

Children at risk of having Hepatitis B or C or HIV Safe caring information for foster carers Good practice guidelines

Jane Dove, Lisa Harwood, Sheila Lewis, Dr H Payne

Background

Any child may be at a small risk of getting Hepatitis B (HBV) or C (HCV) or HIV by being born to a mother who has the blood borne virus.

The virus can be transmitted as a result of intravenous drug use (blood to blood contact or sharing needles) or through unprotected sexual practice, occupational injuries, non-sterile body piercing or tattoos.

Newborn children with an identified risk of Hepatitis B will be immunised against Hepatitis B from birth.

Because of the risk of stigmatisation, any child with suspected or confirmed HBV, HCV or HIV should be treated **no** differently to a child without that risk. As foster carers you will have been given information about safe caring and this good practice should apply to all the children you care for.

The possibility of getting HBV, HCV or HIV from a child is minimal. Good hygiene measures should be adhered to at all times.

(See attached diagram which shows the correct way to wash your hands)

Good practice should also include:-

- No sharing of personal items tooth brushes, razors or tweezers
- Clean up any blood spillages with hot soapy water then wipe surfaces with household bleach – then throw cloth away
- Cover cuts with a waterproof plaster until healed
- Wear gloves for nappy changing only if blood is noticed in the stools or urine
- Wear gloves for cleaning up vomit only if blood is noticed in it.
- If you have eczema or psoriasis on your hands and you have areas of broken skin, you are advised to wear gloves when changing nappies / cleaning up vomit even if there is **no** blood noticed – this is to prevent infection from other germs.

- Safe and careful disposal of used sanitary protection.
- It is recommended that any linen contaminated with blood should be washed at 90° Centigrade. However please be mindful of the washing instructions on the label as this temperature may damage the clothing/linen.

NOTE - Urine, faeces, saliva (spit), sputum (phlegm), tears, sweat and vomit do not carry a risk of HIV, HBV or HCV infection unless they are contaminated with blood.

It is **not** possible to catch HBV, HCV or HIV from normal social contact including, kissing, coughing, sneezing, holding hands, sharing bathrooms, toilets, swimming pools, food, cups, cutlery and crockery etc.

There is no immunisation available for Hepatitis C or HIV

Immunisation for Hepatitis B

All short term foster carers who receive emergency placements and their families should be offered immunisation against Hepatitis B.

Permanent foster carers (and their families) who accept a child known to be of high risk of Hepatitis B should also be offered immunisation. (Immunisation Against Infectious Diseases, DoH. 2006).

Please contact your GP to arrange immunisation

NB Every effort should be made to ensure that children who are looked after complete their Hepatitis B immunisation course

A child who is suspected or confirmed as having HBV, HCV or HIV **must** have their right to confidentiality maintained. However, to ensure the child or young person with HBV, HCV or HIV can be supported, it may be necessary to share the diagnosis with their carer – this disclosure will be considered and made by the child's social worker if appropriate.

What are Hepatitis B, C and HIV and how are they transmitted?

What is HIV? - Human Immunodeficiency Virus

HIV is a virus that attacks the body's immune system making it vulnerable to infections that a healthy immune system would fight off.

Transmission of HIV

The vast majority of children who have HIV will have acquired the virus from their mothers either in the womb, at delivery or through breast feeding.

Children and young people may also acquire HIV

- Through unprotected sexual intercourse with an infected person or through sexual abuse.
- Through sharing contaminated needles, syringes or other equipment during intravenous drug use, or from a needle stick injury.

What is HBV? – Hepatitis B Virus

HBV is a virus that causes inflammation of the liver, which can result in liver cell damage that may lead to scaring of the liver (cirrhosis) and increased risk of liver cancer in some people.

The risk of liver cancer is much higher in children who were infected at birth. Hepatitis B is highly infectious and much more easily transmitted than HIV by blood borne routes - HBV is preventable by immunisation.

Transmission of HBV

- · From mother to child at delivery.
- Through unprotected sexual intercourse with an infected person, or through sexual abuse.
- From sharing contaminated needles, syringes or other equipment during intravenous drug use, or from a needle stick injury.
- Through a blood transfusion given in a country where blood transfusions are not screened for hepatitis.
- By invasive medical/dental treatment abroad using non-sterile instruments/needles.

Other less common routes by which the infection may be spread are:

- From non-sterile equipment used for tattooing and cosmetic piercing.
- By sharing razors and toothbrushes (which may be contaminated with blood) with an infected person.

What is HCV? - Hepatitis C Virus

HCV is a virus that causes inflammation to the liver. 20% - 40% of people with the HCV infection will clear the virus. The majority of people infected will only get mild liver damage. However, in 5%-20% of people HCV progresses over 20 to 30 years to cause serious liver damage.

Transmission of HCV

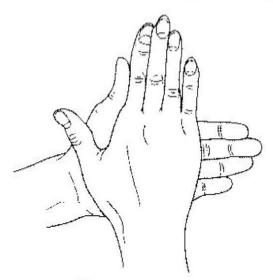
- From sharing contaminated needles, syringes or other equipment during intravenous drug use, or from a needle stick injury.
- Through a blood transfusion given in a country where blood transfusions are not screened for Hepatitis.

Other less common routes by which the infection may be spread are:

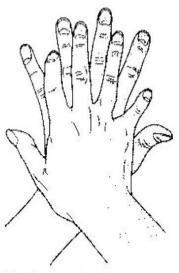
- From non-sterile equipment used for tattooing and cosmetic piercing.
- By sharing razors and toothbrushes (which may be contaminated with blood) with an infected person.
- From an infected mother to her baby at birth (this risk is increased if the mother is also infected with HIV). Currently there is no proven association between breastfeeding and HCV transmission.
- By unprotected sexual intercourse.
- By invasive medical/dental treatment abroad using non-sterile instruments/needles.

Bibliography

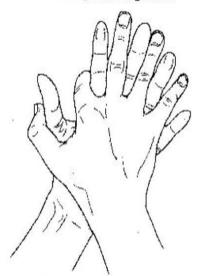
- Department of Health 2004: Children in Need and Blood-borne Viruses: HIV and Hepatitis
- Brent Guidelines for testing Looked After Children who are at risk of a bloodborne infection: A joint social services and health document
- Gwent Healthcare NHS Trust Hand Hygiene Policy 2006
- Department of Health 2006 –Immunisation against infectious disease



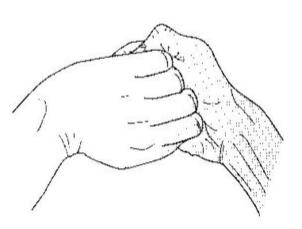
Wet hands and add solution. Rub palms together.



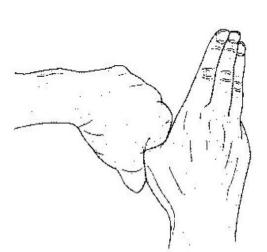
Right palm over back of left hand and left palm over back of right hand.



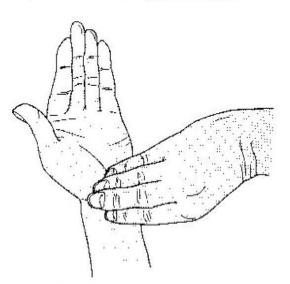
Palm to palm with fingers interlaced



Rub backs of fingers with palm.



Wash each thumb by clasping and rotating in the palm of the opposite hand.



Rub each wrist with opposite hand. Rinse hands and dry.