



Hartington C of E Primary School

"Caring & sharing as part of God's family"
"Loving our neighbour as we love ourselves" - Luke 10:27

Bodily Fluid Hygiene Policy

Signed by:

_____	Head teacher	Date: _____
_____	Chair of governors	Date: _____

Review date: January 2021

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Statement of intent

At Hartington C of E primary School, we believe that maintaining a clean and hygienic environment is an essential part of our health and safety duty. Bodily fluids are a source of infectious micro-organisms, such as bacteria and viruses. Any bodily fluids will be cleaned up immediately, by the member of staff who discovers them.

Any member of staff who discovers bodily fluids will follow the procedures outlined in this policy. The aim of the procedure outlined in this policy is to ensure pupils and staff are safe from infection.

1. Legal framework

1.1. This policy has due regard to legislation, including, but not limited to the following:

- The Health and Safety at Work etc. Act 1974.
- Reporting of Injuries, Diseases, and Dangerous Occurrences Regulations 2013.

1.2. This policy will be implemented in conjunction with the school's:

- Health and Safety Policy.
- First Aid Policy.

2. Equipment

2.1. The following equipment will be kept on the premises at all times:

- Anti-bacterial disinfectant
- Bleach
- Mops
- Dustpans and brushes
- Closable containers for disposal
- Refuse bags
- Buckets
- Short and long-handled brushes
- Plastic gloves, aprons and head covers
- Waterproof plasters

2.2. The School Business Officer will be responsible for ensuring all the equipment is fit for use and replenished.

2.3. The School Business Officer will undertake a resources inventory every six months and replenish stock if required.

2.4. Any equipment that is used during cleaning will be thoroughly cleaned, using anti-bacterial disinfectant before it is placed back into storage.

2.5. Any disposable equipment will be treated as clinical waste.

3. Contact with the skin

3.1. Any cuts or scrapes will be covered with a hypoallergenic plaster.

3.2. If the plaster starts to come off, it will be taken off and replaced with a new one, after the affected area has been cleaned and dried.

3.3. If any member of staff develops a skin irritation after dealing with bodily fluids, they will consult a doctor at the earliest opportunity.

3.4. If a member of staff is splashed by bodily fluid on an area of unbroken skin, they will wash it off immediately using hot soapy water for three to five minutes, and then rinse and dry well.

- 3.5. If staff are allergic to soap they should use plenty of plain water.
- 3.6. If any member of staff develops a skin condition, such as eczema or dermatitis, they will consult a doctor at the earliest opportunity.

4. Protective clothing

- 4.1. All protective clothing, such as disposable gloves and aprons, will be disposed of after use in the designated bin.
- 4.2. Protective clothing will not be used more than once.
- 4.3. Disposable plastic gloves will always be worn when dealing with bodily fluids.
- 4.4. When dealing with larger incidents, which cover more than 1 metre squared, a plastic apron will also be worn.
- 4.5. If any item of protective clothing is torn or damaged, it will be replaced before continuing with cleaning.

5. Spillages

- 5.1. Any spillage on a flat surface will be covered with an absorbent material, such as newspaper, kitchen roll, paper towels.
- 5.2. Where possible, the use of mops will be avoided and paper towels will be used to clean up spillages.
- 5.3. If a surface is not flat, a handful of absorbent material dipped in disinfectant solution will be used to wipe up the spillage.
- 5.4. A solution of hot water and anti-bacterial disinfectant will be used to clean the affected area.
- 5.5. Disinfectant will be added to hot water, not the water to the disinfectant. This is to minimise splash from the disinfectant.
- 5.6. If a member of staff gets disinfectant on their skin they will wash it off as soon as possible, using soap and hot water.
- 5.7. If the disinfectant is likely to damage the surface, hot water and soap will be used.

6. Extensive spillages

- 6.1. In the case of extensive spillages, the area will be cordoned off and warning signs displayed.
- 6.2. Where possible, the room will be made unavailable for use until the cleaning process is complete.
- 6.3. In cases of extensive spillages, a mop will be used to clear excess liquid before anti-bacterial disinfectant is used.

- 6.4. Any mops that are used to clear up bodily fluids will be disposed of as clinical waste after use and not reused.

7. Bodily fluids

- 7.1. Dried vomit will be soaked with hot water and anti-bacterial disinfectant, left to soften, and then disposed of as infected waste.
- 7.2. Faeces will be scraped up using a dust pan and brush and disposed of in a toilet. The dustpan and brush will be disposed of as clinical waste and not used again.
- 7.3. Diarrhoea will be treated the same way as dried vomit.
- 7.4. After bodily fluids have been disposed of the affected area will be cleaned using anti-bacterial disinfectant.

8. Disposal

- 8.1. All infected waste will be disposed of in a waste sack or container.
- 8.2. Clinical waste will never be disposed of with ordinary waste.
- 8.3. Medical waste (Needles and syringes) will be disposed of following the guidelines set by county

9. Disinfection

- 9.1. All surfaces immediately surrounding the affected area will also be cleaned, using hot water and disinfectant.
- 9.2. A warning sign will be used to show that the area is wet.
- 9.3. All areas will be dried after cleaning.
- 9.4. Any pupil's soiled clothing will be hygienically bagged and given to the parent/carer to take home. Soiled clothing will never be washed by hand by staff members.
- 9.5. Any equipment used to clean up bodily fluids, such as dust pans or shovels, will be thoroughly washed with hot soapy water and disinfectant, before they are placed back into storage (This will be at the staff's discretion).

10. Cuts

- 10.1. If a pupil or member of staff is cut by a sharp object, the cut will be encouraged to bleed by pinching the affected area.
- 10.2. If a pupil or member of staff cuts themselves, they will place the affected area under cold water.
- 10.3. A clean absorbent pad will then be applied to the wound with firm pressure until the bleeding stops; if the bleeding does not stop a first aider will be called.

Any blood around the wound will be washed off, before a hypoallergenic plaster is applied.

11. Nose Bleeds

- 11.1 If any pupil or staff member has a nose bleed all soiled materials used to stem the flow of blood will be disposed of in the clinical waste bin.
- 11.2 Staff members when dealing with a nose bleed of a pupil should wear protective clothing ie: gloves and apron if the nose bleed is excessive.

12. Reporting

- 12.1. Any incident involving injury or discovery of bodily fluids will be reported at the earliest opportunity. In the case of a nose bleeding lasting longer than ten minutes parents/carers will be contacted by phone.
- 12.2. A report form will be completed by the member of staff who dealt with the incident and returned to the School Business Officer.
- 12.3. Report forms can be found in the cupboard by the kitchen.

13. Training

- 13.1. All members of staff will be informed of the content of this policy and any training required to the cleaning of bodily fluids will be cascaded by the head teacher as part of a staff meeting.
- 13.2. The school business officer is responsible for arranging training during the induction of new staff.

14. Monitoring and review

- 14.1. The headteacher is responsible for the monitoring and implementation of this policy
- 14.2. The headteacher will review this policy every two years.