



EAST RIDING
OF YORKSHIRE COUNCIL

Infection Control

Safety Guidance Document

Lead Directorate and Service:	Corporate Resources - Human Resources, Safety Services
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1. Background

The Council has a general duty to ensure the health, safety and welfare of employees as far as is reasonably practicable.

Infection control is the prevention of the transmission of infections to people from any source of infection including other people.

The Council recognises that where people live, work, or socialise closely together the risk of acquiring and spreading of infection can be increased. Therefore, good infection control procedures will be adopted wherever there is an identified risk of transmission to people. These will include effective facility and personal hygiene standards, staff training, efficient waste management and safe systems of work to minimise contact with bodily fluids, bacteria or virus. A risk assessment may be necessary to identify; sources of infection, types of infection and any person(s) especially at risk.

2. Foreword

In accordance with the Council's corporate safety policy, the Council is committed to pursuing continual improvements in health and safety. This safety guidance document supports this commitment and forms part of the Council's health and safety management system.

3. Implementation

Directorates are responsible for the implementation of this safety guidance document and communication of its content as appropriate.

This safety guidance document is available on the Safety Services intranet page and, where employees do not have access to the Council's intranet, via their line manager/headteacher.

The Council relies on the co-operation of all employees and trades unions for the successful implementation of this safety guidance document.

A review of this safety guidance document will be undertaken three years after its implementation and where significant changes in legislation or working practices deem this appropriate.

4. Roles and Responsibilities

To effectively manage infection control and prevent the spread of infection, directorates that interact with vulnerable persons, high numbers of the general public, livestock or provide hygiene services, will need to ensure that the following roles and responsibilities are fulfilled:

4.1 Directors and Heads of Service

Directors through the delegated duties of their senior managers and their management team being responsible for ensuring that an up-to-date policy and procedure has been produced for their Directorate and that it is effectively communicated to all relevant employees.

4.2 Managers/Headteachers/Supervisors

Managers/headteachers/supervisors must ensure that:

- Premises, processes or people where infection is foreseeable are identified and risk assessments are completed, communicated and updated as appropriate;
- Infection control measures are adopted and safe systems of work are established, communicated and adopted in day to day activity;
- Records are kept and updated as appropriate;
- Training needs are identified and ensure that employees participate;
- Consideration is given to immunization for high risk activities;
- The risk to pregnant and new or nursing mothers are taken into account, seeking advice from Occupational Health as appropriate;
- Appropriate personal protective equipment is provided;
- Outbreaks are reported in accordance with Reporting of Injuries, Diseases and Dangerous Occurrences Regulations and to other relevant associated regulatory bodies;
- They have plans, information in place for dealing with outbreaks including communication with employees and clients, decontamination techniques and knowledge of chemicals to use.

4.3 Employees

Employees should ensure that:

- They take reasonable care of their own health and safety and that of others affected by activities;
- Co-operate with health and safety requirements in the workplace;
- Use knowledge, skills and equipment available to minimise the risk of infection or spread;
- Attend training courses as required;
- Work in accordance with risk assessments, safe systems, care plans etc.

4.4 Safety Services

The primary function of Safety Services is to support the Council and all its employees by providing professional, authoritative, impartial advice on all aspects of health, safety and wellbeing. Where managers require further assistance, Safety Services will advise on achieving compliance with this safety guidance document.

4.5 Occupational Health will support this guidance document by providing managers and employees with guidance on all work related health issues. Further information on the role of Occupational Health can be found on the Council's intranet. Specifically in relation to infection control, Occupational Health will provide access to immunisation

service as required, support management and employees as appropriate following an outbreak and update the infectious disease information available on the intranet.

- 4.6 The Emergency Planning Team will lead on situations which are classed as national/international pandemics or have the potential to reach this status. They will provide up-to-date information and ensure that the Council is prepared to deal with such situations.

5. Arrangements

The body's immune system cannot protect itself against all infections. It is essential that we take all reasonable steps to eliminate or reduce the risk of infection when we work with vulnerable persons or large numbers of the general public or provide hygiene services. The process of infection is represented by a chain containing:

- Source;
- Transmission;
- Host/Receiver.

Source

There are four main sources of infection that need to be considered, blood and bodily fluids, human or animal waste products, respiratory discharges and skin contact.

Transmission

To become infected the micro-organism has to get from the source to the host/receiver this is known as transmission. A human being has a number of entry routes, specifically the mouth, nose, eyes and skin.

Host

People have natural defence mechanisms; including the immune system. If an infection occurs there is a battle between immune system and the strength of the micro-organism. Some people are more vulnerable than others, due to a permanently compromised state of health or a temporary condition such as pregnancy. Effective infection control is preventing the transmission of an infection from a source to the host/receiver. To break this chain, the sources of infection must be identified.

Receiver

Risk Assessment

Wherever there is an identified risk of infection, appropriate hygiene and infection control measures must be adopted.

Managers are required to prepare risk assessments, identifying potential hazards, persons at risk (allowing for individual sensitivities/vulnerabilities) and introduce control measures to minimise the risk. Risk assessments must be updated and communicated to all members of staff and volunteers. Control measures may be centred on the following components of Standard Precautions. These include:

- Avoid handling bodily substances and other infected materials;
- If this cannot be achieved always use personal protective clothing;
- Effective covering of cuts, sores or open wounds;
- Effective means to manage spilled bodily fluids and other infectious materials;
- Effective management of sharps;
- Safe disposal means;

- Cleaning of contaminated objects/items;
- Efficient hand washing;

Avoid handling bodily substances and other infected material – Wherever possible instruments and good quality personal protective equipment should be used to avoid direct handling. There are a wide range of aids available, these should be investigated.

Use personal protective clothing - Overalls, over-shoes, goggles, masks and gloves are available and risk assessment should identify requirements for specific roles/work activities. Protective clothing which has come into contact with bodily fluids must be disposed of correctly. Gloves must be changed between clients when completing personal care tasks. Latex gloves must not be worn; vinyl or rubber is preferred. Research shows that latex allergies can develop as a result of prolonged use.

Effective covering of cuts, sores or open wounds – An open wound or lesion on the skin allows infection to bypass the physical barrier provided by unbroken skin. Impervious waterproof dressings must be used to prevent infection.

Effective means to manage spilled bodily fluids and other infectious material- Spill kits containing absorbent materials should be used. Colour coding of cloths and effective disposal after use will also reduce the risk of infection. After the spill kit is used, hot soapy water should be used to clean down the immediate and adjacent areas to remove residue.

Staff must wear protective clothing when cleaning bodily fluids.

Effective management of sharps – Where possible the use of sharps must be avoided but where it is necessary, staff must be trained in both their safe use and safe disposal.

Safe disposal - Body fluids, wipes, incontinence pads as well as protective clothing which has come into contact must be treated as hazardous waste and disposed of in yellow bags within Council premises. In domestic situations it can be disposed of in domestic waste but should always be in a tied plastic bag, rather than just the bin. Sharps waste must be disposed of in UN Standard sharps containers. Sharps waste includes syringes, small items of broken glass etc. If partner agencies conduct work on our premises they must dispose of their waste in accordance with legislative requirements.

General and hazardous waste must be kept separate in all council premises. All premises must use registered waste carriers.

Cleaning of contaminated objects – All cleaning agents used must have a COSHH assessment and containers must be read to ensure that there is no change to previous use or a stronger product purchased.

All areas which have been affected by a spill or where there has been an outbreak must be fully cleaned with appropriate products. Never dry brush or cross contaminate cloths, mops, etc - this will only spread the outbreak. It is recommended that the following colour coding of cloths be used:

Red - high contamination areas such as toilet and bathroom equipment

Green - kitchens and food preparation areas

Blue - general areas

Yellow - infection areas, ie if barrier nursing

The level of infection will dictate hygiene requirements, consideration should be given to:

- (a) Need to isolate areas;
- (b) Strength and type of cleaning agent COSHH assessment will be required to ensure that safety and environmental issues are not compromised;
- (c) Risk Assessments and safe systems of work for the cleaning operation;
- (d) PPE required which may include disposable garments;
- (e) Disposal of equipment after use;
- (f) Health screening for staff.

The NHS Infection Control team, Environmental Health, Emergency Planning and Occupational Health have specialist knowledge of managing high level infections and offer support in managing outbreaks.

In some cases it may be appropriate to utilise the skills of professional cleaning services. If this option is used then risk assessments and safe systems of work must be agreed prior to work to minimise the risk to service users.

Soiled linen and clothing in residential care services should be transferred into red washing bags as soon as removed. These dissolve during the washing period, reducing the handling by employees. Items being sent home with service users should be tied in a plastic bag and then wrapped in another. In large areas of contamination then more robust measures may be required.

Hand Washing - Efficient hand washing is the single most effective activity for reducing the spread of infection. Hand washing before and after the use of personal protective clothing and before procedures including personal care, food handling, cleaning etc is essential and must become standard practice. Contaminated skin should be washed using hot running water, and soap ideally anti-bacterial as soon as possible. The use of alcohol gels is not a replacement for hot water and soap but can be used if not available. Appendix 1 is an effective hand washing technique.

Infection Control Training - This is essential and must be included in the induction package for high risk teams. It must be specific to the risks faced by the team, include preventative measures and good hygiene techniques as well as the use of personal protective equipment. For high risk teams three yearly refreshers must be mandatory.

Immunisation - If good standards of hygiene are followed then immunisation should not normally be necessary. However, there are occasions when immunisation may be offered or promoted. In the case of a national pandemic then the emergency planning team will advise on use of immunisation and assist with sourcing vaccines. If immunisations are offered then an educational awareness on the benefits, side effects and follow up treatments should also be provided by a competent person.

Even with robust systems in place infections may be introduced into the workplace particularly if working with vulnerable members of the public.

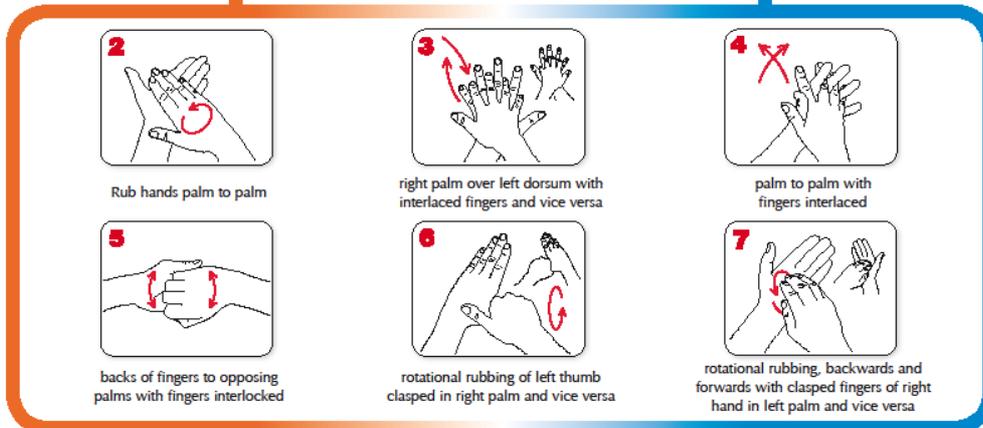
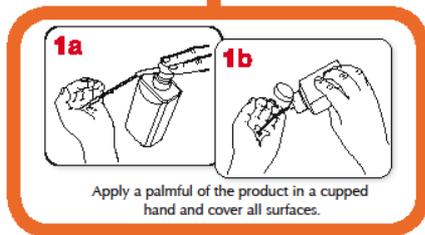
First Aid - First aid items should be available; these may include eye wash, antiseptic wipes, and plasters. Staff injuries/illnesses as a result of work with bodily fluids or

hazardous waste handling must be reported in accordance with the Council's accident and incident reporting procedure using form AIF.

Health Surveillance - dependent on the type of infection, employees and service users may need to be monitored by an appropriate medical team. This may be as basic as motion sampling and the requirement of a clear result prior to return to normal. It is essential that requirements are efficiently communicated and a log is kept on current status.

Notifiable Infections/Diseases - There are a number of infections which are notifiable, this may be to the HSE, Public Health or regulatory body such as CQC. Following an outbreak, a full clean down will be required, this should be completed by competent persons. The risk assessment should be updated if lessons can be learnt for future potential outbreaks.

How to handrub? WITH ALCOHOL-BASED FORMULATION



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