

# Hauraki Primary School

## Policy Document

### **Blood-borne viruses, including HIV**

#### **Rationale**

It is a primary objective of the Hauraki School Board (the Board) to provide a physically and emotionally safe place for all students and staff. The Board is committed to taking all reasonably practicable steps to ensure the health and safety of all students, staff, and other visitors to the school.

#### **Purpose:**

The Board will take reasonably practicable steps to ensure health and safety and eliminate or minimise health and safety risks by:

- complying with all relevant legal requirements, including those set out in the Health and Safety at Work Act 2015 (HSWA), Education and Training Act 2020, Human Rights Act 1993, Health Act 1956, Privacy Act 2020, and Health (Infectious and Notifiable Diseases) Regulations;
- ensuring employees and visitors to the school are aware of hygiene standards and have access to appropriate personal protective equipment (PPE) in cases where they may come in contact with blood-borne viruses.

#### **Guidelines**

1. The Board acknowledges that HIV transmission is generally very difficult and rare, but can occur through needle-stick injuries or blood transfusions. Other blood-borne viruses, such as Hepatitis B and C are of far greater risk to a school population.
2. All blood should be treated as potentially infectious. To minimise the risk of infection, the school follows the hygiene practices set out in Appendix One and provides PPE. PPE supplies include disposable gloves (in different sizes), masks, eye protection, hand sanitiser, and cleaning products and equipment.
3. We seek medical advice if anyone is accidentally exposed to blood and has concerns. Infections contracted in these circumstances are reported to WorkSafe

#### **Students with blood-borne viruses**

4. Upon enrolment, or as and when necessary after that date, parents, caregivers and whānau must disclose to the principal if a student has a blood-borne virus, so that those working with the student can provide the best possible support.
5. A student's blood-borne virus status will only be shared on a "need to know" basis to ensure the student's privacy and to manage the safety of other students, staff and visitors.

Generally, the wider parent community will not be informed of a student's blood-borne virus status.

6. The school may contact relevant health specialists for staff training and guidance, or should the school need to provide further guidance to the wider school community.

Signed: PE Gold

Date: 28.7.25

Presiding Member of the Board

Review Date: Term 3, 2028

**Related policies**

- Health and Safety
- Privacy

## **Appendix One**

### **Hygiene Procedures**

1. Hauraki School promotes basic hygiene measures as the first line of defence against the spread of infection. This includes:
  - washing hands regularly
  - avoiding excess contact between hands and eyes, nose, and mouth
  - wearing a mask or face covering if necessary
  - covering coughs and sneezes using a tissue (and disposing of it immediately), or the inside of the elbow
  - physical distancing.
2. Water fountains are maintained regularly to ensure adequate water pressure so that mouths do not come into contact with water outlets. Children are educated in correct use of fountains.
3. Students purchase their own woodwind instruments (recorders), which are named and only used by the named student. Any plastic mouth pieces on shared woodwind musical instruments are removed after use and placed in solution of diluted bleach (dilution 1 in 10 recommended) for a minimum of 30 minutes.

### **Dealing with blood spills**

4. We deal with blood spills safely, quickly, and effectively. Other students are instructed to move away from the incident, and we ventilate the area as needed.
5. In the case of nose bleeds, students apply pressure to their own nose until correct first aid can be administered by staff.
6. In the case of injuries with blood spill, only adults apply first aid. We do not allow students to attend to each other's injuries or touch blood.
7. A protective barrier between the first aider and the substance is created and PPE such as gloves and masks are used.
8. Before we put on disposable gloves, hands are washed with soap and water for at least 20 seconds then dried well. If soap and water are not available, alcohol-based hand sanitiser (60–80% alcohol) rubbed in for 20–30 seconds may be used. Any cuts or abrasions must be covered before putting on disposable gloves. Masks and eye protection must be worn if blood splashes are likely. Tweezers are used as appropriate.
9. If the wound is dirty, if possible before applying the dressing, wash the wound with running water from the middle outwards. Temporarily protect the wound with a sterile swab and gently clean the surrounding skin. Dry the skin with swabs of cotton wool, wiping away from the wound using each swab only once. Apply dry dressing directly over wound. Retain the dressing in position with adhesive or bandage. See that dressing extends well above and beyond the edges of the wound.



### Process for cleaning up after a blood spill

10. For personal clean up after a blood spill, put used PPE and first aid supplies in a plastic bag, which is sealed for disposal. The first aider should wash their hands, lower arms, and anywhere else that has been in contact with blood (even if gloves were worn) with soap and water for at least 20 seconds, then dry well.
11. For cleaning physical surfaces, wear disposable gloves and other PPE as needed. Wipe down hard surfaces with detergent and warm water, then with fresh diluted bleach solution and leave to dry for at least 30 minutes. Areas where bleach is mixed or used are ventilated.
12. Wash soiled equipment, such as scissors or tweezers, thoroughly in cold tap water then sterilise by soaking for 30 minutes in diluted bleach solution.
13. Wash carpeted areas with soap and water. Help may be requested from the Property Manager.

### Sick bay

14. The school has a dedicated sick bay, with the below minimum first aid supplies and PPE equipment. Signage directs users to supplies and equipment.

Item
4 x Triangular bandages
9 x Roller bandages (including crepe bandages 50 mm and 75 mm sizes)
10 x Sterile dressings (75 mm x 75 mm packets)
2 x Adhesive wound dressing strip (100 mm packets)
1 x Waterproof adhesive plaster (50 mm wide reels)
5 x Sterile, non adhesive pads (100 mm x 100 mm packets)
4 x Sterile eye pads
1 x Container for use in pouring water over the eye (e.g. plastic squeeze bottle)
1 x Receptacle for soiled dressings (e.g. bucket with foot-operated lid)
2 x 250 ml antiseptic liquid approved by the Medical Officer of Health
1 x Safety pins (card)
1 x Scissors – surgical or equivalent stainless steel (pair)
1 x Splinter tweezers, fine point - stainless steel
1 x Accident register and pen or pencil
1 x First aid booklet (issued by the Departments of Labour and Health or Red Cross/Order of St. John)
1 x A card listing local emergency numbers
8 x Disposable gloves – large size or multi fitting (pairs)

15. First aid supplies are regularly checked and restocked. This includes checking expiry dates.
16. After first aid treatment, an injured or ill student is monitored until they are able to return to class or leave the school:
  - The student may need to be collected by a parent/caregiver and signed out into their care.

- If parents/caregivers/emergency contacts cannot be contacted or cannot collect a student who requires medical care, a staff member may need to take the student to a doctor or medical centre.
- If a student is collected by ambulance, a staff member may accompany them, if appropriate.