



**INFECTIOUS DISEASES CONTROL PROCEDURE**

This Procedure must be read in conjunction with Girl Guides Victoria Policy *HIV AIDS and other Infectious Diseases (GO4)*.

Policy number	GP 4
Subject	Infectious Diseases Control
Principles	Girl Guides Victoria has a duty of care to its members and supporters to ensure they received appropriate treatment related to infectious disease.
Definitions	<p>Infectious diseases such as common cold, influenza, measles, rubella and others have been present in the work place and school environment for as long as there have been such places.</p> <p>In addition there is public awareness of some of the more serious blood borne infectious diseases such as hepatitis B, hepatitis C and HIV. Infected blood and blood products are the major source of possible transmission of these. Transmission is very infrequent and usually involves injuries with sharp instruments such as needles contaminated with infectious blood. First aid transmission of these infections has not been documented.</p>
Procedures under this policy	<p>Infection control and prevention uses a risk management approach to minimize or prevent the transmission of infection.</p> <p>1. Standard Precautions are practices required for basic infection control. Standard precautions should include good hand hygiene (washing hands before and after putting on gloves), use of protective equipment and appropriate handling of waste. See Appendix B</p> <p>1.1 Blood and other body substances Use appropriate barrier precautions (gloves) whenever exposure to blood, body fluids or moist body surfaces occurs (refer First Aid Safety Guidelines Appendix A “Procedures for Cleaning Up and Disposing of Blood Spills or Blood-Stained Material”).</p> <p>1.2 Needles and syringes Used disposable syringes, needles and other sharp items should be placed in rigid-wall puncture containers. These containers should be located as close as practicable to the area where usage is occurring.</p> <p>1.3 Linen and disposable items All disposable items which are visibly soiled with potential infectious material should be considered “infectious waste”, identified as such and</p>

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	<p>kept separate from other linen. Infectious linen should be transported in leak proof bags. Gloves should be worn when handling infectious linen.</p> <p>1.4 Emergency resuscitation There is no reason to withhold resuscitation from anyone but the decision whether to use direct mouth to mouth resuscitation is an individual one for each for first aid personnel. It is recommended that Resuscitation face-shields&amp;/masks be available in all first aid kits. These resuscitation devices are for use by first aiders trained and certified to use the specific equipment in question.</p> <p>1.5 Infected personnel The parents of injured or ill members have a responsibility to advise treating personnel of any known or possible communicable disease, which could be transmitted in these circumstances. This also applies to any injured or ill volunteers. The individuals right to privacy and confidentiality must be respected.</p> <p>2. Blood Borne disease. People are advised to consult their doctor about immunization if they are performing first aid roles and which immunisations are appropriate. If exposure to blood or body fluids occurs, then consult their local medical health professional as soon as possible.</p>
<p>Related policies</p>	<p>GO-3 Administration of Medication GG-3 Administration of Medication GO-4 HIV, AIDS and other infectious diseases</p>

Version Information

Version Number	Content Updated	Person Responsible	Date Updated
1.1	Content updated Appendix B added New policy formatting Version Control section added	P&P	March 2020
1.0	Original		June 2015

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### Appendix A

Procedures for Cleaning up and Disposing of small Blood spills or Blood- stained Material.

1. Avoid contact with blood if your own hands or lower arms have open cuts or unhealed wounds. Use disposable gloves if available and wash hands, lower arms and any other body parts which have come in contact with or been splashed by blood. Thorough washing with soap and water is adequate.
2. Any waste material containing sharps (e.g. broken glass or needles) must be disposed of in a sharps container. Use forceps to pick up and dispose of sharps. All other blood-stained waste material should be placed in a waste bag and sealed with a rubber band. It should then be disposed of in a Clinical waste disposal bin.
3. First Aid instruments which have been splashed with blood (e.g. Scissors) should be thoroughly washed in water and detergent to remove any blood and then disinfected by soaking them in freshly prepared 1% chlorine bleach\*\* and then autoclaved. Preferably instruments should be disposable.
4. Other bloodied areas (desks, floors equipment) should be washed down with cold water, and then with freshly prepared 1% chlorine bleach.\*\*

\*\*Note; Milton bleach is approximately 1% available chlorine and household bleach has approximately 4% available chlorine. To prepare a 1% chlorine solution if bleach is not available, mix 250 ml household bleach with water to make up 1 litre.

### Appendix B

Recommended procedures to ensure Standard Precautions are maintained. Ref: *Victorian State Government/Education and Training/Infectious Diseases School Policy.*

Hand hygiene refers to any action of hand cleaning. It includes using soap and water and antimicrobial hand rubs eg. alcohol based hand rub. Girl Guides Victoria has a responsibility to provide soap and other hand hygiene consumables to support good hand hygiene.

Respiratory hygiene or cough etiquette are terms used to describe prevention measures. These include

- Covering the mouth and nose when coughing or sneezing
- Using tissues and disposing of them appropriately
- Using hand hygiene immediately after coughing, sneezing or blowing nose.