CLEANING UP BODILY FLUIDS

This Safety Note summarises the minimum standards expected for the cleaning up of bodily fluids. It relates to all University premises and environments and is therefore relevant for all, including laboratory, research, teaching, support, and Estates staff, as well as students.

This safety note applies to spillages of human and animal samples in laboratory areas. Emergency spillage procedures involving liquid cultures of micro-organisms must be determined by an activity risk assessment and documented in laboratory local rules. An example basic containment level 2 laboratory spill procedure is provided in the annex.

Please also see UoR Safety Code of Practice 14, Parts 1 & 7 on Biological Safety and Biological Waste, Safety Code of Practice 55 on Spill Management, and Safety Note 66 on Phlebotomy.

Introduction & principles
Bodily fluids include blood, urine, vomit, saliva or faeces that have come from a human or an animal. They must be regarded as being potentially infectious and treated with caution. They can contain a wide range of infectious agents, including bacterial and viral pathogens such as those that cause Tuberculosis, Salmonellosis, Winter Vomiting Disease, and COVID-19.

Dealing with a spillage of bodily fluids is based upon the principles of cleaning and disinfection. A chlorine-based disinfectant is commonly used because it will be effective against the wide range of organisms that are potentially present. There are two options for achieving this:

1. Using a combined detergent disinfectant solution to clean and disinfect the area
2. Using a cleaning detergent followed by disinfectant

It is important to:

- Follow manufacturer’s instructions for dilution, application and contact times for all detergents and disinfectants
- Avoid mixing cleaning products together as this can create toxic fumes
- Avoid creating splashes and spray when cleaning
- Use disposable forceps or a plastic scoop to dispose of any sharp objects such as broken glass
- Dispose of mop heads, cloths and sharp objects appropriately

Where possible, when dealing with faeces and vomit, scoop up excess fluid and dispose of down the toilet. The area can then be cleaned, disinfected and thoroughly dried.

Initial action
During an incident priority should be given to addressing the first aid needs of any injured or ill person. Trained first aiders have expertise in infection control and their advice should be sought and heeded by
all involved during and immediately after the incident. As soon as possible after first aid is complete, local responders and those locally responsible for the area should establish control of the area to prevent spread of contamination. Typically this should involve preventing accessing, locking-off or cordonning-off the area.

**Risk assessment, preparedness & response**

Teams responsible for areas with a large footfall, or a foreseeable likelihood of spills from the visiting public, should proactively address bodily fluid spills in their assessment of risk, before incidents happen.

When incidents occur, smaller spills can normally be assessed dynamically, without generating written documents. For very large scale contaminations a written risk assessment should be considered, as a specific method statement or protocol may have to be developed. For example, for large spills, appropriately fit-tested respiratory protective equipment may be needed to protect against the biohazard itself, or the cleaning/disinfection chemicals, or both. Teams in doubt should seek advice from their local Health & Safety Co-ordinator. All teams are encouraged to use the [University’s Health & Safety Incident Notification System](#) to report incidents. If in doubt report with any details known, especially the location.

Proprietary commercial spill kits are available. Teams can produce their own spill kits using the lists provided below.

**Who should undertake the clean-up?**

Where practical, the person responsible for the spillage should clean and disinfect the area. When that person is unknown, or is not capable of cleaning up, subject to the guidance above on risk assessment and method statements, local staff or managers should undertake the task or ensure a person undertakes the task. Local staff or managers should ensure whoever undertakes the task is familiar with the guidance in this Safety Note and has been provided with appropriate personal protective equipment (PPE, see below).

Cleaning Services offer a cleaning service for bodily spillages and may also be able to assist with PPE and/or practical assistance. Where Cleaning Services are used, local staff will be required to co-operate with Cleaning Services’ work timescales and pre-established protocols.

**General instructions**

1. Before starting, ensure there are arrangements to dispose of, or at least store, any resulting biohazard waste, and that prompt appropriate disposal is being or will be arranged.
2. The person tasked with the cleaning and disinfection should put on protective clothing. This should include disposable gloves, an apron, overshoes and eye protection (and respiratory protective equipment if needed – see above).
3. Place warning signs/cones if necessary to warn others of hazards and slip risks.
4. Disinfect and clean the area. Be sure to dry floors after to prevent slips.

*If the spillage is on hard flooring/surfaces:*

- Thoroughly mop or wipe the area with detergent and dry, then
• Thoroughly mop and wipe the area with disinfectant and dry

*If the spillage is on upholstered furniture, mattresses, fabric or carpet:*
• Use detergent
• For carpet spillages, raise a Wren to engage Cleaning Services to clean carpets (chargeable service)

5. Any splashes of blood or bodily fluid on the skin should be washed off immediately with soap and water.
6. Any waste that is not disposed of down the toilet should be placed in biohazard bags and treated as biological waste.

**Management of waste**
Small quantities of biological waste can be disposed of in bins already provided for routine commercial disposal of nappy or sanitary waste. However, biological waste must not be sent from the University to landfill and so must not be placed in ordinary bins or waste skips.

Buildings with laboratories have access to external yellow wheelie bins for the disposal of sacks of infectious clinical waste, and also sharps tubs, which can be used in the event of spills of bodily fluids within labs or within those particular buildings.

For non-laboratory situations, there is a yellow wheelie bin designated for clinical waste located in the fenced waste compound between Minghella Building and Edith Morley building, to which Cleaning Services and Security Services have access. There is not such a bin at London Road campus, so items would need to be transported to Whiteknights. Greenlands currently has a wheelie bin for clinical waste.

Yellow clinical waste sacks and yellow sharps tubs can be deposited in the yellow wheelie bin to enable the disposal of materials following the clean-up of bodily fluids. Cleaning Services have access to clinical waste sacks for clear-up purposes. There is also a sharps tub at Security Control.

Sustainability Services cannot provide clean-up, but would expect anyone putting items in the yellow wheelie bin at Minghella waste compound to inform Sustainability of the type and amount of waste deposited. When the bin needs to be emptied, Sustainability Services will request Select Environmental Services to do this.

Other teams should not directly contact Select for the disposal of this type of clinical waste, but rather use the clinical waste bins that are already provided. If there is a need for more sacks or sharps tubs, or any queries arising, staff should contact Sustainability Services via waste@reading.ac.uk.

**Bodily fluid spill kits**
In general, the equipment to be used should include (typical absorbent capacity 1 litre):

- Absorbent material (cloths)
- Dustpan and brush
- Disinfectant
- Detergent
- Mop and bucket
- Disposable gloves, apron and over-shoes
- Eye protection
- Biohazard bag
- Instructions
ANNEX A

Laboratory biological spill instructions (up to Containment Level 2)

Emergency spillage procedures should be indicated in activity risk assessments and documented in laboratory local rules. See Code of Practice 14 Part 1 Section 20.

1. Leave the area and tell others to do the same
2. Remove contaminated PPE
3. Place warning signs/cones if necessary to warn others of hazard
4. Wait a minimum of 30 minutes for aerosols to settle
5. Put on disposable gloves, an apron, overshoes and eye protection
6. Place mini booms around spillage to contain liquid.
7. Alert other staff by placing cones at scene.
8. Prepare a 1% Virkon solution (1% solution)
9. Sprinkle Virkon powder directly onto the spillage and leave for 3 minutes.
10. Scrape powder (use dustpan and brush) into an autoclave bag for disposal.
11. Disinfect the area with the diluted Virkon and leave the area to dry
12. Take waste material, including dustpan and brush, to autoclave room.
13. Clean the area with detergent and dry
14. Inform supervisor of incident - All laboratory spillages of Hazard group 2 (or higher) organisms must be reported to Health and Safety Services using the online system.

Microbiological spill kit

In general, the equipment to be used should include (typical absorbent capacity 5 litres):

- 2 Sachets of Virkon powder
- Disposable gloves, apron and over-shoes
- Absorbent material (cloths)
- Dustpan and brush
- Mop and bucket
- Detergent
- 2 Large autoclave bags
- 1 Roll paper towel
- 2 minibooms
- Instructions

Please notify the local member of staff tasked with ensuring replenishment of emergency preparedness items that replacement items are required. Replace the Virkon when passed expiry date.