GUIDANCE NOTE 4: HEALTH SURVEILLANCE AND IMMUNISATION

The need for people who may be at risk from microbiological hazards to receive health monitoring and immunisation must be considered by Colleges when an activity is risk assessed. The assessment of the work will identify when health surveillance or immunisation is necessary and the University’s Wellbeing Services department will be able to advise and provide these services. The names of individuals working with Hazard Group 3, and some Hazard Group 2, organisms will be kept centrally.

Health surveillance
Health surveillance is required by COSHH (and the Management of Health and Safety at Work Regulations) if the following are applicable:

- Is the work known to harm health in some way?
- Are there valid ways of detecting the disease or condition?
- Is surveillance likely to benefit the employee?
- Is it reasonably likely that damage to health may occur under particular conditions at work?

In practice, health surveillance for biological risks may not be appropriate. It may be useful where an agent causes serious disease which might have an insidious onset, and for which there is effective treatment available. In some cases, a high level of personal vigilance by workers is required so that medical attention is sought promptly should signs of infection or illness become apparent. This may be termed health surveillance.

It is important to recognise that health surveillance should not be considered in isolation from other health monitoring or occupational health procedures.

Pregnant Workers and Breast Feeding Mothers
There is a particular duty to assess additional risks to workers and the foetus and child. In the case of biological agents there are certain organisms that may present an additional hazard. The risk assessment for the work should highlight this hazard.

Women of child-bearing age working with agents that could cause infection with deleterious effects on foetal development (for example, rubella virus and human cytomegalovirus) should inform the University Occupational Health Physician (preferably through Colleges) as soon as possible if they think that they are pregnant. Line managers should act on the findings of the risk assessment and on advice from Occupational Health.

Immunisation
Immunisation must never be regarded as the primary defence against laboratory infection but it may give valuable additional protection. Where work is undertaken with specific pathogens (or materials suspected of containing them), and immunisation could be important for the welfare of the worker and
the community, then Safety Services should be consulted. Tetanus immunisation is recommended for people performing manual tasks where there is a significant risk of cuts or whose work involves animals or animal houses. Hepatitis B vaccination is recommended for persons working with human blood or tissue. If a new worker is being engaged or an existing employee being asked to undertake work that would require immunisation, then this immunisation must be made a condition of acceptance for such work. The University Occupational Health team will carry out any immunisations that are required but individuals may make other arrangements if they so wish, provided that Occupational Health are notified so that a complete record is available centrally in the University. The College should notify Occupational Health of people requiring immunisation.

It should be noted that individuals are entitled to request that immunisation is provided where a vaccine is available for the agent they are working with.