



Policy No: SJD/HS/12	Authorised by: Davina Powell	Review Date: 24th October 2023
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INFECTION CONTROL		

Policy Statement

Infection control is the name given to a wide range of policies, procedures and techniques intended to prevent the spread of infectious diseases amongst staff and service users. All of the staff working in SJD Homes are at risk of infection or of spreading infection, especially if their role brings them into contact with blood or bodily fluids like urine, faeces, vomit or sputum. Such substances may well contain pathogens that can be spread if staff do not take adequate precautions.

SJD Homes believes that adherence to strict guidelines on infection control is of paramount importance in ensuring the safety of both service users and staff. It also believes that good, basic hygiene is the most powerful weapon against infection, particularly with respect to hand washing.

Note:

Under the *Health and Social Care Act 2008*, [Regulations 2014], Reg.12 Safe Care and Treatment, all Managers are required to comply with the "Code of Practice for Health and Adult Social Care on the Prevention and Control of Infections and Related Guidance, July 2015".

The Code of Practice on the prevention and control of infections applies to registered providers of all Health and Social Care in England. The Code of Practice sets out 10 criteria against which the Care Quality Commission (CQC) will judge a registered provider on how it complies with the infection prevention requirement which is set out in the regulations.

As an organisation we have read and considered this document and its application throughout. Although the Code is not mandatory, as an organisation we will use the Code for guidance in meeting our regulatory requirements

The Policy

The aim of SJD Homes is to prevent the spread of infection amongst staff, service users and the local community.

Goals

The goals of SJD Homes are to ensure that:

- Service users, their families and staff are as safe as possible from acquiring infections through work-based activities
- All staff are aware of, and put into practice, basic principles of infection control.

SJD Homes will adhere to infection control legislation:

- The *Health and Safety at Work Act etc. 1974* (HSWA 1974) and the *Public Health Infectious Diseases Regulations 1988*, place a duty on SJD Homes to prevent the spread of infection
- The *Reporting of Incidents, Diseases and Dangerous Occurrences Regulations 1995* (RIDDOR), which place a duty on SJD Homes to report outbreaks of certain diseases as well as accidents such as needle-stick accidents
- The *Control of Substances Hazardous to Health Regulations 2002* (COSHH), which place a duty on SJD Homes to ensure that potentially infectious materials within SJD Homes are identified as hazards and dealt with accordingly
- The *Environmental Protection Act 1990*, which makes it the responsibility of SJD Homes to dispose of clinical waste safely
- The *Food Safety Act 1990*
- The *Health and Social Care Act 2008*, and the accompanying Code of Practice “Code of Practice for Health and Adult Social Care on Prevention and Control of Infections and Related Guidance.

Code of Practice

Criterion 1

- There is a clear governance structure and accountability that identifies our Infection Prevention Control lead and who they are required to report to
- As an organisation we will ensure there are adequate resources in place to secure the effective prevention of infection
- Risk assessments have been carried out which support us in the decisions about what parts of the 10 criterion apply to our service
- SJD Homes will produce the evidence to support any decisions made in infection prevention and control and this will include; implementation of an infection control and cleanliness programme, the infrastructure in place to support this programme and the monitoring and reporting of infections
- All staff will receive suitable, sufficient information, supervision and training required to prevent the risks of infection and when and how to access outside infection control expertise.
- All staff are required to make infection control a key priority and to act at all times in a way that is compatible with safe, modern and effective infection control practice
- Any staff member feeling they don't have access to sufficient facilities and supplies of appropriate equipment have a duty to inform their line manager or supervisor

Key Policies and Processes are in place to ensure they are being followed and regularly updated.

Risk Assessments

- At the commencement of a placement, risk assessments are carried out in relation to the prevention of infection
- When risks are identified, steps are put in place to control these risks
- The identified risks and actions required to be taken to reduce these risks are recorded in the service user's care or support plan
- These actions are monitored and any further steps required are implemented.
- Where necessary, other professionals are involved in actioning of infection control precautions.

The Infection Prevention Control Lead should:

- be responsible for SJD Homes' infection prevention cleanliness, and water safety programme.
- The above programme should have set priorities and objectives to meet the needs of SJD Homes in ensuring the safety of the service users, staff and the public

- oversee the implementation of organisational policies
- report directly to the home manager
- challenge inappropriate practice including antimicrobial prescribing practice
- set and challenge standards of cleanliness
- be an integral part of SJD Homes' implementation of infection prevention and control
- produce an annual statement of compliance and practice and make it available on request
- the annual report will include the progress against the objectives set in the infection control and cleanliness programme

Monitoring and Audit

- An audit strategy is in place to ensure appropriate policies have been developed and implemented
- The annual statement is reviewed and where indicated, acted upon
- Antimicrobial prescribing decisions are regularly reviewed by an appropriate health professional

Criterion 2

- Cleaning routines respect the fact that in a service user's bedroom and other shared areas may have possessions that belong to the individual. Where possible we support the individual to be independent and keep choice and control over their lives including their environment
- With the view of minimising infection, the home manager is the responsible lead for environmental cleaning and decontamination of equipment (if required).
- The environment means the whole of the care premises including the fabric of the building, equipment and water and ventilation and any vehicles used for transportation.
- On a day-to-day basis the person in charge of the shift is responsible in ensuring cleanliness levels are maintained.
- A cleaning and maintenance schedule is in place to ensure the premises is kept clean and in a good state of physical repair.
- The cleaning schedule includes the cleaning, disinfecting and decontamination of equipment such as hoists, beds and commodes following our decontamination policy.
- Advice and information on cleaning, disinfection and infection prevention is available and regularly accessed by our staff.

Criterion 3

All medication is reviewed regularly by our GPs and records kept of all prescribed medication on the service users MAR and also in their care or support plans. This includes anti-microbial prescriptions including allergies, dose, duration and reason for the medication. As an organisation we are aware of the importance of reducing the prescribing of anti-microbial prescriptions but are led by the appropriate health professionals.

Criterion 4

Effective Hand Washing

SJD Homes believes that the majority of cross-infection in a care environment is caused by unwashed or poorly washed hands, which provide an effective transfer route for micro-organisms. SJD Homes believes that regular, effective hand washing and drying, when done correctly, is the most effective way to prevent the spread of communicable diseases.

In SJD Homes:

- All staff should, at all times, observe high standards of hygiene to protect themselves and their service users from the unnecessary spread of infection
- All staff should ensure that their hands are thoroughly washed and dried:

- Between seeing each and every service user where direct contact is involved, no matter how minor the contact
- After using the toilet
- Before handling foodstuffs
- Hands should be washed thoroughly — liquid soaps and disposable paper towels should be used rather than bar soaps and fabric towels
- All cuts or abrasions, particularly on the hands, should be covered with waterproof dressings
- Ordinary soap is considered to be effective for routine use in removing dirt and reducing levels of transient micro-organisms on the skin to acceptably safe levels
- The use of antiseptic or antimicrobial preparations is recommended if service users are known to have an infectious disease or are colonised with antibiotic-resistant bacteria, such as Methicillin Resistant Staphylococcus Aureus
- Antiseptic hand washing solutions may also be used as well as hand washing
- The use of alcoholic products for hand decontamination is not intended to replace washing hands with soap and water but rather to supplement hand washing where extra decontamination is required, or else to provide an alternative means of hand decontamination in situations where standard facilities are unavailable or unacceptable (for example between service users or in unsanitary conditions)
- To be effective, hands should be thoroughly washed before the use of an alcoholic rub and again after the procedure or service user contact has ended.

Visitors

- Visitors are informed of the reasons why they should stay away from the Unit when they have infection
- This is explained in our service user guide and information is on display around the Unit. In these circumstances we encourage visitors to email or telephone to keep in touch with the service user.
- National or local campaign posters also inform visitors of the dangers of infection and the necessity of good hand washing
- Service user and family meetings are used as a forum to explain any infection control issues.
- When there is an outbreak of any infectious disease in the visitors are made aware by various means and a notice is posted on our front door or at reception asking them not to visit.
- If visitors have any concerns about hand washing or infection prevention issues they are encouraged to speak to the person in charge on the day or contact the home manager.
- Visitors are also kept informed of what action is being taken to prevent the spread of any infection and prevent any further occurrences.

Criterion 5

Staff are trained and regularly updated to recognise the signs of an infection. Prompt recognition enables the GP to diagnose and treat quickly and any isolation procedures being put in place to reduce cross infection. The GP and our staff will draw on professional expertise on infection prevention and health protection.

Criterion 6

- As an organisation we ensure that everyone working in the home, including agency staff, volunteers and contractors understand and comply with the requirements of preventing and controlling infection.
- All workers including volunteers have infection control responsibilities in their job description
- Infection prevention and control is part of induction and training is received annually or whenever a situation changes in relation to infection control or further information is required.
- Regular staff competency observations are in place to monitor working practice in all areas of infection prevention and control.

Criterion 7

When isolation is required, a service user's bedroom is used. The room wherever possible is single occupancy and with an en-suite. When this is not possible appropriate further precautions are in put in place after liaising with the GP or an infection prevention and control health professional. Our Isolation policy is put into place.

Criterion 8

This criterion does not apply to Adult Social Care.

Criterion 9

The Use of Protective Clothing

- Adequate and suitable personal protective equipment and clothing should be provided by SJD Homes.
- Sterile gloves are provided for clinical procedures such as applying dressings. These should be worn at all times during service user contact and should be changed between service users. On no account should staff attempt to wash and reuse these gloves.
- Non-sterile gloves are provided for non-clinical procedures.
- The responsibility for ordering and ensuring that supplies of gloves and aprons are readily available and accessible lies with the manager.
- Any member of staff who suspects that they or a service user might be suffering from an allergic reaction to the latex gloves provided should stop using them immediately and inform their line manager. They should then consult their GP.

Outbreaks of Communicable Diseases.

Staff are trained to recognise signs of infections and understand what actions they are required to take. In the event of the suspected outbreak of an infectious disease at SJD Homes, the local Consultant in Communicable Disease Control or Communicable Disease Team should be contacted immediately.

A separate policy is in place.

The Disposal of Sharps (e.g. Used Needles)

- Sharps—typically needles or blades—should be disposed of in proper, purpose-built sharps disposal containers complying with BS7320.
- Sharps should never be disposed of in ordinary or clinical waste bags.
- Staff should never re-sheath needles.
- Boxes should never be overfilled.
- When full, boxes should be sealed, marked as hazardous waste and labelled with the Client's details.
- Staff should never attempt to force sharps wastes into an over-filled box.

- Used, filled boxes should be sealed and stored securely until collected for incineration according to individual arrangements.

In the event of an injury with a potentially contaminated needle staff should:

- Wash the area immediately and encourage bleeding if the skin is broken
- Report the injury to their line manager immediately and ensure that an incident form is filled in
- Make an urgent appointment to see a GP or, if none is available, Accident and Emergency.

Cleaning and Procedures for the Cleaning of Spillages

- Staff should consider spillage of body fluids or body waste as potentially infectious and treat quickly.
- When cleaning up a spillage staff should wear disposable protective gloves and aprons and use the disposable wipes provided wherever possible.

The Handling and Disposal of Clinical and Soiled Waste

- A risk assessment has to be carried out assessing risk and measures are in place to manage the risk and the monitoring and auditing of work arrangements.
- A waste management policy is in place which is monitored and audited.
- All clinical waste should be disposed of in sealed yellow plastic sacks and each sack should be clearly labelled as required.
- Non-clinical waste should be disposed of in normal black plastic bags.
- When no more than three-quarters full, yellow sacks should be sealed and stored safely to await collection by an authorised collector as arranged.
- Staff should alert the manager if they are running out of sacks, disposable wipes or any protective equipment.

Decontamination

SJD Homes has a decontamination policy in place which will be followed by the staff team. It will be monitored and audited by the Manager.

Food Hygiene

- All staff should adhere to SJD Homes' Food Hygiene Policy and ensure that all food prepared for service users is prepared, cooked, stored and presented in accordance with the high standards required by the *Food Safety Act 1990* and the *Food Hygiene (England) Reg 2005*.
- Any member of staff who becomes ill while handling food should report at once to their line manager or supervisor, or to SJD Homes Unit.
- Staff involved in food handling who are ill should see their GP and should only return to work when their GP states that they are safe to do so.

Reporting

Under the *Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR)* SJD Homes is required to report the outbreak of notifiable diseases to the Local Environmental Health Officer, who will inform the Health and Safety Executive (HSE). Notifiable diseases include: cholera, food poisoning, smallpox, typhus, dysentery, measles, meningitis, mumps, rabies, rubella, tetanus, typhoid fever, viral haemorrhagic fever, hepatitis, whooping cough, leptospirosis, tuberculosis and yellow fever.

Records of any such outbreak, specifying dates and times, must be retained, and a completed disease report form sent to the HSE.

In the event of an incident, the Unit Manager is responsible for informing the HSE. RIDDOR information is found on the HSE website and reports should be made using an online form.

Dress Code

SJD Homes has a dress code policy in place which ensures clothing worn by staff when carrying out their duties is clean and fit for purpose.

Immunisation of service users

- A record is kept by the home manager of all immunisations given to service users
- This record is regularly reviewed in line with guidance from Public Health England.
- We liaise closely with the service users GP surgery and offer all service users immunisation as required according to national schedule.

Criterion 10

SJD Homes has a Vaccination policy on place which is followed.

NICE Guidelines

NICE have issued guidelines (CG139) on Infection: Prevention and control of healthcare-associated infections in primary and community care: <https://www.nice.org.uk/guidance/cg139>

Related Policies

Accident and Incident Reporting (RIDDOR)

Contingency and Emergency Planning

Co-operating with Other Providers

Confidentiality

Data Protection

Decontamination

Death of a Service user

Dress Code

Food Hygiene

Good Governance

Notifications

Outbreaks of Communicable Infections

Prevention of Pressure Sores

Protective Clothing and Equipment

Vaccinations

Waste Management

Training Statement

All new staff are required to read the policy on infection control as part of their induction process. Existing staff should be offered training covering basic information about infection control. In-house training sessions should be conducted at least annually and all relevant staff should attend. Training will cover all areas required by the Code of Practice for the prevention and control of infection and related guidance especially the areas listed in Criterion 10 of this Code. The home manager will organise and co-ordinate training.

