# Intereach Family Day Care Contact with Blood and Bodily Fluids Procedure



Applies to	Intereach Family Day Care (FDC)				
Policy	Children's Health and Safety Policy				
Version	1.0	Date approved	1/09/2025	Next review date	1/9/2028

# 1. Objective

To ensure that all educators and staff in Family Day Care environments respond to contact with blood and body fluids in a safe, hygienic, and effective manner. This procedure aims to minimise the risk of spreading infectious diseases and to protect the health and wellbeing of children, educators, families, and visitors.

# 2. Background

Accidental spills of body fluids – including blood, vomit, urine and faeces – are common in education and care services. All body fluids should be treated as if they are infectious. Promptly removing the spilled substance and cleaning and disinfecting the area reduces the risk of spreading infection to other children

# 3. Responsibilities

It is the responsibility of the Coordination unit to:

- ensure the use of hygiene and infection control precautions are followed by educators in Family Day Care environments and outings including excursions to prevent and minimise risks and exposure to diseases.
- ensure educators are aware of the responsibilities in relation to infection control.

It is the responsibility of 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 @Incident, injury, trauma and illness procedure and report all incidents accordingly.

#### 4. Procedure

### 4.1. Managing Exposure to blood or body fluid

#### On Skin

When blood comes into contact with unbroken skin, wash the area thoroughly with soap and water, then dry completely. Ensure any open wounds are properly covered with a waterproof dressing

#### Eyes

Rinse gently but thoroughly with water or sterile saline. If contact lenses are worn, rinse with them in, then remove and rinse again.

#### Mouth

Spit out any fluid and rinse the mouth several times with clean water.

#### Nose

Blow the nose and rinse with water.

## 4.2. Supporting a child exposed to blood or body fluid

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- Any contaminated clothing is removed immediately.
- Follow the same procedures as above if exposed on skin, eye, mouth and/or nose
- If a bite from another child 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.

#### 4.2.1. For contact with saliva and tears

- HIV has been found in saliva and tears in low concentrations. The 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, as contact with saliva and nasal secretions may transmit other infectious diseases.
- When providing first aid and cardiopulmonary resuscitation (CPR):
  - o a disposable mask is used with a one-way valve; and,
  - o gloves are used when applying first aid to bleeding wounds.

## 4.3. Reporting incidents relating to blood and body fluids

If exposed to a needlestick or sharp injury, wash the area with soap and water, dry it, and cover with a water-resistant dressing. Using gloves and tongs, dispose of the sharp object in a sealed, rigid container (preferably a yellow biohazard sharps container). Contact the **Needlestick Injury Hotline (1800 804 823)** for advice if needed.

All needlestick injuries will be reported as an incident using the Incident Reporting process. If a contact with blood or body fluids is considered as a serious incident:

- complete an Incident Report as soon as practicable, but no later than 24 hours after the incident,
- 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 *Notification of serious incidents procedure* and the *Incident, injury, trauma and illness procedure*.

#### 4.4. Spill kits

It is recommended that educators have a spill kit available. The spill kit can be a bucket filled with all the necessary items to clean up a spill including:

- disposable gloves (such as you would use for nappy changing)
- utility gloves (heavy-duty gloves, used for cleaning)
- Garbage bags (or similar)
- paper towel
- disposable cloths or sponges
- a disposable scraper and pan
- detergent
- disinfectant

#### 4.4.1. Spill Cleaning Process

When a spill occurs, clean it up as soon as possible as per the following:

 put on disposable gloves. Cover any cuts or abrasions on your hands with waterproof dressings and wear gloves;

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- wipe up the spill immediately with a damp cloth, tissue or paper towel. If the spill is larger, cover it with an absorbing agent. Use a disposable scraper and pan to scoop up the absorbent material and any unabsorbed body fluids;
- put the cloth, tissue, paper towel, absorbing agent and scraper into a plastic bag. Seal the bag and put it in the rubbish bin;
- remove disposable gloves and put them in the rubbish bin;
- · wash your hands with soap and water;
- put on clean utility gloves, wash the surface with detergent and warm water and dry with paper towels;
- wipe the area with disinfectant and allow to dry; and,
- remove utility gloves and wash your hands with soap and water.
- Avoid direct contact with body fluids when you are cleaning the spill.

# 5. Monitoring, evaluation and review

This procedure will be reviewed every three years and incorporate feedback and suggestions from children, families, educators, co-ordinators, volunteers and students or when there is a legislative change.

# 6. National Quality Framework

Element	Concept	Description
2.1.2	-	Effective illness and injury management and hygiene practices are promoted and implemented.
2.2.2.	and emergency	Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practised and implemented
7.1.2	systems	Systems are in place to manage risk and enable the effective management and operation of a quality service that is child safe.

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7. Context				
7.1. Standards or other external requirements	Australian Children's Education and Care Quality Authority (2017). National Quality Standards.  Australian Children's Education and Care Quality Authority (2017). Guide to the National Quality Framework.  Department of Education, Employment and Workplace Relations. Childcare Provider Handbook July 2025  Early Childhood Australia (2016). Code of Ethics  Community Early Learning Australia (accessed February 2018). Sample policy 'Administration of First Aid'.  NSW Health – Blood and Body Substances Occupational Exposure Prevention guideline (Updated 7/3/2024)  National Health and Medical Research Council 2024 (6th Ed). Staying Healthy: Preventing infectious diseases in early childhood education and care services.			
7.2. Legislation or other requirements	Education and Care Services National Regulations consolidated 2017 Education and Care Services National Law Act 2010			
7.3. Internal Documentation	Medical Conditions Communication Plan Medical Conditions Risk Minimisation Plan Risk Management Policy Incident Management Policy Incident, Injury, Trauma and Illness Procedure Illness and infectious diseases Procedure Immunisation and Vaccination Procedure Notice of Serious Incidents Procedure			

8. 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			
1.0	01/09/2025	The Children's Services procedure separated to be a standalone procedure for FDC and approved by:  N Brown - Manager, Compliance, Safety & Risk	01/09/2028			

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