



CHILDREN'S SERVICES

Contact with Blood and Bodily Fluids Policy

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1. Introduction

Using standard infection control precautions will reduce the occurrence and risks of infectious disease, especially in the childcare setting where risks of transmission of infectious diseases is higher than in other work or community settings. These guidelines outline policies and procedures for specific activities and aspects of the childcare environment and following is a summary of some of the key infection control precautions for the childcare setting.

2. Scope

This Policy applies to all Children's Services operated by Coast Services Group Limited (a wholly owned subsidiary of CCCL) and our Employees. This applies to Centre Based day care services and outside school hours care services.

3. Policy

Our services will minimise the spread and risks of infectious disease in the child care setting by using standard infection control precautions against transmission of infection. Children's Services Educators will minimise risks and exposure to diseases through contact with blood and body fluids by using recommended standard infection control precautions.

4. Procedures and Implementation

Children's Services Educators will:

- 4.1 Wash hands and skin with warm, soapy water after any contact with blood, faeces, urine, vomit or any other body fluids.
- 4.2 Wear gloves where possible to clean up spilt blood, faeces, urine, vomit or other body fluids with neutral detergent and water, and regularly wash floors, toileting, and nappy change areas, nappy change surfaces and mats, play equipment and toys.
- 4.3 Ensure that Educators with cuts, abrasions, dermatitis or open skin on their hands cover with a water-resistant occlusive dressing, which should be changed each time it is soiled or wet.
- 4.4 Dispose of soiled nappies, disposable materials and clean soiled clothes, towels, washing cloths, linen, and equipment in accordance with other policies in this document.
- 4.5 Prevent any sharing of combs, brushes, toothbrushes, bottles, pacifiers, towels, facecloths and handkerchiefs.
- 4.6 Do not kiss children or infants on the mouth.
- 4.7 Children's Services Educators are to fill in a hazard/injury form if they think that they have been exposed to HIV or other blood borne diseases or to blood or body fluid from a needle stick, sharps injury, splash into the face, eyes, mouth or nose or contact with an open wound, regardless of the known or presumed infections status of the person or child who is the source of the blood or body fluid.

4.8 Educators are to notify the Nominated Supervisor and attend their doctor if they think that they have been exposed to HIV or other blood borne diseases or to blood or body fluid from a needle stick, sharps injury, splash into the face, eyes, mouth or nose or contact with an open wound, regardless of the known or presumed infections status of the person or child who is the source of the blood or body fluid.

4.9 If any Educator believes a child has been exposed to HIV or other blood borne diseases or to blood or body fluid from a needle stick, sharps injury, splash into the face, eyes, mouth or nose or contact with an open wound, regardless of the known or presumed infections status of the person or child who is the source of the blood or body fluid they are to notify the Nominated Supervisor who will call parents and relevant authorities such as the Ministry of Health and Community Services.

5 If exposed to blood or bodily fluids (needle stick injury, skin contact, splash into eyes, nose or mouth or biting)

5.1 Seek medical advice as soon as practical about risk of infection and post exposure treatment including HIV and hepatitis B and C treatment and testing regardless of the known or presumed infection status of source person of the blood or body fluid,

5.2 Write an injury report on Enable Hr

5.3 Report the injury to WHS Committee if it is related to an employee or child in out of school hours.

6 For needle stick or sharps injuries involving exposure of any Children or Educators to blood or body fluids:

6.1 wash the injured area with soap and running water

6.2 dry the wound and cover with a water-resistant occlusive dressing

6.3 Dispose of the object that caused the injury, wear gloves and use forceps or tongs to pick up the object, and discard into a sealed firm container to be disposed of (preferably a yellow biohazard sharps container which are commercially available.)

6.4 For advice, contact the ASC Needle stick Injury Hotline on 1800 804 823.

7 Be aware that for skin contact with blood:

7.1 The risk of contracting blood borne diseases including HIV through skin contact with blood is low but is more likely if there are open cuts, abrasions, skin cracking of infections that are uncovered.

7.2 Wash off with warm water and soap as soon as possible and cover all open skin with a water resistant occlusive dressing.

8 If blood or body fluids splash into the eyes:

8.1 Rinse for 5 to 10 minutes with water, or a sterile eye irrigation solution if available.

8.2 If wearing contact lenses, rinse the eyes with the lenses in, remove the lenses and rinse the eyes again, and do not put the contaminated lenses back in.

9 If blood or body fluids splash into the nose or mouth:

9.1 Blow your nose or spit out and rinse with water.

10 Be aware that for contact with saliva, tears and biting:

- 10.1 HIV has been found in saliva and tears in low concentrations and risk of transmission from spitting, kissing, wiping noses and eyes is very low, however standard infection control precautions should still be followed, contact with saliva and nasal secretions may transmit other infectious diseases,
- 10.2 The risk of HIV infection from biting is considered to be very low and requires the skin to be broken, if a bite has resulted in breaking the skin, wash with soap and running water, cover with a clean dressing, and advise the family of the injured child to seek urgent medical advice about risks of infection and further management.
- 10.3 Rinse the biting child's mouth with water to prevent cross infection from the bitten child.

11 Be aware that for giving first aid and cardiopulmonary resuscitation (CPR):

- 11.1 Use a disposable mask with a one-way valve, when available.
- 11.2 Use gloves when applying first aid to bleeding wounds.

- 12 For clothes, toys or other objects that have been contaminated by blood or body fluids, wear gloves and a protective apron or overalls, mop excess fluid with disposable paper towel, and wash with neutral detergent and water.

13 To clean a blood spill on the floor:

- 13.1 avoid direct contact with the spill
- 13.2 Wear gloves and, if needed, a protective apron or overalls and eye protection and disposable mask if eye or face splashes are likely.
- 13.3 Contain the spill as far as possible by placing absorbent paper or paper towel around the edges of the spill, mop up as much as possible with absorbent paper, discard into a sealed heavy plastic bag and dispose of as clinical waste.
- 13.4 Clean up the remaining spill and contaminated surface with neutral detergent and water,
- 13.5 Dry or ventilate the area, discard all gloves and disposable materials into a sealed heavy plastic bag for disposal,
- 13.6 Any contaminated clothing, cloths or cleaning implements should be washed in neutral detergent and hot water. If using a washing machine, wash contaminated and non contaminated materials separately, use the longest cycle for contaminated material, and if washing by hand, wear gloves,
- 13.7 For spills onto carpet or upholstered furniture, wear gloves, mop up as much excess fluid as possible with absorbent paper, clean with a neutral detergent and water, and shampoo with an industrial carpet cleaner as soon as possible.

- 14 Be aware of responsibilities under the Anti-Discrimination Act** in relation to not discriminating when enrolling children, employing staff or recruiting Educators who may have HIV/AIDS, or Hepatitis B or C infection.

Note: The infection control, contact with blood and body fluids, cleaning and handling needles and sharps information in these guidelines is based on the principles of standard infection control precautions from NSW Ministry of Health, Infection Control Policy, circular 23/5/2007. It is important to note that the NSW Ministry of Health policy was specifically developed to address infection control issues in health care facilities; however the

principles of standard infection control precautions apply in all environments including child care facilities.

Examples of Neutral Detergent: Palmolive dishwashing liquid.

For advice in the event of a needle stick injury, contact the ASC Needle stick Injury Hotline on 1800 804 823.

15 Related policies and procedures

WHS Policy

Incident, Injury, Accident and Illness policy

Incident/ Accident form