



John Wheatley

Glasgow's Friendliest College.

Health and Safety At Work

Health and Safety Guidelines

HIV – (Human Immuno-deficiency Virus)/ Acquired Immune Deficiency Syndrome (AIDS)

Acquired Immune Deficiency Syndrome (AIDS) Infection Control Guidelines

This document is prompted by the continuing need for staff at John Wheatley College to keep updated in regard to the infection with Human Immunodeficiency Virus – (HIV), the virus which leads to AIDS.

Against the background of concern, which may be present, these guidelines should be read and understood by all members of teaching and non-teaching staff – in conjunction with the Drug Misuse Guidelines already published.

1.0 Background

- 1.1 It is believed that the virus may have existed in Africa for many years, it manifested itself in North America and Western Europe in the early 1980's.
- 1.2 AIDS (Acquired Immune Deficiency Syndrome) is a group of diseases (syndrome) that take the opportunity to infect the body as the result of reduced immunity to infection caused by the action of HIV – Human Immuno-deficiency Virus - which compromises the body's natural defence system against disease.
- 1.3 Whilst HIV has been isolated in a variety of body fluids, there is NO evidence of its transmission other than from four body fluids blood, semen and vaginal secretions or breast milk – which are the sources of infection.
- 1.4 However, transmission has also occurred through either transfusions of contaminated blood or the transfusion of contaminated blood products prior to 1987.
- 1.5 At present there is neither a vaccine to prevent people becoming infected with HIV nor is there a cure for those who develop AIDS. Many of the drugs available to infected persons have the action of maintaining immunity through preventing the virus from multiplying within the body of the infected person. This however has the effect of slowing down the progression to AIDS, which is inevitable.
- 1.6 Not everyone who is infected with the virus (i.e. sero-positive) develops symptoms of AIDS immediately. However, anyone who has the virus can pass it on.
- 1.7 Initially, the disorder was identified in male homosexuals in the USA. The infection then spread amongst drug addicts who shared intravenous injection equipment and, later on, male and female partners of infected persons.
- 1.8 The virus has been acquired by people with haemophilia, together with others who may have been in receipt of infected blood transfusions. Children have also been born with the virus. Infection in this way is most likely to have occurred at or around the time of birth where blood from the mother has been passed to the baby especially in surgical interventions for example. Breast-feeding by infected mothers has also passed on the virus through breast milk.
(There is a 60-65% chance that children born with HIV antibodies in their blood DO NOT go on to develop AIDS)

- 1.9 Whilst in the past it was extremely rare to have found HIV infection in people who did not take part in high-risk activities i.e. sharing intravenous equipment, unprotected homosexual sex or haemophiliacs who had been given contaminated blood or blood or blood products, it is now clear that there has been a marked increase in HIV infection in people having heterosexual sex with partners whose sexual histories are not known.
- 1.10 Although the global figures for infection through homosexual intercourse had been in decline, locally in Glasgow, however, this is not the case. The number of male-to-male transmitted cases has shown a slight rise over the past two years – mainly as the result of complacency mirroring the international figures.
- 1.11 Teaching and support staff are not likely to be aware of the identity of those who are sero-positive, that is they are infected with HIV. Indeed, if such information were made available, the sensitive nature of this information must be respected by staff to ensure that confidentiality is maintained at all times.
- 1.12 In the College situation, the most likely source of infection would be contaminated blood from an open wound coming into contact with another open wound. It must be emphasised that actual blood-to-blood contact would require to take place to a significant degree into a deep wound before there is a risk of transmission by this route.
- 1.13 The use of disposable gloves and aprons is essential for the First Aid treatment in ALL circumstances in the College. These are available in the First Aid Room of either main campus buildings.

2.0 Information on HIV

- 2.0.1 The transmission of the virus has been established mainly through the following routes: -
- direct blood to blood contact through deep open wounds, cuts: or
 - by the injection of contaminated blood; or
 - by unprotected sexual intercourse with an infected person; or
 - from a mother who is HIV positive to her baby.
- 2.0.2 It has been established that there is **no risk** from casual contact, from shaking hands, from kissing or being in close proximity to people who have the virus. Sharing a lavatory, a shower or a bath with people who have the virus presents no risk.
- 2.0.3 HIV cannot be transmitted from cups, cutlery or crockery. There is no risk through sharing books, telephones or drinking fountains. The virus cannot be transmitted by insects, is not airborne and cannot be transmitted either by coughs or sneezes.

- 2.0.4 There is no risk from the sharing of musical wind instruments, which have been sterilised in the usual way, or from sharing a swimming pool with a person infected by the virus.
- 2.0.5 Research studying large numbers of HIV positive people in domestic settings has conclusively established that there is no evidence of cross-infection to other persons resident in the household through social contact or close proximity.
- 2.0.6 HIV has not been found to be an occupational hazard, except in some surgical cases. It is the opinion of those involved in the study of the virus that it cannot be transmitted beyond the active participation in "HIGH RISK BEHAVIOURS" such as,
- Unprotected sexual intercourse
 - Sharing of intravenous equipment in drug misuse,
 - Breast-feeding by infected mothers,
 - Blood transfusion with contaminated blood
 - Transfusion with contaminated blood products,
 - Deep wounding along with contamination by infected blood.
 - Contaminated sharps injury causing a deep wound
- 2.0.7 It is emphasised, however, that good practice in personal hygiene should always be followed especially when dealing with spills of blood and other body fluids because of the potential risk, not only from HIV but from other more easily acquired viruses such as Hepatitis B.
- 2.0.8 Following normal conventions with regard to personal hygiene razors, toothbrushes or other implements these must not be shared.
- 2.0.9 Open cuts or weeping skin lesions and abrasions should always be covered with waterproof adhesive dressings for hygiene purposes. All staff should cover these prior to undertaking work in any situation.
- 2.0.10 Sanitary dressings should be disposed of in the hygienic units, which are supplied for this purpose.

3.1 **Health Education**

- 3.2 It would be helpful if teaching staff can exploit any opportunity for the informal education of students in HIV infection and related issues, should they arise during the course of normal teaching. This approach will include reinforcement of the use of non-stigmatising, non-discriminatory attitudes and language. It is also recognised that staff particularly involved with community groups could make similar contributions to challenge the stigma, myths and stereotyping which has affected the public's perception of the disease. Support staff should also fulfil a role in this aspect where such opportunities arise.
- 3.3 Relevant information and resources may be obtained from the Health Promotion Departments of the local Health Boards, the college Health and Safety Coordinator and the college library.

- 3.4 In providing health information, specific reference should be made of the inherent dangers of practices that involve the potential for direct blood-to-blood contact through poorly sterilised equipment used in ear piercing, tattooing. Although the above conditions have NOT been shown to play a part in the transmission of HIV it should be emphasised that they have played a part in the transmission of other virulent and debilitating diseases, such as Hepatitis B or septicaemia.
- 3.5 These other viruses and infections are potentially more easily acquired through close proximity to other people in working environments. Staff should be aware of the difference in transmissions modes of HIV. (para 2.0.6)
- 3.6 Other viruses and infections are likely to be transmitted by the sharing of personal hygiene equipment, poor toilet hygiene and ingestion of contaminated food touched by either the unwashed hands of preparer or eater.
- 3.7 Staff should maintain normal high standards of hygiene, especially those involved in the preparation of food and handling of cutlery. Such cleanliness should be emphasised in teaching within these subject areas.

4.0 First Aid and Emergencies

- 4.0.1 Staff are advised to acquaint themselves with first aid procedures. Those with designated First Aid responsibility should familiarise themselves with the location of first aid packs in the College buildings.
- 4.0.2 Additions to stock of any material held for the purpose of First Aid or cleaning should be notified to Health and Safety Coordinator for purchase through the normal requisition procedures. First Aid and Estates staff will ensure that stocks are maintained and appropriate materials are available in all first aid packs sited throughout the college buildings.
- 4.0.3 Staff attending outreach facilities should acquaint themselves of the procedures, which apply in that particular site as well as the location of first aid materials.
- 4.0.5 Specialist materials and containers are available for use by First Aid staff. These are held in First Aid Rooms and should be used in the cases of sharps disposal, cleaning of small amounts of either blood or body fluid spills and disposal of soiled materials.
- 4.0.6 In the case of spillages of large amounts of blood or body waste materials, external contract cleaners should be contacted to carry out cleaning procedures.
- 4.0.7 First Aiders should acquaint themselves with the procedures for soiled materials disposal (para 4.3)

4.1 First Aid Procedures - Incidents Involving Bleeding

- 4.1.1 All staff should cover cuts or abrasions of the skin before undertaking work in the College.
- 4.1.2 First Aid staff should wear disposable Rubber Gloves in all cases.
- 4.1.3 Normal first aid procedures should be followed to a high standard. This includes washing the hands **before** putting gloves on **and after** treating the patient.
- 4.1.4 If a wound (from a bite, knife-cut or discarded sharp object) is sustained, the wound should be washed thoroughly. Bleeding should be encouraged.
- 4.1.5 Incidents where risk of contamination is suspected should be reported to the college *Health and Safety Coordinator* or *Estates and Facilities Manager* immediately. *
- 4.1.6 (i) All incidents should immediately be recorded on the standard accident/incident report forms, available from the reception in either college building, and forwarded to the Safety Coordinator.
- (ii) Skin punctures with implements may require tetanus booster. Where blood or body fluid entering through a cut/abrasion etc. is actual, should be intimated to the medical service at the hospital/health centre approached - at which time the individual should seek appropriate assistance advice.
- (iii) The Health and Safety Coordinator will inform medical staff at the relevant hospital/health centre of any specific concerns relating to possible cross infection risk sustained during the incident.
- 4.1.7 In any case, the confidentiality of the casualty will be maintained at all costs - even in negative risk cases. Failure to comply with this stipulation may result in disciplinary action being taken.
- 4.1.8 Splashes of blood on the skin should be washed off immediately with soap and water. Splashes of blood into the eyes and mouth should be washed out immediately with copious amounts of water.
- 4.1.9 Staff with further concerns should contact the National Aids Helpline 0800 567 123 or Occupational Health Service at Glasgow Royal Infirmary (0141) 221 0422.

4.2 Cleaning Up Following Incidents

- 4.2.1 It is the responsibility of Estates staff to both implement and supervise the cleaning activity associated with blood or body fluid spillage or sharp objects appropriate protective clothing – aprons or gloves should be worn at all times.
- 4.2.2 Estates staff will be kept informed, through periodic staff training and updates, of procedures involved in cleaning and specific cleaning and disposal of blood/body fluids.

- 4.2.3 After accidents resulting in bleeding contaminated surfaces - for example tables, furniture and floors - should be cleaned liberally with ordinary household detergent or bleach and wiped with disinfectant.
- 4.2.4 The virus is very weak outside the body and is very easily destroyed by disinfectants or bleach.
- 4.2.5 Body waste disposal Kits are also available for use by properly trained Estates staff.
- 4.2.6 In the case of incontinence in a student, staff should follow safe hygienic procedures, both for cleaning up and the eventual disposal of soiled waste. Estates staff should be contacted to implement the cleaning procedures. Disposable rubber gloves must be worn throughout the cleaning and disposal process
- 4.2.7 Body waste disposal kits held in the First Aid room should be used for small drops of blood body waste on work surfaces whereas bleach or disinfectant should be used for floors and where there are larger amounts of blood body waste.
- 4.2.8 ON NO ACCOUNT MUST STAFF MANUALLY HANDLE SHARPS, BROKEN GLASS OR CROCKERY WITHOUT PROTECTIVE CLOTHING OR EQUIPMENT. Students should be strictly discouraged from engaging in this task.
- 4.2.9 Sharps disposal containers and associated sharps handling devices are available in designated 'sharps bags' in main buildings. Estates staff should satisfy themselves that they know the location of this equipment.
- 4.2.10 Sharp objects and broken glass or crockery should be removed using appropriate hand protection – Estates Staff should use heavy-duty gloves in these cases.
- 4.2.11 When work is completed the hands should be washed and dried thoroughly.

4.3 Waste Disposal

- 4.3.1 Disposable rubber Gloves should be worn throughout cleaning and disposal process
- 4.3.2 Urine and faeces should be eliminated or discarded into the lavatory in the normal manner.
- 4.3.3 Soiled waste, such as incontinence pads and soiled mop-heads, cloths and soiled first aid materials should NOT be re-used. These items should be disposed of by using the "double-binning" procedure (i.e. a sealed bin liner inside a sealed bin liner). These should then be place inside a Yellow biohazard bag. These bags will be appropriately disposed of via outside contractors.
- 4.3.4 When the task is completed, hands should be washed and dried thoroughly.

John Wheatley College

Check Sheet for Prevention of Infection

1. Copies of John Wheatley College HIV Guidelines should be sited in the staff room or accessible via Associate Principals and Project team leaders. The main guidelines should be consulted for supporting information.
2. Use safe practices and ensure good standards of hygiene are kept at all times.
3. Cover ALL cuts and breaks in the skin.
4. Protective gloves must be worn in
 - (a) all first aid activities
 - (b) All situations involving cleansing of body fluids
 - (c) All situations involving uplift of sharps broken glass or crockery.
5. Dispose of sharps in the containers provided for this purpose. These containers must not be overfilled and must be sealed for incineration.
6. Dispose correctly of soiled cleaning materials.
7. In the event of a blood or body fluid spillage use an appropriate disinfectant to clear up such as neat bleach or other undiluted proprietary brand.
8. If an accident occurs: -
 - a) **Encourage** bleeding;
 - b) **Wash** injured area;
 - c) **Wipe** with an alcohol-based cleansing wipe (available in First Aid Kits);
 - d) **Report** the accident verbally and using standard incident report form to the Health and Safety coordinator; and if in doubt;
 - e) **Contact** occupational Health Service at Glasgow Royal Infirmary for further advice. Telephone direct on 0141 221 0422.

Other Contact Numbers

National Aids Helpline 0800 567 123