INFECTION PREVENTION AND CONTROL GUIDELINES
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**Acknowledgement**

Advice provided by Public Health Services - Tasmanian Infection Prevention and Control (TIPCU)
tipcu@dhhs.tas.gov.au
I. Introduction – preventing infection

Infections are caused by micro-organisms (or germs). These include viruses, bacteria, protozoa and fungi. Germs are not visible to the naked eye. Many survive and multiply on and in our bodies. Some can survive and multiply in the environment. Germs can be transmitted in various ways depending on the particular germ:

- Directly between people via coughing and sneezing, or by blood or body fluids that come into contact with broken skin or mucous membranes such as the lining of the mouth or eyes.
- Indirectly via surfaces, items, food or water that are contaminated with germs.

Germs enter the body by being breathed in, being swallowed or via damaged skin or mucous membranes.

Good hygiene and basic infection control procedures help to reduce the risk of transmitting germs. These precautions were originally devised for use in health care and are known as Standard Precautions, but can be adapted for use in a variety of settings.

Making infection control procedures part of everyone’s routine will reduce the risk of transmitting infectious illnesses between staff, students and visitors.

The following infection control guidelines provide advice for schools regarding:

- Hand Hygiene
- Cough and Respiratory Hygiene
- Personal Protective Equipment – gloves
- Management of blood and body fluid spills
- Disposal of used needles and syringes, discarded needles and syringes and discarded used condoms
- Management of needlestick injuries and body fluid exposures
- Non recommended procedures within schools
- Cleaning of shared equipment
- Hygiene and food handling
- Animals
- Sandpits.
2. Hand hygiene

Hand hygiene refers to hand washing and/or the use of alcohol hand rubs. Hand hygiene is one of the most important ways of preventing the spread of infection. Washing hands physically removes dirt and germs while alcohol hand rubs reduces the amount of germs on your hands but does not remove dirt.

Hands must always be washed with soap and running water:
- When they are visibly dirty
- Before and after preparing food
- After going to the toilet
- After contact with blood or body fluids
- After touching animals
- After changing nappies.

Hands must be washed with soap and running water or have an alcohol hand rub applied:
- After coughing, sneezing, or blowing your nose
- Before eating
- Before and after helping someone with meals
- Before and after helping someone take medication.
3. Cough and respiratory hygiene

Covering your mouth and/or nose while coughing or sneezing stops you from dispersing respiratory secretions, that may contain germs, into the air.

Any students or staff with any symptoms of a respiratory infection must follow or be instructed to follow cough and respiratory hygiene:

- Cover your nose/mouth with disposable single-use tissues when coughing, sneezing, wiping and blowing your nose
- Dispose of tissues in the nearest waste bin after use
- If no tissues are available, cough or sneeze into your inner elbow rather than your hand
- Wash hands or use an alcohol hand rub after coughing, sneezing, or blowing your nose.
4. Personal protective equipment – gloves

Staff and/or students must wear non-sterile, single use gloves to protect themselves from contact with body fluids such as blood, vomit, urine and faeces, but they do not replace the need for hand hygiene. Gloves can be found in the school’s First Aid kit.

- Perform hand hygiene immediately before putting on and immediately after removing gloves.
- Dispose of gloves immediately after use.
- Situations where gloves will be required are:
  » Cleaning up a blood or body fluid spill
  » Dealing with a student or staff member who is actively bleeding (i.e. a blood nose or laceration or following a needlestick injury)
  » Assisting a student with meals as required
  » Assisting a student with toileting
  » Changing a nappy.
5. Management of blood or body fluid spills

Overview
Any body fluid spills must be safely and promptly managed by cleaning and disinfecting to ensure students and staff do not have bare skin or mucous membrane contact with the body fluid.

Body fluids dealt with in this procedure include blood, vomit, urine and faeces.

Procedure
The following procedure must be observed when cleaning up a body fluid spill of blood, vomit, urine or faeces.

Equipment required:
- Disposable gloves
- Disposable paper towels
- Bucket and mop
- Detergent and water
- Bleach - 25mls of household bleach (4% available sodium hypochlorite) added to 975mls water (approximately 2 tablespoons of bleach mixed with 4 cups of water)
- Vomit Control absorbent powder (for vomit on carpeted areas only).

5.1 Indoor impervious surfaces – e.g. floors, benches, tables, desks
- Put on disposable gloves.
- Wipe up the spill using disposable paper towels.
- Place used paper towels in plastic waste bag.
- Clean area with detergent and water:
  » If using paper towels, dispose of used towels in waste bag
  » If using mop and bucket, wash both with detergent and water followed by soaking with bleach solution for 30 minutes and then rinse and leave to dry.
- Wipe over the surface with bleach solution, and leave to dry.
- Wash hands.

5.2 Outdoor surfaces – e.g. grass, asphalt, gravel
- Put on disposable gloves.
- Remove any solid material using paper towels and dispose of used paper towels into waste bag.
- Remove disposable gloves and dispose of into waste bag.
- Seal waste bag and dispose of into general waste.
- Hose down the area to remove any remaining residue.
- Wash hands.
5.3 Carpeted areas

• Put on disposable gloves.
• For vomit - apply Vomit Control absorbent powder to soiled area, wipe up the powder and absorbed fluid using disposable paper towels, and dispose of into waste bag.
• For all other body fluids - wipe as much of the spill up as possible using disposable paper towels and dispose of used paper towels into waste bag.
• Remove disposable gloves and dispose of into waste bag.
• Seal waste bag and dispose of into general waste.
• Wash hands.
• Steam clean carpet as soon as possible.

5.4 Contaminated tools or equipment

• Put on disposable gloves.
• Wipe excess body fluid off the tool or piece of equipment.
• Place used paper towels in plastic waste bag.
• Clean area with detergent and water using paper towels.
• Wipe over the surface with bleach solution, and leave to dry.
• Discard disposable gloves into waste bag.
• Seal waste bag and dispose of into general waste.
• Wash hands.
6. Disposal of used needles and syringes, discarded needles and syringes and discarded used condoms

- Any used needles and syringes, discarded needles and syringes, or used condoms used on or found on Department of Education property must be disposed of safely.
- Used needles must not be recapped (apart from when a person is using their personal insulin device which can be recapped by that individual).
- Students must be instructed not to touch a discarded needle or syringe or used condom.
- If a student finds a discarded needle or syringe or used condom, they must notify a staff member immediately.
- Staff members must know the safe procedure for safe disposal of discarded needles, syringes and condoms.
- Used and/or discarded needles and syringes must be placed into a sharps container that complies with either of the following Australian Standards - AS 4031-1992 Non-Reusable Containers for the Collection of Sharp Medical Items used in Healthcare Areas, or AS/NZS: 4261-1994 Reusable Containers for the Collection of Sharp Items used in Human or Animal Medical Applications. These containers are yellow coloured, rigid-walled containers and labelled with the Black Biological Hazard and clearly labelled as ‘Biohazard’.
- Glass bottles or jars are not recommended for use as sharps disposal units because they can break.

6.1 Disposal of used needles and syringes

- A person using any needle and syringe for medical purposes on Department of Education property is responsible for the safe disposal of the used equipment into an Australian Standard compliant sharps container.
- Examples of medical procedure for the purpose of this procedure are:
  » Self administration of a subcutaneous injection of insulin.
  » Self administration OR emergency administration of adrenaline.
  » Self removal of a splinter using a single use needle or probe.

6.2 Disposal of discarded needles and/or syringes

Equipment required:
- Disposable gloves
- Sharps container
- Forceps or tongs
- Sink with detergent and water to wash forceps or tongs
- Paper towels.

The staff member must follow the disposal process:
- Place sharps container next to needle and/or syringe.
- Remove lid from sharps container.
- Put on disposable gloves.
- Using tongs, pick up the needle and/or syringe and place into sharps container.
- Seal container.
- Remove disposable gloves and discard into waste bin.

Continued next page
• Wash hands.
• Contact contracted waste company to pick up and replace used sharps container.
• Wash tongs with detergent and water and allow to air dry or dry with paper towels.
• Replace the used sharps container.

6.3 Disposal of discarded used condoms

Equipment required:
• Disposable gloves
• Plastic waste bag
• Tongs
• Sink with detergent and water to wash tongs.

The staff member must follow the disposal process:
• Place waste bag next to the condom.
• Don disposable glove.
• Using forceps or tong, pick up the condom and place into waste bag.
• Remove gloves and place into bag.
• Seal bag by tying.
• Dispose of bag into general waste.
• Wash hands.
• Wash tongs with detergent and water and allow to air dry or dry with paper towel.
7. Management of needlestick injuries and body fluid exposures

7.1 Overview

- All needlestick injuries or body fluid exposures that occur on Department of Education property must be safely and promptly managed.
- All needlestick injuries and body fluid exposures must be reported to a staff member as soon as possible after they occur.
- Treat all needlestick injuries and body fluid exposures as a potential risk for transmission of blood borne viruses.
- Injuries must be reported to a doctor as soon as possible after the injury to ensure appropriate management and follow up of the recipient.
- The procedure is as follows:
  1) First Aid
  2) Reporting
  3) Follow up.

7.2 Definitions for the purpose of this management process

Needlestick injury – a skin puncture injury sustained from a discarded or previously used needle.

Body Fluid – blood, vomit, urine, faeces.

Body fluid exposure – blood splash or body fluid splash onto any mucous membrane or non-intact skin.

Mucous membrane – the lining of various body openings e.g. the eye(s) or mouth.

Non-intact skin – skin that has an uncovered cut or abrasion sustained within the previous 24 hours OR an uncovered cut or abrasion that is bleeding at the time of the incident.

Recipient – the person who sustains the injury or exposure.

7.3 Equipment required for staff member assisting recipient:

- Disposable gloves
- Running water
- Soap
- Normal saline eye wash solution for eye splashes.
7.4 First aid

**Needlestick injury**
- Put on disposable gloves.
- Ask or assist recipient to wash puncture site with soap and running water.
- Remove gloves and wash hands.
- There is no benefit in squeezing or applying a disinfectant to the puncture site.

**Eye or mouth splash**
- Put on disposable gloves.
- Eyes – gently flush the recipient’s eye/s with normal saline eye wash solution.
- Mouth – ask or assist recipient to rinse out mouth with water.
- Remove gloves and wash hands.

**Splash to non-intact skin**
- Put on disposable gloves.
- Ask or assist recipient to wash site with soap and running water.
- Remove gloves and wash hands.

7.5 Incident reporting

- All incidents must be reported to:
  » Doctor appropriate to the circumstances
  » School Principal
  » Parents/Guardian/Next of kin in the case of students.

Complete a DoE [Online Incident Report](#) within 24 hours of the incident.

Notify Public Health Services on 1800 671 738 as soon as it is realised that two or more persons have been exposed to blood or body fluids via the same needlestick injury or mucous membrane exposure.

7.6 Follow up

The recipient must be advised to have a follow up with a doctor; blood testing and counselling.
8. Procedures not to be conducted within schools

The following procedures must not be conducted in schools by staff or students because they pose a risk of transmitting infection:

- Sharing of needles or sharps
- Blood group testing
- Blood testing for any other purpose except for blood glucose testing as outlined in ‘Exclusions’
- Testing of any body fluids
- Mouth to mouth or mouth to nose expired air resuscitation training on other people.

EXCLUSIONS to these procedures include:

- Routine blood glucose testing carried out by a student or staff member on themselves within Department of Education grounds, as part of their normal diabetes management
- Emergency blood glucose testing carried out on a student by a trained staff member in the event of a diabetic emergency.
9. Cleaning of shared equipment

9.1 CPR training mannequins

First aid training in the use of cardiopulmonary resuscitation (CPR) and expired air resuscitation (EAR) must only be conducted by an authorised trainer or training agency that has been approved by the Department of Education to conduct the training.

These trainers are responsible for the maintenance, cleaning and disinfection and/or disposal of the mannequin, facemasks, face or mouth-nose pieces and lung bags.

9.2 Musical instrument mouthpieces

Each student should have their own mouthpiece for a musical instrument but where this is not possible, mouthpieces must be washed in warm water and detergent and dry between uses by different students.

9.3 Asthma spacers in first aid kits

These are single person use items and must be replaced after emergency use. Contact the Asthma Foundation of Tasmania on 1800 278 462 to order.

9.4 Shared items contaminated with blood (i.e. sports equipment)

Clean using the ‘Management of blood and body fluid spills’ process.
10. Hygiene and food handling

This section is not a comprehensive food safety management plan or guide but outlines some good basic hygiene practices that must be followed when handling and preparing food to assist in preventing foodborne illness.

- Good hygiene practices when handling food include:
  - Washing hands before and after handling any food
  - Washing hands between contact with raw food that needs to be cooked before eating, raw food like salad or fruit, and cooked food
  - Keeping food preparation surfaces clean.

- Prevent cross-contamination between raw food that needs to be cooked before eating, food like salad or fruit, and cooked food by:
  - Keeping raw and cooked foods separate
  - Use separate utensils such as cutting boards and knives, for raw and cooked food
  - Do not keep raw food above cooked food in the fridge
  - Store potentially hazardous food such as meat, dairy products, prepared meals, cooked rice and pasta, processed vegetables etc, in a refrigerator at a temperature below 5°C
  - Staff and students with diarrhoea or vomiting must not prepare food for other staff or students until their symptoms have ceased for at least 48 hours.
  - Vocational Education and Training (VET) catering classes that prepare food for sale and school canteens are to be formally registered as Food Businesses under the Food Act 2003.
11. Animals

Illnesses transmitted from animals to humans are known as zoonotic diseases or zoonoses. Zoonoses can be transmitted via bites, contact with an animal, contact with their excreta and other body fluids and via contact with an animal enclosure, bedding and food.

In the context of this document, animal/s refers to tame or contained animals that reside on Department of Education property and/or animals that have sanctioned visits to Department of Education Property. ‘Animal/s’ refers to, but is not limited to, birds including poultry, reptiles, cats, dogs, sheep, cattle, horses, pigs, fish, crustaceans, goats, frogs and tadpoles.

To reduce the risk of zoonotic diseases:

- Perform hand hygiene with soap and running water
  - after contact with animals and/or their enclosures, bedding or food
  - after contact with animal products e.g. after collecting and handling eggs.
- Do not encourage animals to lick children’s hands or faces. If this occurs, ensure the child washes their hands and/or face with soap and running water.
- Clean up animal faeces promptly and do not allow animals to contaminate sandpits, soil, pot plants and vegetable gardens.
- Clean fish tanks, bird cages or other animal pens regularly as per a written schedule for each type of animal. Cleaning must not be done by young children of primary school age.
- Wear single use disposable gloves when cleaning animal pens, cages or tanks or when disposing of animal faeces.
- Lightly dampen the floor of animal cages before cleaning to prevent inhalation of dust.
- External contractors who bring in animals for school visits must ensure that they provide students with advice to perform hand hygiene after touching the animals and ensure that facilities to perform hand hygiene are within the close vicinity of the animals (i.e. either handwashing facilities or containers of alcohol hand rub).
- More detailed information on guidelines for animal contact can be found in the following documents:
  - Animal contact guidelines – reducing the risk to human health, 2014, Queensland Government
  - Animal Contact Guidelines – reducing the risk of illness associated with animal contact, 2nd edition, 2015, South Australian Department for Health and Ageing (Health Protection Branch and Communicable Disease Control Branch).
12. Sandpits

Sandpits can become a source of infection when animals or children use them as toilets. They need to be well maintained and kept clean.

- Closely cover sandpits with shade cloth or fine chicken wire when not in use to prevent animals and sharp or dangerous objects from getting in. Plastic covers are not recommended as they can keep the sand damp.
- Rake over the sand before each use to screen for foreign objects.
- Hose with plain tap water regularly to lift and remove dirt and rubbish.
- Remove sand that is contaminated with animal or human faeces, and/or blood or other body fluids.
  » Use a shovel and dispose of sand into a plastic bag
  » Rake over the remaining sand and leave the sand exposed
  » If the contamination is extensive such as a large body fluid spill, remove and replace all of the sand.
- Adults and children must wash their hands with soap and water before and after playing in a sandpit.
13. Issues of public health importance

In some circumstances, issues or incidents may arise where the school is advised to seek guidance from the Public Health Services on 1800 671 738.

These issues are:

1. A needlestick injury or body fluid exposure where two or more persons are involved in the same incident.

2. Gastroenteritis where there is:
   - An outbreak of diarrhoea and/or vomiting following a school event, class or outing; or
   - An outbreak of diarrhoea and/or vomiting related to a food or water borne source; or
   - Ongoing transmission of gastroenteritis within a school.

For confirmed or suspected case/s of other notifiable diseases in a student or staff member

- Doctors and laboratories are required by the Public Health Act 1997 and associated guidelines to notify Public Health Services when they diagnose or suspect a number of infectious diseases including:
  - Measles
  - Meningococcal disease
  - Mumps
  - Pertussis (Whooping Cough)
  - Rubella (German Measles)
  - Tuberculosis
  - Hepatitis A


- For many notifiable diseases, the illness is managed by the treating doctor and often simply involves the person being excluded from school or work until they are well and no longer infectious to others.
- For some notifiable diseases, the public health response may involve Public Health Services contacting the school to provide advice or recommend particular actions.
- If a school is aware of a potentially infectious illness involving a student or staff member, it is most important to ensure the student or staff member has been assessed by a doctor.
- Nurses and doctors from Public Health Services are always available to provide advice about any notifiable disease, including those in the above list.
# 14. Communication protocols

<table>
<thead>
<tr>
<th>Issue</th>
<th>Contact</th>
<th>Time frame</th>
</tr>
</thead>
<tbody>
<tr>
<td>Needlestick injury or body fluid exposure – two or more persons involved in the same incident.</td>
<td>Local Doctor <strong>AND</strong> Appropriate senior officer: Learning Services General Manager 0418 333 385 (South) 0409 584 652 (North) Director of LINC Tasmania 0417 401 947 <strong>AND</strong> Public Health Services 1800 671 738</td>
<td>As soon as possible after the incident but no longer than 24 hours.</td>
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<td>Gastroenteritis - an outbreak of vomiting and/or diarrhoea:</td>
<td>Public Health Services 1800 671 738</td>
<td>Schools must notify Public Health as soon as possible.</td>
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<tr>
<td>• Following a school event, class or outing</td>
<td><strong>OR</strong> Related to a food or water borne source</td>
<td></td>
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<tr>
<td>• Ongoing transmission of gastroenteritis within a school</td>
<td><strong>OR</strong> Related to a food or water borne source</td>
<td></td>
</tr>
<tr>
<td>One or more confirmed or suspected cases of the following diseases:</td>
<td>The public health response may involve Public Health Services contacting the school to provide advice or recommended actions.</td>
<td>Public Health Services will notify a school if there is a confirmed or probable case who is attending that school when information regarding case management and contact tracing is needed. They can provide resources for parents.</td>
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<tr>
<td>• Measles</td>
<td><strong>OR</strong> Related to a food or water borne source</td>
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<tr>
<td>• Meningococcal disease</td>
<td><strong>OR</strong> Related to a food or water borne source</td>
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<tr>
<td>• Mumps</td>
<td><strong>OR</strong> Related to a food or water borne source</td>
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<tr>
<td>• Whooping cough (pertussis)</td>
<td><strong>OR</strong> Related to a food or water borne source</td>
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15. References


