

Policy title	Infection Control Policy and Procedure
Issue date (m/y)	09/2013
Author	Laura Cook, Director
Approved by	Donna Welburn
Last review	07/2017
Review date (m/y)	07/2019

Context and/or Aims

This guide has been produced by The Learning Support Centre Ltd to raise staff awareness about infection control which is issued to all staff.

Policy Statement

Infection control is a critical element in the running and management of The Learning Support Centre Ltd Care Division as a domiciliary care provider and is an important part of the running of The Learning Support Centre Ltd. Infectious diseases that can be spread if inadequate controls are in place include serious infections which, in certain circumstances, can cause debilitating illness, severe ill health and even death.

Not only do high standards of infection control mean that service users will be protected from the spread of such infectious diseases and illnesses but staff will also be protected, thus leading to lower sickness rates and better continuity of care for service users.

Examples of diseases and organisms spread from person to person include stomach bugs and vomiting bugs through to serious examples such as flu, MRSA, e-coli, C.difficile and food poisoning.

In order to protect our service users from the spread of such infections, and in order to maintain their health and well-being, The Learning Support Centre Ltd are committed to the highest possible standards of infection control as a key priority area.

The Learning Support Centre Ltd. comply fully with the Department of Health 'Essential Steps' infection control guidance and with *The Health and Social Care Act 2008: Code Of Practice for health And adult social care on the prevention and control of infections and related guidance*, which applies to adult social care providers from October 2010.

The policy is based on evidence-based guidelines, including those on hand hygiene at the point of care and the use of personal protective equipment.

The Learning Support Centre Ltd.'s care division understands that it has a legal duty under the **Health and Social Care Act 2008 (Regulated Activities) Regulations 2010** to protect its service users, and others who use the services, from any identifiable risks of health care related infections.

Requirements for implementation

Health and Safety

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Education and training

All The Learning Support Centre Ltd staff are required to achieve the best possible care for clients. This will include participating in training programmes. Mandatory infection control training includes universal precautions and food hygiene training for all relevant staff.

Chemicals or substances hazardous to health

A planned and maintained cleaning schedule is an important means of controlling infection. If dirt and grime are safely removed at regular and appropriate intervals bacteria, viruses and moulds which cause infection will be less likely to multiply to harmful levels. The appropriate use of cleaning agents is essential to ensure your safety. All relevant staff must adhere to risk assessments for the use of cleaning agents.

Universal infection control procedures

It is not always possible to identify if someone has an infection, which might be spread to others. We therefore recommend that the following precautions must be taken to protect both staff and clients:

Immunisation

Immunisation is an important way of avoiding infection but it is not available against all infections and neither is it guaranteed 100% effective. Immunisation is not an alternative to good Infection control and common sense.

For staff and client groups at particular risk of infection the following recommended immunisations available through your GP are:

Immunisation:	Staff group:
Tuberculosis (TB), Tetanus and Polio Rubella	All staff

The Learning Support Centre Ltd and does not currently provide invasive care to clients. This section is relevant to the future development of this service.

Immunisation:	Staff group:
Hepatitis B	Staff trained to undertake invasive procedures. Staff likely to be in contact with Blood and other bodily fluids. Staff dealing with clients with Severe learning disabilities. Staff caring for intravenous drug users

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Avoiding and reporting injuries and accidents involving the risk of blood-borne infection

These include:

- All injuries where a contaminated sharp or needle has broken the skin
- Splashes of body fluids on to mucous membranes such as the mouth or eyes, or onto broken skin
- Human scratches or bites which cause bleeding.

Usually these injuries can be avoided by safe practice, correct disposal of sharps and appropriate use of protective clothing.

If injury occurs:

- Encourage bleeding from the wound
- Wash the wound in soap and warm running water
- Cover the wound with a waterproof dressing
- Eyes or mouth should be washed in plenty of water
- Advise your line manager immediately - blood tests for blood born infections would be required immediately from your GP/ local A&E department
- Ensure an accident form is completed.

Personal Hygiene and Health

Hair

Should be clean and tied back. Never scratch your head near food.

Hands

Hand washing is the single most important measure in reducing cross-infection but studies have shown that it is rarely carried out satisfactorily. Wrist creases, thumbs, finger tips and under finger nails are often missed. Fingernails must be kept clean and cut short. Nail varnish must not be worn whilst at work and jewellery must be kept to an absolute minimum (wedding ring only).

Wash your hands whenever they are visibly soiled and always:

- Before and after physical contact with any client
- After handling rubbish or contaminated items such as incontinence pads or catheters
- Before putting on protective clothing (aprons and gloves) and again after removal
- Before and after using the toilet
- Before eating, drinking or handling food
- Before and after smoking

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- After touching your face, especially your mouth, ears, or nose
- For example, blowing your nose or covering a sneeze
- After a break
- After cleaning a work area.

Hand washing

- Thoroughly wet all surfaces
- Apply cleanser or soap evenly all over your hands, including your thumbs and in between your fingers - rub vigorously to lather well
- Rinse well with running water.

See Appendix A for Hand Washing instructions.

Skin - cuts, open wounds and boils

Always cover open wounds including cuts, chaps and abrasions, with a non-latex waterproof dressing (plain plasters and blue detectable plasters to be worn whilst preparing food can be found in the LSC box in clients' halls of residence.) and replace the dressing if lost or damaged.

If you have eczema or similar skin lesions on your hands you will need to wear gloves for many procedures. If your skin condition is worsened by the use of gloves consult your line manager.

Do not scratch your skin, especially spots, as this will leave bacteria on your hands which can then be passed onto another surface.

Health

A common cold is not an indication to be off duty, remaining at work with certain illnesses may put vulnerable clients at risk:

- **Gastro intestinal illness** - if you have diarrhoea and/or vomiting you should remain off duty until you are completely recovered, particularly if you are involved in handling food. A faecal specimen should be submitted to your GP.
- **Chicken pox or shingles** - go off duty as soon as shingles or chicken pox is diagnosed. Consult your GP to determine when it is safe to return to work.
- **Septic skin lesions** - can be a source of infection to clients. Consult your GP.
- **Scabies** - is extremely contagious. You should remain off duty until the second treatment is completed and seek advice from your GP on when you can return to work.
- **Other unexplained rashes or fevers** - seek advice from your GP.

Protective clothing

Uniforms – You are not asked to wear a uniform

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Shoes - wear well fitting shoes that cover your toes.

Disposable latex gloves - must be worn to protect both you and your clients when performing personal care tasks involving body fluids, such as emptying catheters and handling used linen. The gloves should be disposed of immediately after use in a yellow clinical waste bag where available or double wrapped and disposed of with household waste. (Disposable latex gloves can be found in the LSC box in clients' halls of residence.)

Disposable plastic aprons - are available for bathing and showering clients when there is known infection, and if body fluids are likely to splash onto clothing. Used aprons should be disposed of in the same way as used latex gloves. (Plastic disposable aprons can be found in the LSC box in clients' halls of residence.)

Disposable latex gloves are also available for undertaking domestic duties.

Environmental Health

Good standards of cleanliness and hygiene will minimise the spread of infection.

Cleaning and maintaining premises

Maintaining premises in good order reduces the risk of infection, stopping access to insects, rodents, birds and animals and reducing the risk of damp conditions favourable to the growth of moulds.

Advise your service user and your line manager if you find a potential risk in a client's home.

A planned cleaning schedule is very important. The routine use of disinfectant for general cleaning is unnecessary - regular use of detergent and hot water is sufficient for routine cleaning.

Contaminated items

Items contaminated with blood or other body fluids should be dealt with as follows:

- **Wounds** - should be dressed by a District Nurse. If a client's dressing has to be removed during bathing and contact is unavoidable you should wear disposable gloves and apron. The wound should then be covered as advised by the District Nurse.
- **Spillages of blood, vomit other body fluids and faeces** - Use disposable cloths. Protective clothing must be worn at all times. Faeces should be disposed of via the toilet. The surface should be cleaned with general-purpose detergent and water then dried. In the event of a large spillage, particularly blood, a hypochlorite solution should be used in the appropriate tablet format.

*(Please note: bleach is a hazardous substance and must not be mixed with any other chemical as it will react and give off harmful fumes. **Exercise extreme caution.** Hypochlorite will also have an adverse effect on carpets and soft furnishings).*

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Clinical waste

All items soiled with blood or body fluids from known infected clients must be disposed of in yellow bags in bins external to the halls of residence, if unsure ask the Hall Officer to advise of an appropriate bin for disposal. Items include:

- Soiled dressings and swabs
- Material, other than linen, from cases of infectious disease (including disposable gloves and aprons used for care of infected clients)
- Incontinence pads, including those from non-infected clients
- Used incontinence aids/catheters/bags and stoma bags, even from non-infected clients.

(Please note: In a community setting stoma and catheter bags may be wrapped in newspaper, put in a plastic bag and disposed of in the household waste).

Sharps

Use a 'sharps container' to dispose of:

- Discarded syringes
- Needles and any contaminated sharp object.

Non-Clinical Waste

General waste such as food waste, household materials, disposable gloves and aprons used in the treatment of non-infected clients should be disposed of in black bags, provided by the client.

Pets

- Do not allow a client's pet to lick you or jump on you in a manner which may cause accidents
- If a pet scratches or bites you encourage bleeding from the wound. Wash with soap and warm running water. Treat the wound with antiseptic and cover with a waterproof dressing and inform your line manager
- Always wash your hands after touching a pet
- If you suspect a client's pet has fleas or a tapeworm advise the client and contact your line manager.

Pests

Look out for evidence of pests - droppings, nests, chew marks on wood/cables in the case of rodents or for insects, droppings, egg cases, vomit marks, damaged food containers, webbing caused by moths or the presence of live insects themselves. Advise the client and your line manager about any problems.

Laundering used and soiled linen and clothing

- Always cover open wounds with a waterproof dressing before attending work and replace the dressing if lost or damaged
- Always wear disposable gloves

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- Minimise contact with laundry
- Remove linen from client's beds with care to avoid creating dust.

Washing linen and clothing using on site/halls of residence facilities

- Rinse any solid matter down the toilet in a discrete manner that does not bring attention of other residents
- Use rinse and prewash cycles in washing machines - these can prevent the need for soaking
- Follow normal washing instructions for clothing and bedding
- Remove your gloves and dispose of them immediately in a yellow clinical waste bag if available or a black bin bag
- Wash your hands (follow instructions in appendix a).

Using off site laundry facilities

- Rinse solid matter down the toilet
- Store the bag in a designated location, which is secure, cool, dry and free from pests. Storage areas must be separate from areas:
 - Used continuously by clients
 - Used for the preparation of food
 - Used for storing clean linen.
- Remove your gloves and dispose of them immediately in a yellow clinical waste bag if available, or a black bin bag
- Wash your hands (follow instructions in appendix a).

Preparing and serving food

Food hygiene means keeping your work area and equipment clean and handling and storing food safely. To reduce the risk of illness, food should be prepared hygienically. Food poisoning can be serious, particularly among high-risk groups such as the very young, the elderly and people who are already ill.

Protecting food against contamination

- Get food from a source which is unlikely to be contaminated
- Make sure that you:
 - Cover foods and handle them as little as possible
 - Do not cough over food
 - Keep raw and cooked foods separate
 - Do not let pets near food preparation or storage areas
 - Get rid of rubbish carefully in covered bins
 - Keep food preparation and storage areas clean
 - Maintain high levels of personal hygiene
- Avoid opening up routes for bacteria

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- Only use knives and spoons once then wash them
- Disinfect work surfaces and chopping boards regularly
- Keep equipment clean.

Preventing the multiplication of bacteria

- Do not keep food at room temperature longer than necessary - either keep food hot or cold
- Store food at temperatures low enough to prevent bacteria from multiplying
- Cool cooked food completely before refrigeration but for no longer than one and a half hours. Cover food as it is cooling
- Keep hot food very hot before serving and try not to prepare food too long in advance
- Use fresh food as soon as possible
- Prepare food just before it is needed
- Refrigerate excess food as soon as it is cool. If you reheat food later, heat it thoroughly to a high temperature - ideally, food should not be reheated
- If frozen food is allowed to thaw, the bacteria in the food will start to multiply. Once frozen food has thawed, you must not refreeze it.

Destroy the bacteria in the food

- Always thaw frozen food properly before cooking unless the instructions tell you to cook it from frozen. If you do not, the food may be cooked on the outside, but the temperature in the middle may still be in the danger zone (between 5 – 63 degrees centigrade) - the temperature at which bacteria are able to multiply
- Cook food for a long enough time. Larger items of food such as joints of meat need longer cooking. This will make sure that it is cooked all the way through. You should not use joints larger than 2.5kg (6 lbs).

Managing known or potentially infected clients

- Always cover open wounds with a waterproof dressing before attending work and replace the dressing if lost or damaged
- Use disposable gloves and aprons for all care procedures or significant contact with a client
- Ensure your hands are clean and dry before putting on disposable gloves
- Deal with all personal care tasks of the client before moving onto other tasks with the same client
- Avoid touching your face and lips during care procedures
- Place used disposable gloves and aprons immediately in a clinical waste bag. Wash your hands and arms following the procedure in appendix a.
- There is no need to change your personal clothing before visiting your next client - your clothing should be washed as normal
- Clients laundry can be cleaned as per washing instructions
- Items for in-house laundry services should be treated as normal - use disposable gloves for bagging up

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- Wash crockery and cutlery in the normal way
- Vacuum as usual
- Surfaces, sinks should be cleaned with disposable or washable cloths using detergent or cleaning solution
- It is not necessary to wear disposable gloves and an apron to enter a room where no contact will occur.

(Please note: Staff with significant eczema, weeping eczema or psoriasis of their hands should not carry out procedures such as bathing or cleaning due to a small risk to broken skin.)

Related Documents

- Health and Safety Policy
- The Health and Social Care Act 2008: *Code of Practice for Health and Adult Social Care on the prevention and control of infections and related guidance.*

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Wet hands with water



apply enough soap to cover all hand surfaces.



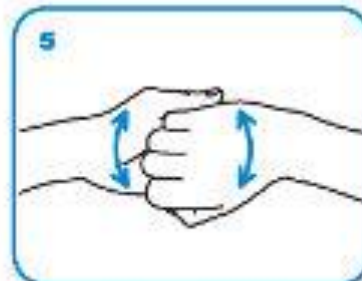
Rub hands palm to palm



right palm over left dorsum with interlaced fingers and vice versa



palm to palm with fingers interlaced



backs of fingers to opposing palms with fingers interlocked



rotational rubbing of left thumb clasped in right palm and vice versa



rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa.



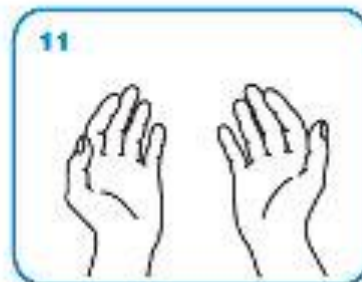
Rinse hands with water



dry thoroughly with a single use towel



use towel to turn off faucet



...and your hands are safe.