



HIV/AIDS, Hepatitis & Blood Borne Virus' Policy

Purpose

This policy will provide clear guidelines for staff and parents/guardians regarding their responsibilities in relation to HIV/AIDS and hepatitis within the St Kevin's Out of Hours School Care (OHSC) Centre. Refer to Quality Improvement and Accreditation System (QIAS), Quality Practices Guide 2005, Principles 5.5, 6.2, 6.3, 6.4.

Policy statement

1. Values

St Kevin's Out of Hours School Care (OHSC) Centre is committed to:

- Ensuring no employee, prospective employee, parent/guardian or child is discriminated against or harassed on the grounds of having, or being assumed to have, HIV/AIDS or a hepatitis infection
- Ensuring no child, parent/guardian, staff member or any other person participating in the program is excluded on the basis of HIV/AIDS or hepatitis
- Ensuring no child, staff member, parent/guardian or other person present at the centre is denied first aid at any time
- Endorsing a respectful, caring and supportive approach
- Helping to inform parents/guardians and staff about the facts of HIV/AIDS and hepatitis
- Assuring users of the centre that St Kevin's Out of Hours School Care (OHSC) Centre is aware of its responsibilities for providing a safe environment for staff, children and parents/guardians
- Assuring the community that St Kevin's Out of Hours School Care (OHSC) Centre is carrying out its responsibilities in relation to government legislation concerning HIV/AIDS, the Occupational Health and Safety Act 2004 and the Health Act 1958
- Ensuring confidentiality for staff and users in relation to the HIV/AIDS and hepatitis status of persons concerned
- Fulfilling obligations under all relevant state and Commonwealth legislation.

2. Scope

This policy applies to the staff, parents/guardians, children, volunteers and any other persons involved with **St Kevin's Out of Hours School Care (OHSC) Centre**.

3. Background and legislation

Viruses such as HIV/AIDS, which has aroused community anxiety often because of misinformation and ignorance, and hepatitis are health issues that concern everyone.

There is no obligation, legal or otherwise, for anyone to inform an employer or centre provider of their own or their child's HIV/AIDS, hepatitis B, C or other blood-borne virus status. Consequently:

- Such information must not be disclosed without the informed consent of the individual (or guardian for a person under the age of 18).
- The only reason that the parents/guardians would inform the staff of the child's blood-borne disease status would be for the benefit of the child.
- Any information received must be kept securely within the centre. Access to this information must only be by the person who has been informed.
- Information relating to the blood-borne status will be destroyed once the person leaves the employment of, or ceases to attend, the centre.
- No routine or mandatory blood-borne disease testing may be carried out on centre users or staff.
- No testing may be carried out without the informed consent of the individual and provision of pre- and post-test counselling by an accredited counsellor or qualified medical practitioner.

Relevant legislation may include but is not limited to:

- o *Education and Care Services National Regulations 2011 (ECSNR)*
- o *Education and Care Services National Law Act 2010*
- o *Equal Opportunity Act 1995*
- o *Health Act 1958*
- o *Occupational Health and Safety Act 2004.*

4. Definitions

AIDS: Acquired immune deficiency syndrome.

Department of Education and Employee workplace relations (DEEWR): federal government responsible for the licensing and regulation of out of hours school care.

HIV: Human immunodeficiency virus. This is a virus that is carried in blood and other body fluids. HIV infection is called AIDS when it becomes fully developed in the body.

Hepatitis: This is a general term for inflammation of the liver, which can be caused by alcohol, drugs (including prescribed medications) or viral infections. There are several types of viral hepatitis, namely A, B, C, D, E and G.

Infection control: The name given to a combination of basic hygiene measures to prevent the spread of infection.

NHMRC: National Health and Medical Research Council.

5. Sources and related centre policies

Sources

- DEECD, *Children's Services Guide*
- National Health and Medical Research Council 2005, *Staying Healthy in Child Care: Preventing Infectious Disease in Child Care* (4th edition)
- Hepatitis Australia: www.hepatitisaustralia.com

Centre policies

- Anaphylaxis
- Asthma
- Excursion and centre events
- Hygiene
- Illness
- Incident and medical emergency
- Management of infectious diseases
- Occupational health and safety
- Privacy

Procedures

The committee is responsible for:

- Providing access to current information for all staff and parents/guardians about:
 - o The basic facts on preventative measures for HIV/AIDS and hepatitis
 - o Where they may access further information
 - o Support services as required
- Ensuring that employees understand the concepts of discrimination and harassment
- Ensuring that staff and parents/guardians have access to materials (as required) that will enable them to implement infection control procedures; the availability of this material will be monitored during OH&S checks at the centre
- Providing, as far as practicable, a healthy and safe environment
- Displaying and complying with the step-by-step procedure on infection control relating to blood-borne viruses ([Attachment 1](#)); both existing and new staff, as part of their induction, will be made aware of this procedure
- Providing a booklet/publication on infection control to be kept at the centre

- Reviewing staff training needs in relation to infection control on an annual basis
- Ensuring that all staff first-aid qualifications are current (ECSN regulations)
- Keeping confidential any verbal or written information relating to the HIV/AIDS or blood-borne disease status and condition of any child, staff member or other person involved in the centre
- Ensuring there is an adequate supply of equipment for dealing with infection control and blood spills.

The staff are responsible for:

- Implementing infection control procedures for all body fluid spills and abrasions (refer to [Attachment 1](#), 'Step-by-step procedure for infection control relating to blood-borne viruses')
- Taking reasonable care and precautions to protect their health and safety and that of others in the workplace at all times
- Ensuring their first-aid qualifications are current at all times (ECSN regulations)
- Recording any exposure to a body fluid spill or abrasion in the accident, injury, trauma and illness book for children and the incident/injury register for staff, students and volunteers
- Notifying their employer or staff liaison officer if they believe they have been exposed to HIV/AIDS or hepatitis at the centre as soon as is practicable
- Seeking the advice of a qualified medical practitioner as soon as practicable following any incident that they believe may have resulted in exposure to HIV/AIDS or hepatitis
- Keeping confidential any verbal or written information relating to the HIV/AIDS or blood-borne disease status and condition of any child, staff member or other person involved in the centre.

The parents/guardians are responsible for:

- Informing the centre as soon as possible if their child has hepatitis A
- Complying with the communicable diseases exclusion table (refer to the Management of infectious diseases policy)
- Complying with the hygiene policy and procedures of the centre when they are at the centre or involved in centre activities.

Evaluation

In order to assess whether the policy has achieved the values and purposes, the committee will:

- In consultation with staff, review the infection control procedures and adherence to them at least annually
- If appropriate, conduct a survey in relation to aspects of the policy or incorporate relevant questions within the general parents'/guardians' survey
- Take into consideration feedback regarding infection control and the policy from staff, parents/guardians and other users of the centre, and adjust infection control procedures, or provide additional information on the subject, if appropriate
- Regularly monitor research to ensure the policy meets current standards and practices.

Attachments

[Attachment 1](#): Step-by-step procedure for infection control relating to blood-borne viruses

[Attachment 2](#): Relevant publications and training providers

[Attachment 3](#): Background information

Authorisation

This policy was approved by the **St Kevin's Out of Hours School Care (OHSC) Centre** committee of management at a committee meeting on **18th October 2016**.

Review date: **August 2018**

Attachment 1 - Step-by-step procedure for infection control relating to blood-borne viruses

This procedure is based on advice provided by the Department of Education, Employment and Training, the Department of Human Services and the NHMRC.

Blood spills

Anyone working with the children, who may need to respond to an incident involving blood, must cover any cuts, sores or abrasions on their hands and arms with waterproof dressings while at the centre.

Equipment and procedures for managing blood spills and providing first aid for bleeding

1. Cleaning and removal of blood spills

Equipment (could be kept in an easily accessible, clearly labelled bucket)

- Disposable gloves
- Disposable plastic bags (preferably ziplock)
- Detergent/bleach
- Disposable towels
- Access to warm water

Procedure

- Put on disposable gloves.
- Cover the spill with paper towel.
- Carefully remove the paper towel and contents.
- Place towel and gloves in disposable plastic bag, seal bag and place it in rubbish bin inaccessible to children.
- Put on new gloves and clean the area with warm water and detergent/bleach and allow to dry.
- Place gloves into disposable plastic bag, seal bag and place it in rubbish bin inaccessible to children.
- Wash hands in warm, soapy water.

2. Providing first aid for children who are bleeding

Equipment (could be kept in an easily accessible, clearly labelled bucket)

- Disposable plastic bags
- Disposable gloves
- Waterproof dressings
- Disposable towels
- Detergent
- Access to warm water

Procedure

- Adult treating child to cover any uncovered cuts, sores or abrasions on arms and hands with waterproof dressings.
- If time, put on disposable gloves. If gloves are not available, get someone who is wearing gloves to take over from you as soon as possible. Then wash and dry your hands.
- When cleaning or treating a child's face, which has blood on it, ensure you are not at eye level with the child as there is a chance, through their crying or coughing, for their blood to enter your eyes or mouth. If blood does enter your eyes, rinse them while they are open, gently but thoroughly for at least 30 seconds. If blood does enter your mouth, spit it out and then rinse the mouth several times with water.
- Raise the injured part above the level of the heart, unless you suspect a broken bone.
- Clean the affected area and cover the wound with waterproof dressing.
- Remove gloves and place in disposable plastic bag, seal the bag and place it in a rubbish bin inaccessible to children.
- Wash hands in warm soapy water.
- Contaminated clothing should be removed and stored in leak-proof disposable plastic bags and given to the parent/guardian collecting the child for washing.

3. Equipment and procedures for the safe disposal of discarded needles and syringes

Equipment (could be kept in an easily accessible, clearly labelled bucket)

- Disposable gloves
- Long-handled tongs
- Disposable plastic bags
- 'Sharps' syringe disposal container; or rigid-walled, screw-top, puncture-resistant plastic container available for free from local council, who may also provide free training to staff on the collection of sharps

Procedure

- Put on disposable gloves.
- Do not try to re-cap the needle or to break the needle from the syringe.
- Place the disposal container on the ground next to the syringe.
- Pick up the syringe from the middle, keeping the sharp end away from you at all times.
- Place the syringe, needle point down, in the disposal container and securely place lid on container.
- Repeat this procedure to pick up all syringes and/or unattached needles.
- Remove gloves and place gloves in disposable plastic bag, seal the bag and place it in a rubbish bin inaccessible to children.
- Clean the area as outlined in the procedures for managing blood spills
- Wash hands in warm, soapy water and dry.

Under no circumstances should work-experience students or children be asked or encouraged to pick up needles/syringes.

Syringe disposal containers or syringes must not be put in normal waste disposal bins. Advice on the disposal of syringes can be accessed from:

- The Disposal Help Line on 1800 552355 for the location of the nearest needle exchange outlet or public disposal bin
- The environmental officer (health surveyor) at your local municipal/council offices.

4. Needle stick injuries

The Department of Human Services has indicated that the risk of infection from needle stick injury is low and should not cause alarm. The following procedures should be observed in case of needle stick injury:

- Stay calm and encourage the wound to bleed (gently squeeze).
- Wash the affected area with cold running water and soap.
- Dry area, apply antiseptic to the wound and cover with a waterproof dressing if necessary.
- For incidents involving a staff member, report the injury to the committee/staff liaison officer as soon as practicable. The incident will need to be documented in the incident report book.
- If for a child, contact the parents/guardians as soon as practicable and provide a report to the DEEWR.
- See a doctor as soon as possible and report the circumstances of the injury.

Attachment 2 - Relevant publications and training providers

Organisation	Publication/Service
Department of Health Public Health GPO Box 4057 Melbourne Vic. 3001 Tel: 1300 651 160	<ul style="list-style-type: none"> • AIDS Your Questions Answered • Public Health—Hepatitis A • Hepatitis B—the facts • Hepatitis C—the facts
www.publications.gov.au	A site that provides access to a listing of Australian government publications
Information Victoria 505 Little Collins Street Melbourne Vic. 3001 Tel: 1300 366 356	<ul style="list-style-type: none"> • Occupational Health and Safety Act 2004. • Equal Opportunity Act Reprint 5 – 10 May 2007
Hepatitis C Victoria Suite 5, 200 Sydney Road Brunswick Vic. 3056 Tel: (03) 9380 4644 Toll free: 1800 703 003 Website: www.hepcvic.org.au/	Resource material titles and quantities of resources change, so it is best to check the Resource Order Form for up-to-date resource availability Please note that postage costs for bulk orders may need to be covered
Community Child Care Co Op Ltd (NSW) Unit 21/142 Addison Rd Marrickville NSW 2204 Tel: (02) 8922 6444 Website: www.csns.org.au	For resources and model policies
ECA –Victorian Branch PO Box 2080 Richmond South Vic. 3121 Tel: (03) 9427 8474 Toll free: 1800 356 900 Website: www.earlychildhoodaustralia.org.au	Control of infection in child care settings (available on the website)
Training Organisation	Training for staff
Red Cross 23–47 Villiers Street North Melbourne Vic. 3051 Information hotline: 1800 246 850	<ul style="list-style-type: none"> • Training across Victoria • First-aid courses
St John's Ambulance 170 Forster Road Mount Waverley Vic. 3149 Tel: (03) 8588 8588 Website: www.stjohnvic.com.au	First aid

Attachment 3 - Background information

Reviewing/changing the policy

Any review of this policy needs to ensure compliance with legislation. Where St Kevin's Out of Hours School Care (OHSC) Centre is considering changing this policy, seek legal advice to ensure compliance with all relevant legislation. The relevant sections of the government Acts pertaining to HIV/AIDS and discrimination are listed below.

St Kevin's Out of Hours School Care (OHSC) Centre has responsibilities as an employer, under *the Equal Opportunity Act 1995*, the *Occupational, Health and Safety Act 2004* and the *Health (General Amendment) Act 1988*.

Legislation

1. Equal Opportunity Act 1995

Part 2, Section 6 prohibits discrimination against applicants and employees on the basis of impairment. The Act defines impairment as: including the presence in the body of organisms that may cause disease.

Section 25 of the Act states that 'if the employer genuinely believes that the discrimination is necessary to protect the physical, psychological or emotional wellbeing of the children', an exception may apply. The employer also needs to consider its responsibility to protect employees who may be infected with HIV/AIDS or hepatitis from discrimination in the workplace.

2. Occupational Health and Safety Act 2004

- Section 21(1): 'An employer shall provide and maintain, so far as is practicable for employees, a working environment that is safe and without risks to health'
- Section 21(2): Requires an employer to provide adequate facilities for the welfare of employees
- Section 25(1): 'While at work, an employee must (a) take care of his or her own health and safety and the health and safety of anyone else who may be affected by his or her acts or omissions'
- Section 25(2): An employee shall not '(b) wilfully place at risk the health or safety of any person at the workplace'.

Vicarious liability

St Kevin's Out of Hours School Care (OHSC) Centre will be aware that they would generally be liable for any contravention of the equal opportunity and discrimination legislation by employees or people acting as their agents. If there is a contravention of the legislation, it is important for St Kevin's Out of Hours School Care (OHSC) Centre to be able to demonstrate that they took reasonable precautions to prevent the contravention of the legislation, such as the provision of staff education and training.

3. Health Act 1958

Under Section 119, the spread of infectious disease should be prevented or limited without imposing unnecessary restrictions on personal liberty and privacy. Section 128 provides that a person who, in the course of providing a service, acquires information that a person has been or is required to be tested for HIV, or is infected with HIV, must take all reasonable steps to develop and implement systems to protect the privacy of that person. The maximum penalty for breaching this section of the Act is 50 penalty points as of July 2006.

Hepatitis

This is a general term for inflammation of the liver, which can be caused by alcohol, drugs (including prescribed medications) or viral infections. There are several types of viral hepatitis, namely A, B, C, D, E and G.

Hepatitis A

Hepatitis A (HAV) is an acute (short-term but quite severe) viral infection of the liver caused by the hepatitis A virus. The hepatitis A virus can survive both in the environment on hands for several hours and in food kept at room temperature for considerably longer and is relatively resistant to detergents.

It is primarily transmitted through faeces, when faeces get onto the hands of people and then moves from hand to mouth; for example, touching nappies, linen and towels soiled with the faeces of an infectious person. It can also be spread through contaminated water or food, when faeces get into the water supply or food (NHMRC 2005).

Symptoms can be debilitating, but most people infected with hepatitis A recover completely and once you have had hepatitis A you cannot get it again.

To avoid the transmission of hepatitis A:

- Always wash hands thoroughly after going to the toilet, before preparing and eating food, and after handling soiled linen, such as nappies
- Avoid sharing food, cutlery, crockery, cigarettes and drinks with other people
- When travelling in regions with poor sanitation, drink bottled water and avoid eating food that has been cleaned or prepared using contaminated water
- In a natural disaster, listen to warnings about contaminated drinking water and follow any instructions issued by the relevant authorities
- Consider being vaccinated (see below for more details).

Vaccination against hepatitis A is available for people aged two years and older, and the NHMRC (2005) recommends HAV vaccination for staff working with children, particularly those who work with children who are not toilet trained. The NHMRC (2003) recommends vaccination for child day care and preschool personnel:

'Occupationally acquired HAV is not uncommon occurrence among child day care and preschool personnel.

Vaccination is strongly recommended for these staff, and must be considered as a standard workplace health and safety practice'.

Hepatitis B

Hepatitis B (HBV) is a serious public health problem as it is one of the most common infectious diseases in the world. Hepatitis B is a virus that can be found in blood and body fluids, including breast milk, saliva, vaginal secretions and semen and causes inflammation of the liver. The majority of people infected with hepatitis B as adults will recover completely; however, chronic (long-term) infection can develop in the majority of people infected with hepatitis B early in life.

Transmission is through direct contact with blood and blood products and through saliva, semen and vaginal fluids. It is not spread through either food or water or normal social contact, such as kissing, sneezing or coughing, hugging or eating food prepared by a person with hepatitis B.

The most common ways hepatitis B is spread include:

- Sexual contact
- Sharing of injecting equipment
- Needle stick injuries in the health care setting
- Reuse of unsterilised or inadequately sterilised needles
- Child-to-child transmission through household contact, such as biting
- Sharing personal items, such as razors, toothbrushes or nail clippers.

There is no legal obligation for people with hepatitis B to tell their employer. There is no specific employment law for people with hepatitis B, but some protection is provided under the Disability Discrimination Act (1992) (Cwlth) and individual state and territory Anti-discrimination or Equal Opportunity Acts.

To avoid transmission of hepatitis B:

- Consider being vaccinated; adult vaccination against hepatitis B involves three doses given over six months
- Practice safe sex (use a condom)
- Wash hands after touching blood or body fluids

- Wear disposable gloves if giving someone first aid, or cleaning up blood or body fluids
- Avoid sharing toothbrushes, razors, needles, syringes, personal hygiene items and grooming aids or any object that may come into contact with blood or body fluids
- Use new and sterile injecting equipment for each injection
- Cover all cuts and open sores with a band-aid or bandage
- Wipe up any blood spills and then clean the area with household bleach
- Throw away personal items such as tissues, menstrual pads, tampons and bandages in a sealed plastic bag
- Immediate family members and sexual contacts of people with chronic hepatitis B should be vaccinated against hepatitis B.

Exclusion is not necessary. The NHMRC (2003) advises:

‘Staff of child day centres will normally be at minimal risk of HBV. If advice on risk is sought, the inquiry should be directed to the local public health authority.’

Hepatitis C

Hepatitis C is a virus that causes liver inflammation and liver disease. It is a slow-acting virus and, for most people, does not result in serious disease or death. Primarily transmitted by blood–blood contact, great care needs to be taken when dealing with blood spills or blood products.

There is no vaccine for hepatitis C yet

Hepatitis D

Hepatitis D is a liver disease caused by the hepatitis D virus, which is a defective virus that needs the hepatitis B virus to exist. It is found in blood and although the most severe form of viral hepatitis, it is not a common cause of liver disease in Australia. The mode of transmission and control is similar to Hepatitis B.

Infection with hepatitis D can be prevented by the hepatitis B vaccine.

Hepatitis E

Hepatitis E can be transmitted from contaminated water or from person to person by the faecal–oral route.

Although little is known about this virus, hepatitis E causes an acute (short-term) illness and does not develop into a chronic (life-long) infection; however, the infection is more severe among pregnant women in the third trimester. It is found most commonly in developing countries, especially India, Asia and Central America.

Prevention relies on the provision of clean drinking water and good personal hygiene.

Currently, there is no vaccine available for the prevention of hepatitis E.

Hepatitis G

Hepatitis G is a newly discovered form of liver inflammation caused by hepatitis G virus (HGV), also called hepatitis GB virus—a distant relative of the hepatitis C virus. Little is known about the frequency of HGV infection, the nature of the illness or how to prevent it. What is known is that transfused blood containing HGV has caused some cases of hepatitis. What little is known about the course of hepatitis G suggests that illness is mild and does not last long, with no evidence of serious complications. However, it is possible that, similar to other hepatitis viruses, HGV can cause severe liver damage, resulting in liver failure. When more patients have been followed up after the acute phase, it will become clearer whether HGV can cause severe liver damage.

Since hepatitis G is a blood-borne infection, prevention relies on avoiding any possible contact with contaminated blood.

HIV/AIDS

HIV is a virus that attacks the body's immune system. AIDS is a severe, life-threatening disease that represents the late clinical stage of infection with HIV.

Infection with HIV does not mean that a person has AIDS.

Social contact such as hugging, shaking hands, sharing household items, toilet seats, swimming pools or pets with a HIV-infected person carries no risk of transmission; however, HIV can be transmitted by:

- Unprotected sexual intercourse with an infected person
- Inoculation with infected blood, blood products and through transplantation of infected organs, bone graft, tissue or semen

- An infected woman to the foetus during pregnancy or breastfeeding
- Needle stick injuries or other exposure to blood and body fluids by health care or emergency workers.
- Prevention controls include:
- Public education
- Use of appropriate infection control.
- There is currently no vaccine or cure for AIDS, although there are drugs that work against HIV and are thought to delay the progression to AIDS.

Training

Training in infection control can be provided on the job, by other staff or by an external source.

References

NHMRC 2003, *Australian Immunisation Handbook*: A copy of this publication is available at www.immunise.health.gov.au or by contacting the Immunisation infoline on 1800 671 811 or by emailing handbook@health.gov.au

NHMRC 2005, *Staying Healthy in Childcare: Preventing Infectious Diseases in Childcare, 4th edition*

The Blue Book: Hard copies may be purchased from Information Victoria, 356 Collins Street Melbourne 3000; telephone: 1300 366 356 (local call cost) or online at Information Victoria Bookshop (www.bookshop.vic.gov.au/)

AIDS/STD Unit, Victorian Government Department of Health & Community Services, *AIDS: Your Questions Answered*