

## **Advisory Committee on Dangerous Pathogens**

### **Infection at work: controlling the risks from human remains**

#### **Issue**

1. Consideration of the consultation draft of the guidance *Infection at work: controlling the risks from human remains*

#### **Background**

2. Members may be aware that HSE has been working on two publications:
  - Control of microbiological risks when carrying out exhumation of human remains; and
  - Embalming: safe working and the prevention of infection.
3. As a result of the recent review of HSE's publication strategy, a decision was taken to merge the two documents, and expand the scope somewhat to cover the whole of the funeral profession (ie not just embalming). This was done because there was very similar information given in both documents, the differences being in some of the more specific control measures that were recommended.
4. According to the Office of Fair Trading, each year about 630,000 funerals are carried out in the UK. Mintel estimate the number of funeral director companies at 3,000 operating out of 4,200 outlets. The exact number is unknown, since there is no requirement for funeral directors to be registered or licensed. Three quarters of all funerals are cremations, leaving one quarter as burials. There are 242 crematoria in the UK, and 1,124 cemeteries.
5. The Home Office issues over 1000 licences for the exhumation of individual human remains each year. Most exhumations are planned, but some will result from an accidental disturbance in road or building construction. Exhumations may be carried out by cemetery staff or specialised companies (in particular when mass exhumation is carried out). They should be carried out under the supervision of an Environmental Health Officer.
6. The funeral sector themselves identified the need for an authoritative, but practical publication to help raise standards of good occupational hygiene, in particular in small business (often just a funeral director and casual staff) and for

peripatetic workers such as embalmers and those carrying out exhumations. The guidance, in particular the information covering the funeral profession has been developed in close consultation with representatives of the sector.

### **The guidance**

The guidance (Annex 1 - Controlling The Risks From Human Remains) is based on the more general *Infection at work guidance*. As in the more general guidance, there is information about the nature of infection, the sources of infection that might be encountered at work, and the various ways infections can be transmitted.

Guidance on the basic control measures to prevent infection is given, together with more specific control measures that are appropriate for this sector. In particular, the concept of managing the risk of infection by making a distinction between the clean and dirty areas in workplace, is discussed. This concept is used in post-mortem rooms, but this guidance provides practical advice on how the approach can be implemented in funeral homes and exhumation sites.

- A number of key infectious agents have been identified, and guidance is given as to how these should be handled, eg should embalming take place or viewing be allowed.

### **Consultation**

The guidance has been sent to a number of external organisations (Annex 2). ACDP have been asked for comment given their role in advising on all aspects of hazards and risks to workers and others from exposure to pathogens. The TSE WG will also be asked to comment, as there has been some concerns raised about the handling of those who have died from vCJD/CJD.

### **Action**

Members are invited to discuss and comment on the draft guidance Any additional comments can be sent via email to [jillian.deans@hse.gsi.gov.uk](mailto:jillian.deans@hse.gsi.gov.uk). In particular:

- Members are asked to consider the proposed title of the guidance, and whether it adequately conveys the scope of the document
- Members are asked to consider the list of key infectious agents which have been highlighted in the guidance and discuss whether:
  - a. Any additional agents should be added; and
  - b. The guidance given is appropriate and is based on the risk.