



**HUMBERSIDE
LMCs**

The professional voice of general practice

Hepatitis B Immunisation

Clinical and Prescribing

This advice applies to the treatment of patients by their NHS primary medical practice (GP). Unless otherwise specified in the practice contract this advice applies to NHS patients (including emergency patients and temporary residents).

Obligations under Essential Services

The issue of obligation under Essential Services does not arise as there is no patient who is sick or thinks they are sick. It is not a GP's obligation or duty to assess the risk posed to the patient by his occupation.

A GP would not normally be trained or experienced in occupational health and would not be in a position to undertake a risk assessment. It is inadvisable to take on such work unless accredited as an occupational health practitioner or otherwise appropriately trained or experienced.

Normally, contractual obligations can be met by advising the patient they may be at risk and that they should avoid the exposure. This may entail stopping work. They should be advised to consult their union.

If a patient presents saying he/she has been told to get a Hepatitis B immunisation, the practice should consider whether the patient is at immediate and unavoidable occupational risk. If so they may advise that this may be provided as an uncontracted NHS service but that the employer will be reported to the Health and Safety Executive by the LMC for breaking the law.

A doctor should not provide immunisation as a substitute for an occupational health service to the employee and this could carry a medico-legal risk.

In exceptional circumstances, where the risk is absolutely obvious and the patient is in imminent danger the provision of immunisation would be regarded as an ethical obligation and could be considered a contractual obligation. One of the GMC Duties of a Doctor is to *"make the patient your first concern"* and a doctor must act in the best interest of the patient if he continues to risk acquiring a potentially fatal infection or risk losing his job and livelihood because of the inaction of his employer. In such a case the doctor would have an ethical duty to advise and arrange Hepatitis B immunisation. If provided as an NHS service the vaccine would be reimbursed through FP34D. The GP would not be entitled to charge a fee to his NHS patient nor can a fee be claimed from the NHS.

The doctor should remind the employer of his obligations under Health & Safety legislation. A model letter is appended.

Obligations under Additional Services

Under Additional Services a contractor (who has not opted out of this service) receives a global sum which includes the provision of Immunisation Services.

The global sum covers the following categories of patients eligible for hepatitis B vaccination and the vaccine is reimbursed via FP34D. No other fee may be charged for the vaccination. A fee may be charged for a private certificate if one is required.

- a) Babies born to mothers who are chronic carriers of hepatitis B virus or to mothers who have had acute hepatitis B during pregnancy.
- b) Parenteral drug misusers
- c) Individuals who change sexual partners frequently
- d) Close family contacts of a case or carrier
- e) Families adopting children from countries with a high prevalence of hepatitis B
- f) Haemophiliacs
- g) Patients with chronic renal failure.
- h) Those travelling to areas of high prevalence, who intend to seek employment as health care workers or those who plan to remain there for lengthy periods and who may therefore be at increased risk of acquiring infection as the result of medical and dental procedures carried out in those countries
- i) Children born outside the UK and who have received a primary dose in their country of origin and who are now domiciled in the UK should have their course of the vaccine completed under GMS.

Obligations of Employers

Under Health and Safety legislation the employer has a responsibility and should undertake a risk assessment (COSHH) and provide any necessary protection for employees, including immunisation against Hepatitis B.

If an assessment reveals a risk then the employer has the duty to act and should arrange with a suitably qualified medical service to meet the relevant obligations under the health and safety legislation.

Staff Working in General Practice

Staff who work in general practice (doctors, nurses, admin staff) may also be at risk. These personnel should be referred to the Occupational Health Service which NHS England Area Team should have set up locally. If a practice

provides the service for its staff it would need to undertake a proper risk assessment, keep proper records and pay for the vaccine (an NHS prescription would be inappropriate).

Medical and Dental Students / Other Trainee Healthcare Professionals

The immunisation of medical, dental and other healthcare students against Hepatitis B is the responsibility of their educational or training establishments, many of whom provide this service.

Educational establishments should not rely on the good will of GPs to avoid taking proper responsibility for managing the real and serious risk of infection by arranging an effective occupational service that provides the full range of risk reduction procedures. Educational establishments have a legal duty of care to medical and dental students and obligations under health and safety legislation to all those at risk as a result of duties undertaken in the establishment.

A GP who gives the Hepatitis B immunisation may well provide a false sense of security which could place students at increased risk of HIV, Hep C etc. A GP would not want inexperienced students to be exposed to clinical risk before they have received appropriate training in risk reduction, dealing with needle stick incidents etc.

The immunisation of trainee paramedics, nursing students and dental nurses is the responsibility of the Occupational Health Service of the training body.

Charging Fees

A practice may enter into a private arrangement with an employer to provide this service to a group of employees or an individual employee. The practice would need to consider the service it provides and ensure that the employer understands what is being provided. Although some registered patients may be included in a group of employees the regulations do allow the practice to charge fees to a third party. The practice should remember that the cost of the vaccine and laboratory charges for subsequent antibody levels will not be borne by the NHS and should be included in the charging package along with the consultation fees. Claims (including FP34D) should not be made via the NHS.

Conclusion

There are no identified NHS resources available to contractors from the CCGs for this work.

It is important that doctors conduct themselves professionally at all times whether offering the vaccination or not. The public standing of the profession is important and adverse publicity reduces public support for general practice.

Please address any query to the LMC Secretariat.

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The Humberside Group of Local Medical Committees Ltd

Albion House
Albion Lane
Willerby
Hull
HU10 6TS

01482 655111
humberside.lmcgroup@nhs.net
www.humbersidelmc.org.uk

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