

PARSLOES PRIMARY SCHOOL



Body Fluids Policy

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Introduction

This guidance has been reviewed with the involvement of Occupational Health, Safety and Wellbeing, Housing Localities and our in house Building Cleaning services.

Body fluids, including blood, vomit, saliva and excrement should be treated carefully, as potentially they may be infected with harmful viruses or bacteria such as Human Immunodeficiency Virus (HIV), Hepatitis A and B/C/D/E (known as blood borne viruses – BBVs), Tuberculosis, Polio and Diarrhoea - these are all commonly termed as Communicable Diseases.

For a comprehensive list and useful information, please follow the links below provided by the Gov.uk, Public Health England and Health and Safety Executive.

- www.gov.uk/health-protection/infectious-diseases
- <http://lbbdstaff/HR/Pages/Body-Fluids.aspx>

Where the possibility exists for employees to come into contact with body fluids, an assessment should be made to determine the risk of exposure, and what measures can be taken to reduce the risk.

This guidance will help with the development of both a risk assessment and safe system of work for dealing with body fluids. See body fluids risk assessment template. In addition to safe systems of work, and good infection control measures (see below) there is likely to be the need for consideration for some occupational groups to be provided with vaccinations to prevent diseases.

Further information on vaccinations can be found in the following link:
<http://lbbdstaff/HR/Pages/Occupational-Health.aspx>

Good Practice

Schools, nurseries, care establishments, other similar workplaces and occupations requiring the clean up of body fluids and hypodermic needles, provide an ideal source for the transmission of communicable diseases. This may be due to large numbers of young or more vulnerable people in close contact with each other, who may require assistance with personal hygiene, and may have reduced immunity to infection and communicable diseases. Also, there may be viruses contained in the blood, nappies, needles and other body fluids cleaned up in the community by our employees e.g. Housing Caretakers, Cleansing officers and Building Cleaners etc.

Good infection control measures are essential to protect employees, children and service users.. This can be achieved through education, awareness and safe systems.

The assistance of everyone involved in the care of children, vulnerable people, and body fluids clean up is invaluable in highlighting possible problems, so that the spread of infection can be prevented or controlled and normal day to day activities maintained.

Basic Good Hygiene

Safe precautions/protocols should be adopted by employees when dealing with body fluid spills, sharps, splash injuries or performing first aid.

When developing a common protocol, it may be helpful to consider the following:

- Treat all blood and body fluids as being potentially infectious
- Wash hands, cover cuts or open lesions on exposed areas of the body with a waterproof plaster and put on your protective gloves/disposable apron prior to cleaning up any body fluids
- Protect eyes and mouth from being splashed with body fluids (consider the use of Personal Protective Equipment (PPE)) e.g. when jetting out Schmitt/Johnsons or hosing down blood
- Remove disposable PPE (remove by pulling inside out to contain any body fluids) and double bag for disposal
- Thorough washing and drying of hands after dealing with blood, other body fluid secretions, using the toilet and before handling food
- Ensure employees and managers are aware of the need to report and take appropriate precautions if they suspect or are confirmed as having an infectious disease. It may be necessary to liaise with Occupational Health, Safety and Wellbeing or GP for advice

Contact with Needles and Associated Injuries

Some employees may need to clear up discarded needles, others may accidentally come across them but both may result in needle stick injury which could lead to blood borne viruses (BBV) such as HIV or Hepatitis B/C/D/E. See further information about these BBV's in the following HSE guidance link:

<http://www.hse.gov.uk/pubns/indg342.pdf>

Prevention

Wherever possible avoid hand contact with needles. Collect the needle by using a litter picker, lifting it away from you and into a sharps box. If such equipment is not readily available, think of other alternatives accessible to you e.g. tongs, dustpan/brush and safe receptacle that won't puncture easily e.g. jar/lid or metal can.

Action and support after possible infection with a BBV

If you have sustained a needle stick injury or contaminated with blood or other body fluids, take the following action without delay:

- wash splashes off your skin with soap and running water

- if your skin is broken, encourage the wound to bleed, do not suck the wound – rinse thoroughly under running water
- wash out splashes in your eyes using tap water or an eye wash bottle, and your nose or mouth with plenty of tap water – do not swallow the water;
- record the source of contamination
- report the incident to your supervisor, line manager and Occupational Health, Safety and Wellbeing as prompt medical advice is important and you should have access to speedy support, advice and reassurance. The circumstances of the incident need to be assessed and consideration given to any medical treatment required.

Treatment may be required following infection with a blood borne virus, but to be effective, it may need to be started quickly. If your exposure occurs during core office hours you should contact Occupational Health on 0208 227 3509. If exposure is outside of this time, attend Queens's hospital (nearest) Accident and Emergency department for advice, without delay.

The Employee Assistance Programme can assist with medical enquiries and offer support in confidence, contact them by phone on 0800 243 458 or log on via this link: <http://lbbdstaff/HR/Pages/Employee-Welfare-Line.aspx>

Special Considerations for First Aiders

If you are a first aider in the workplace, the risk of being infected with a blood borne virus while carrying out your duties is small. There has been no recorded case of HIV or Hepatitis B virus (HBV) being passed on during mouth-to-mouth resuscitation. However, the following precautions should be taken to reduce the risk of infection:

- wash and dry hands
- cover any cuts or grazes on your skin with a waterproof dressing
- wear suitable PPE such as disposable gloves, apron when dealing with blood or any other body fluids
- use suitable PPE such as eye protection and a disposable plastic apron where splashing is possible
- consider the use devices such as face shields when you give mouth-to-mouth resuscitation, but only if you have been trained to use them
- remove disposable PPE (remove by pulling inside out to contain any body fluids) and double bag for disposal
- wash your hands after each procedure.

It is not normally necessary for first aiders in the workplace to be immunised against Hepatitis B virus, unless the risk assessment indicates it is appropriate.

As a first aider it is important to remember that you should not withhold treatment for fear of being infected with a blood borne virus where suitable controls are in place, see above.

Spillages

Blood and other body fluid spillages should be dealt with promptly. A typical procedure for cleaning is set out below; however, your risk assessment may require a variation on this procedure. Procedures should be written down and provided to those required to clean spillages.

- restrict access to the area
- wear gloves (non latex) to protect hands
- use additional PPE, as needed such as disposable leak-proof apron and/or eye protection
- use disposable absorbent towels to soak up the majority of the body fluid
- clean with an appropriate disinfecting solution (see recommended kit section)
- *contaminated towels, waste and disposable PPE should be “double bagged” and disposed of in domestic waste
- wash hands thoroughly with hot soapy water and dry fully

* If a blood spillage comes from a person with a known communicable disease, it should be treated as clinical waste and not be disposed of with normal domestic waste. It should be placed in a clinical waste bag (ideally) or doubled bagged and clearly labelled 'Clinical waste' ready for collection by an approved contractor. See 'Council clinical waste collection' below.

Kit

It is recommended that all items needed for cleaning spillages of blood or body fluids are kept together in a designated and secure workplace area, to which all trained employees have access.

A spillage kit typically includes:

- disposable plastic apron
- disposable non latex gloves
- sterile eye wash/wipes (for those employees who work out in community and do not have access to running water)
- disposable shoe/boot protector (to prevent body fluids trapped in soles contaminating surfaces)
- clinical waste bags
- detergent
- disinfectant /blood spill products
- when cleaning up blood, mops with disposable heads (for discarding via clinical waste) should be used because of the contamination risk of BBVs. Mops used to clean up other small body fluid spillages should be washable type and cleaned in cleaning equipment sink (not a kitchen sink), rinsed with a disinfecting solution and dried with mop head upwards.
- disposable paper towels
- plastic bucket/bowl

Disposal of Waste

A risk assessment, as required by Control of Substances Hazardous to Health (COSHH) Regulations, should be carried out on any waste generated. Certain waste is classified as clinical waste and its collection, storage and disposal is subject to strict controls. Clinical waste includes waste consisting wholly or partly of blood or other body fluids, swabs or dressings, syringes, needles or other sharp instruments, which unless made safe may be hazardous to any person coming into contact with it. Waste generated in the Council's Occupational Health service will be classed as clinical waste for medical reasons.

Human hygiene waste which is generated in places like schools and offices (as well as in the home) is generally assumed not to be clinical waste as the risk of infection is no greater than that for domestic waste. However, those carrying out the risk assessment may have local knowledge which means they cannot make this assumption. See previous notes in spillage section for advice with domestic type waste.

Further information on how to dispose of clinical and human hygiene waste can be found by contacting your local Environment Agency office (General Enquiry Line Tel: 03708 506506).

Council Clinical Waste Collection Arrangements

If clinical waste material needs to be disposed of, please contact one of the following procured companies as there is no in house service. The following officers may also be able to assist with enquiries: Janet Burke –0208 227 3413 Euan Beales – 0208 227 5226

- **PHS**
01204 862361

Body Fluids

This policy is one of a set of policies concerning Medical Needs. It should be read in conjunction with the following related policies:

- Medical Needs – Health & Safety/First Aid
- Medical Needs – Administration of Medicines
- Medical Needs – Asthma

This policy covers the precautions to be taken when dealing with body fluids.

Use the following treatment guidelines:

- Always use disposable gloves.
- Always use disposable cloths.
- Encourage children to clean their own wounds, as appropriate.
- Always cover a wound.
- Ensure that wounds are covered during contact sports.

Use the following safety guidelines:

- If a child finds a used condom, dispose of it and ensure that the child washes their hands thoroughly. The parents must be informed.
- If a child finds a needle from a syringe, ensure this is disposed of safely in a tin or jar. Ensure that the child washes their hands thoroughly. If there is broken skin, encourage the wound to bleed. The parents must be informed and it is their responsibility to seek medical advice if they believe it to be necessary.

Points to remember:

- Never frighten a child - always be reassuring and comforting
- It is very difficult to be infected by the HIV Virus.