

Blood-Borne Pathogens Policy Section 1 - Purpose and Scope

- (1) The purpose of this Policy is to set out:
 - a. the roles and responsibilities of staff, students and members of the University community in preventing the transmission of blood-borne pathogens; and
 - b. the steps to be taken to identify hazards and minimize the risk of infection or transmission.

Scope

(2) This Policy applies to all employees, students, contractors, volunteers and visitors to the University who may be exposed to blood-borne pathogens in the course of their employment or while on University premises.

Section 2 - Definitions

- (3) 'Blood-borne pathogens' include the Human Immunodeficiency Virus (HIV) and Hepatitis viruses, their associated mutations and other blood-borne viruses.
- (4) 'Standard precautions' are standard operating procedures that apply to any situation in which there is a risk of contact with human blood, body fluids and tissues regardless of their perceived infectious risk. These precautions include:
 - a. aseptic techniques;
 - b. hand washing;
 - c. use of personal protective equipment (gloves, face shields, plastic apron);
 - d. appropriate disinfection of equipment; and
 - e. implementation of environmental controls.
- (5) Standard precautions incorporate safe systems of handling blood (including dried blood), other body fluids, secretions and excretions (excluding sweat), non-intact skin and mucous membranes, and human tissues.

Section 3 - Policy Statement

(6) Southern Cross University is committed to providing a safe and healthy work and study environment. In keeping with this commitment, this policy sets out roles and responsibilities in the prevention of the transmission of blood-borne pathogens and the strategies in place to minimise the risk of infection.

Roles and Responsibilities

(7) The University has a legislative duty of care to provide a safe place of work and study. Specific responsibilities are:

Heads of Work Units

- a. must ensure relevant state legislation is complied with and health regulations are in place to allow public health intervention in the case of potentially deadly disease outbreak.
- b. are responsible for managing the health and safety, hazard identification and risk management in consultation with work unit employees.
- c. must ensure employees and students are trained in correct infection control techniques, where applicable.

Managers/Supervisors

- a. where practicable, have a duty of care to prevent people from becoming ill or injured as a result of an infectious or communicable disease whilst under their supervision.
- b. are to follow any <u>Department of Health and Aged Care</u> guidelines given to them in the event of an infectious or communicable disease.
- c. laboratory or practical class supervisors must ensure that employees and students are fully informed and instructed in appropriate procedures (including standard precautions) for handling and disposal of potentially infected material. Each supervisor should prepare a brief summary of the principles relevant to their own particular work setting, to assist with training of, and compliance by, their employees or students.

Employees and Students

- a. must use standard precautions when handling potentially infectious material; or undertaking research.
- b. must follow all health and safety guidelines relevant to their area or the University community.

Individuals

- a. must exercise a duty of care to prevent the spread of the disease to others in the University community. This duty may require the individual to disclose to the University that they have an infectious or communicable disease. However, there is no onus of disclosure on any person to reveal their medical history unless they pose a danger to other employees or to the University community;
- b. must follow any protocols or guidelines released by the <u>Department of Health and Aged Care</u> in relation to blood-borne pathogens.

Hazard Identification and Risk Management

- (8) During the planning stage of any experiment or teaching practical using animal or human material which has a risk of infection, the identification of all possible hazards and a documented assessment of the risks associated with the hazards must be undertaken. For guidance refer to <u>Hazard Analysis Critical Control Points</u>.
- (9) Where high-risk hazards are identified, controls to minimise such risks must be established using the hierarchy of controls. The Workplace Health and Safety Team within HR Services can provide advice on this process.
- (10) Employees and students using potentially infective material must:
 - a. be informed of the identified hazards and the control measures prior to commencing the activity. The
 effectiveness of the control measures must be reviewed regularly and improved, if necessary, prior to repeating
 that activity.
 - b. consider the potential for infection and the quantity of contaminated material that may be generated.
 - c. consider the probability of employees being exposed to the effects of an infectious or communicable disease or infected material.
 - d. identify the routes of transmission and the possibility of multiple exposures.

- e. consider the likelihood of an accident/incident occurring and the potential consequences.
- f. consider the effect an accident/incident may have on the University community or business.
- g. have completed the University's on-line workplace health & safety induction and any site specific inductions to ensure they are fully informed of their responsibilities and the potential risks.
- (11) All possible hazards must be identified and a documented assessment of the risks associated with the hazards undertaken during the planning stage of any experiment or teaching practical using animal or human material which has a risk of infection. The documented assessment is kept by the work group.

Immunisation

- (12) Hepatitis B vaccination is recommended and available through the Student Support Centre Medical Officer or private providers to all employees who, in the course of their work, are at increased risk of contracting Hepatitis B due to:
 - a. contact with human body fluids; or
 - b. risk contact with used injecting equipment and other contaminated sharps.
- (13) Post-vaccination testing should be carried out to determine the level of protection conferred by the vaccine. Non-responders (those people who have not developed protective antibody levels following vaccination) will not have immunity, and should discuss their options with their supervisor.
- (14) There is no vaccine for HIV.

External Student Placements

(15) Students who undertake work placements or internships in organisations external to the University (eg NSW Health or Queensland Health) and employees who supervise them, are required to comply with the relevant infection control requirements of the organisation. It is the responsibility of each work unit to ensure students and employees are advised of these requirements and any changes to the requirements that occur during the term of their employment or studies.

Communication, Awareness and Training

(16) Southern Cross University will:

- a. provide appropriate training to relevant work units or groups at risk within the University.
- b. raise the awareness of good hygiene practices as a preventative measure for blood-borne diseases such as HIV/AIDS, Hepatitis B and Hepatitis C.
- c. through education, endeavour to reduce the myths, prejudices and unnecessary fears associated with bloodborne diseases.
- d. provide training in the proper handling and disposal of used injecting equipment where a need is identified.

Confidentiality and Discrimination

- (17) The University has a legislative obligation to ensure the confidentiality of information about employees and students with HIV/Aids or Hepatitis. Stringent confidentiality procedures are enforced within the University in respect of all personal information concerning infectious disease.
- (18) It is illegal to discriminate against another person on the grounds that they have contracted a disease such as HIV/AIDS or Hepatitis. The University requires all members of its community to avoid any such discrimination. Further information about this may be obtained from the Equity and Diversity Office.

Complaints Procedure (19) Where an individual believes they have been treated unfairly, or inappropriately, the University's complaints procedure should be followed.

Status and Details

Status	Historic
Effective Date	11th September 2012
Review Date	1st March 2025
Approval Authority	Vice Chancellor
Approval Date	9th May 2012
Expiry Date	16th December 2024
Responsible Executive	Kim Franks Vice President (People and Culture)
Head of Work Unit	Kath Drew Director, Human Resources
Enquiries Contact	HR Services