

Intereach Children's Services

Contact with Blood and Fluids Procedure



Applies to	Intereach Family Day Care (FDC) and Intereach Out Of School Hours (OOSH)				
Policy	Children's Health and Safety Policy				
Version	2.0	Date approved	1/11/2022	Next review date	1/11/2025

1. Objective

Intereach Children's Services staff and educators will minimise risks and exposure to diseases through contact with blood and bodily fluids by using recommended standard infection control precautions. Adequate infection and prevention control must be practiced at all times when administering first aid or cleaning up blood or body fluids

Under the Disability Discrimination Act 1992, Intereach as the Approved Provider, will not discriminate when enrolling children, employing staff or recruiting educators who may have HIV/AIDS, or Hepatitis B or C infection.

2. Responsibilities

It is the responsibility of the Nominated Supervisor to:

- ensure the use of hygiene and infection control precautions are followed by the staff and educators in the early childhood setting to prevent and minimise risks and exposure to diseases.
- ensure the staff and educators are aware of the responsibilities in relation to infection control.

It is the responsibility of staff and educators to:

- follow hygiene and infection control precautions when handling blood and body fluids to prevent exposure to diseases.
- ensure they are aware of the Intereach *Risk and Incident Policy* and *Work Health and Safety Policy* and report all incidents accordingly.

3. Procedure

3.1. Contact with blood and body fluids

- After any contact with blood, faeces, urine, vomit or any other body fluids, hands and skin are washed with warm, soapy water.
- Gloves are worn to clean up spilt blood, faeces, urine, vomit, or other body fluids.
- Floors, toileting, and nappy change areas, nappy change surfaces and mats, play equipment and toys are regularly washed with neutral detergent and water.
- If children have cuts, abrasions, dermatitis or open skin on their hands, these are covered with a water-resistant occlusive dressing, which is changed each time it is soiled or wet.
- Soiled nappies, disposable materials and clean soiled clothes, towels, washing clothes, linen, and equipment are disposed of in accordance with relevant policies and procedures.
- Any sharing of combs, brushes, toothbrushes, bottles, dummies, pacifiers, towels, face cloths and handkerchiefs are prevented.
- Where there is a risk of splashing blood or other body fluids a mask and eye protection are worn. and,

- Kissing children or infants on the mouth is not permitted.
- Any contaminated clothing are removed immediately.
- If there is a risk of a needle stick or sharp injury involving exposure to blood or body fluid, the injured area is washed with soap and water, the wound is dried, and covered with a water-resistant occlusive dressing. An educator will dispose of the object that caused the injury, by wearing gloves to pick up the object with the use of forceps or tongs to and discard into a sealed rigid container for disposal (preferably a yellow biohazard sharps container). Contact the Needlestick Injury Hotline on 1800 804 823 for advice if necessary. Consider this as an incident and report according to the *Intereach Risk and Incident Policy*.
- The Nominated Supervisor is advised straightaway of any incident and Advise the parents/guardians of the exposure immediately.

3.2. Managing exposure to blood or body fluid

- If blood or body fluids get on the skin, irrespective of whether there are cuts or abrasions, ensure the area is thoroughly washed with soap and water, dried and all open skin is covered with a water-resistant occlusive dressing.
- If the eyes are splashed, the area is gently rinsed but thoroughly with water or a sterile eye irrigation solution if available, while the eyes are open. If wearing contact lenses, the eyes are rinsed with the lenses in, rinse the eyes again after removing the lenses, and it is ensured the contaminated lenses are not reused.
- If blood or body fluid gets in the mouth, the blood or fluid is spit out and the mouth is rinsed with water several times, spitting the water out each time.
- If blood or body fluids splash into the nose, the nose is blown and rinsed with water.
- Medical advice must be obtained as soon as practical about the 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.
- OOSH has a blood and vomit spill kit and will use this for managing blood or body fluids.

3.3. Handling a child exposed to blood or body fluid

- Any contaminated clothing is removed immediately.
- If blood or body fluids get on the skin, irrespective of whether there are cuts or abrasions, the area is thoroughly washed with saline or water, the area is dried and all open skin area is covered with a water-resistant occlusive dressing.
- If a bite has resulted in breaking the skin, the area is washed with soap and running water, covered with a water-resistant occlusive dressing. The biting child's mouth is rinsed with water to prevent cross-infection from the bitten child.
- If the eyes are splashed, the area is rinsed gently but thoroughly with water or a sterile eye irrigation solution if available while the eyes are open. If wearing contact lenses, the eyes are rinsed with the lenses in, rinse the eyes again with lenses removed, and it is ensured the contaminated lenses are not reused.
- If blood or body fluid gets in the mouth, encourage the child to spit it out and ensure the mouth is washed with water several times, spitting the water out each time.
- If blood or body fluids splash into the nose, the child's nose is blown and rinsed with water.

- For contact with saliva and tears:
 - HIV has been found in saliva and tears in low concentrations and risk of transmission from spitting, kissing, wiping noses and eyes is considered to be very low, however standard infection control precautions should still be followed, contact with saliva and nasal secretions may transmit other infectious diseases.
- When providing first aid and cardiopulmonary resuscitation (CPR):
 - a disposable mask is used with a one-way valve, when available; and,
 - gloves are used when applying first aid to bleeding wounds.

3.4. Reporting incidents relating to blood and body fluids

All needlestick injuries will be reported as an incident using the Incident Reporting Form. The Needlestick Injury Hotline is contacted on 1800 804 823 for advice if necessary.

If a contact with blood or body fluids is considered as a serious incident:

- complete an Incident Report Form as soon as practicable, but no later than 24 hours after the incident, injury, trauma;
- notify the Nominated Supervisor immediately, who will, in turn, advise the General Manager and CEO immediately and to the Regulatory Authority via the National Quality Agenda (NQA) IT System within 24 hours.
- The injury is reported to Work Cover and the public liability insurance company or others as appropriate.

Refer to the *Intereach Risk and Incident Policy, Notification of serious incidents procedure* and the *Incident, injury, trauma and illness procedure*.

4. Cleaning Procedure

4.1. Cleaning Clothes, Toys or Other Objects

For clothes, toys or other objects that have been contaminated by blood or bodily fluids:

- wear gloves and a protective apron or overalls;
- mop any excess fluid with a disposable paper towel;
- wash with neutral detergent and water;
- wash any contaminated clothing, cloths or cleaning implements in neutral detergent (e.g. Emmy or Palmolive) and hot water;
- when using a washing machine, wash contaminated and non-contaminated materials separately, use the most extended cycle for contaminated material, and if washing by hand, wear gloves; and,
- for spills onto the 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.

4.2. Cleaning a Blood Spill

The best way to clean a blood spill depends on the size of the spill. The table below will help educators and other staff decide on the most appropriate cleaning strategy.

Size of spill	What to do
Spot , e.g. drop of blood less than the size of a 50-cent coin	Wear gloves Wipe up blood immediately with a damp cloth, tissue or paper towel Place the cloth, tissue or paper towel in a plastic bag or alternative; seal the bag and put it in the rubbish bin Remove gloves and put them in the rubbish bin

Size of spill	What to do
	Wash surface with detergent and warm water Wash your hands with soap and water
Small (up to the size of the palm of your hand)	Wear gloves Place a paper towel over the spill and allow the blood to soak in Carefully lift the paper towel and place it in a plastic bag or alternative; seal the bag and put it in the rubbish bin Remove gloves and put them in the rubbish bin Clean the area with warm water and detergent using a disposable cloth or sponge; place the cloth in the rubbish bin Wipe the area with diluted bleach and allow to dry Wash your hands with soap and water
Large (more than the size of the palm of your hand)	Wear gloves Cover the area with an absorbent agent (e.g. kitty litter or sand) and allow the blood to soak in Use a disposable scraper and pan to scoop up the absorbent material and any unabsorbed blood or body fluids Place the absorbent agent, the scraper and the pan into a plastic bag or alternative; seal the bag and put in the rubbish bin Remove gloves and put them in the rubbish bin Mop the area with warm water and detergent; wash the mop after use Wipe the area with diluted bleach and allow to dry Wash your hands with soap and water

4.3. Preparing a bleach solution

Always prepare bleach solutions according to the manufacturer's instructions. Bleach loses strength over time, and a new batch should be made up daily or when required. Any bleach batch should be discarded after 24 hours.

Always:

- read and follow the safety and handling instructions on the label;
- dilute bleach according to directions;
- wear gloves when handling and preparing bleach;
- check the use-by date before using bleach, because it can lose effectiveness during storage; and
- make up a new batch of bleach each time you disinfect – it loses its effectiveness quickly once it has been diluted.

Never:

- use bleach in a spray bottle;
- use hot water to dilute bleach;
- mix bleach with any other chemicals; and
- use bleach on metals other than stainless steel – bleach is corrosive.

5. National Quality Framework

Element	Concept	Description
2.1.2	Health practices and procedures	Effective illness and injury management and hygiene practices are promoted and implemented.

Element	Concept	Description
2.2.2.	Safety – incident and emergency management	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented
7.1.2	Management systems	Systems are in place to manage risk and enable the effective management and operation of a quality service

6. Context

6.1. Standards or other external requirements	<p>Australian Children's Education and Care Quality Authority (2017). <i>National Quality Standards</i>.</p> <p>Australian Children's Education and Care Quality Authority (2017). <i>Guide to the National Quality Framework</i>.</p> <p>Department of Education, Employment and Workplace Relations. <i>Childcare Service Handbook 2017-2018</i>.</p> <p>Early Childhood Australia (2016). <i>Code of Ethics</i></p> <p>Community Early Learning Australia (accessed February 2018). <i>Sample policy 'Administration of First Aid'</i>.</p> <p>NSW Ministry of Health. Infection blood and body substance spills policy, procedure and clinical guideline (Updated April 2011)</p> <p>Firth, J., Kambouris, N., & O'Grady, O. (2003). <i>Health & Safety In Children's Centre's: Model Policies & Practices</i> (2nd Ed revised)</p> <p>National Health and Medical Research Council 2013 (5th Ed). <i>Staying Healthy: Preventing infectious diseases in early childhood education and care services</i>.</p>
6.2. Legislation or other requirements	<p>Education and Care Services National Regulations consolidated 2017</p> <p>Education and Care Services National Law Act 2010</p>
6.3. Internal Documentation	<p>Administer Medication Form</p> <p>Communication Plan</p> <p>Risk and Incident Policy</p> <p>Incident, Injury, Trauma and Illness Procedure and Form</p> <p>Medical Management and Risk Minimisation Plan</p> <p>Regular/Non-Regular Excursion Hazard Identification/ Risk Management and Authorisation</p> <p>Workplace Safety Assessment</p>

7. Document control

Version	Date approved	Approved by	Next review date
1.0	02/12/2019	R. Phillips, Acting Senior Manager – Children and Family Services	02/12/2022
2.0	01/11/2023	M. Tai, General Manager Operations	01/11/2025