related Policies/Procedures:</b>	<p>University Health &amp; Safety Policy  <a href="https://www.hud.ac.uk/media/policydocuments/Health-andSafety-Policy.pdf">https://www.hud.ac.uk/media/policydocuments/Health-andSafety-Policy.pdf</a></p> <p>University Occupational Health Policy  <a href="https://staff.hud.ac.uk/oh/policies/#!/#d.en.372507">https://staff.hud.ac.uk/oh/policies/#!/#d.en.372507</a></p> <p>Occupational Health Service Contamination Incident Procedure</p>

<b>REVISION HISTORY</b>			
<b>Version</b>	<b>Date</b>	<b>Revision description/Summary of changes</b>	<b>Author</b>
V2.2	Sept 2025	Policy Review, update to H&S reporting link – minor change Changes made to reflect changes in guidance	OH Clinical Lead
V2.1	June 2022	Policy review, job title amendments and other minor changes	OH Clinical Lead
V2.0	Sept 2019	Transfer to the Policy Framework template – no other changes.	Head of Occupational Health
V1.2	March 2018	Job titles updated (minor amends)	Head of Occupational Health
V1.1	Sept 2017	Formatting updates (minor amends not requiring committee approval)	Head of Occupational Health
V1.0	Sept 2016	First draft of new policy	Head of Occupational Health