

Why The Control of Infection is Important

Older people, disabled and ill people are more susceptible to infection and at greater risk of suffering severe consequences.

Older people have more wear and tear to their bodies, meaning that their natural barriers to infection such as the skin do not work as well, and infection is allowed in more easily. Once the infection is inside the body, the immune system of an older person works less efficiently, resulting in a reduced ability to fight off its effects. Also, the healing process in an older person is slower, resulting in prolonged effects from infection. Food intake and absorption of nutrients is frequently poor in the elderly, diminishing the body's resources for fighting back. For all these reasons, the older person is a more likely target for disease-causing micro-organisms to attack, and they are less able to fight back to a full recovery.

Disabled and ill people can also have fewer physical resources with which to fight infection, as the bodies natural defences against disease may be damaged by disability or illness. Some medicines may also have the side effect of lowering the immune response.

How Infection Can Spread

Infection can spread in a number of ways, including:

- Through the water supply
- Through food and the food chain
- Via animals and insects
- Through air and dust
- Through droplets (ie coughing and sneezing)
- Via contaminated objects (ie a towel which has been shared)
- Person to person

Main Routes of Infection on to and into the Body

To cause infection, pathogenic micro-organisms, such as bacteria and viruses, must break through the armour of the skin surface. They can do this through a natural opening or an unnatural break.

- **Natural openings** in the skin surface include body orifices such as your mouth, ears, nose, urethra, anus and vagina. When tubes are inserted into natural openings in the body, such as a urine catheter into the urethra and up to the bladder, or a naso-gastric tube into the nose and down to the stomach, the tube can become a direct route for infection to travel deep into the body. People with catheters and the like are therefore much more at risk on infection.
- **Unnatural breaks** in the skin surface include an accidental injury, such as a scratch, graze or cut, as well as surgical wounds made by operations. Other unnatural breaks are caused when tubes are inserted through the skin and into the body, such as wound drains or feeding tubes that go directly through the abdomen and into the stomach.

Fungal infections most commonly grow on the skin surface, especially in moist, warm conditions – ie athlete's foot colonising between the toes, or thrush colonising inside the mouth, gut, anus or vagina. **Parasitic infestations**, such as head-lice, can occur in the hair on our heads, our body hair, and in pubic hair.

Who Is Responsible For Infection Control

Infection can affect everyone, so we must all be concerned with it. We all have a responsibility to make sure that everyday activities, such as going to the toilet; bathing; preparing and eating food, don't increase the likelihood of spreading germs.

When an activity is carried out frequently, it becomes a habit. To control infection we must stop our habits from becoming bad habits! (eg sampling food then returning the spoon to the pot, or running our fingers quickly under the tap instead of washing them properly). We all mix closely with other people, and through this, we face the potential risk of catching or passing on infection a number of times a day. Infection Control is therefore *everyone's* responsibility.

Legislation

In the UK, most laws to do with Infection Control come under four Acts of Parliament:

- The Health and Safety at Work Act 1974
- The Management of Health and Safety at Work Act (amended 1994)
- The Public Health (control of diseases) Act 1984
- The Food Safety Act 1990

In addition, the following four regulations all come under one of the above Acts:

- The Control of Substances Hazardous to Health 2002 (**COSHH**)
- The Reporting of Injury, Disease and Dangerous Occurrences Regulations 1995 (**RIDDOR**)
- The Public Health (Infectious Diseases) Regulations 1988
- The Food Safety (General Food Hygiene) Regulations (DoH 1995)

Under the Health and Safety at Work Act 1974, **Employers** and **Employees** (including volunteers) are **both** responsible for upholding infection control laws.

High Risk Areas

The potential for catching and spreading infection is higher in the following *four key areas*:

1. **Food Hygiene** – anything to do with food: handling, storing, preparation, cooking, preserving and eating of all food and drink. Food from animals, such as meat, milk, eggs and fish are more at risk of being infected.
2. **Personal Hygiene** - hand washing, bathing, toilet hygiene (including during menstruation), hair and nail care, body piercing, jewellery, laundering clothes and uniform, and personal and sexual health. Any activity that brings us into contact with body fluids (human or animal) carries a higher risk of spreading infection. *Body fluids* include the following: *Blood, Urine, Faeces, Sputum (mucus or phlegm, mixed with saliva, which can then be spat from the mouth), Saliva, Nose secretions, Semen, Vaginal secretions.*
3. **Living Conditions** - adequate sanitation, clean water, temperature control, housing facilities, waste disposal, avoiding overcrowding, and cleanliness.
4. **Management of Illness** - especially contagious diseases.

Infection Control Measures

An Infection Control Measure is literally **any** action you take to reduce the chance of spreading infection. The *four main precautions* are:

1. Create a Protective Barrier

It is vitally important to create a protective barrier between our own body and the body fluids of others, generally by using the appropriate protective clothing, such as disposable gloves, aprons etc. A supply of these is kept within our daycare centre, and also in our minibus for emergencies and outings. Please ensure that you are familiar with their whereabouts. Our first-aid kit also contains a mouth protector in the event of mouth-to-mouth resuscitation being required.

Always protect yourself and our service users by using the appropriate protective clothing.

2. Hand Washing

Wash your hands thoroughly and frequently, especially after physical contact with a Service User or contact with body fluids. Do this even if you have been wearing gloves. Wash your hands after: visits to the toilet; eating; smoking; coughing; sneezing or blowing your nose; handling waste food or refuse; handling cleaning chemicals; touching pets or animals; gardening; and after assisting Service Users with personal care or in the toilet. (see appendix re correct hand-washing procedures).

Please also encourage Service Users to wash their hands regularly, in all situations identified above; before eating snacks and meals; and after communal activities such as dominoes.

Please use the skin sanitizer gel that is available outside the toilets in our daycare centre, and encourage all Service Users to do the same.

This is not a substitute for washing hands... Always wash hands first.

3. *Clean Equipment*

All equipment must be cleaned carefully after every use, using the correct methods and recommended disinfectants. All seats and settees should be cleaned daily with appropriate anti-bactericidal sprays.

Clean the centre and all equipment regularly and thoroughly.

4. *Awareness*

Be aware of risks and understand how to reduce them. Information and knowledge give people a chance to act responsibly. Policies, Procedures and Training are all vital in infection control.

Be aware, be responsible, and promote the control of infection.

“Higher Risk Tasks” for Staff and Volunteers

The type of care that is undertaken by staff and volunteers generally hold a greater risk of cross infection due to the close physical contact and personal care that is sometimes required. The following is a list of the *five main* tasks which have a higher risk of contamination, along with guidelines on how to reduce the risk of cross infection:

1. *Assistance in the Toilet*

This is a prime area of care for spread of infection from faeces. Careful urinary catheter and colostomy care is also important for preventing the spread of infection, as these tubes create a direct entry into the body. *You must:*

- **Wear a disposable apron and disposable gloves**
- **When you wipe a female service user’s bottom, always wipe from front to back, to prevent pathogens crossing from anus to urethra or vagina.**
- **Whenever you help a service user go to the toilet, make sure you also help them to wash their hands afterwards. If it is not possible to get them to the sink, offer a bowl of hot water and soap. If this isn’t possible, use antiseptic wipes and hand-gel. If service users go to the toilet without assistance, discretely encourage them to wash their hands and use hand-gel.**
- **You must always wash your hands after visiting the toilet yourself and after helping others with toileting, even if you have been wearing disposable gloves.**
- **Always take care when discarding used gloves and aprons, using the designated bin.**

2. *Assistance with Bathing, Showering and Personal Hygiene*

This involves very close body contact with another person, increasing the risk of cross-infection. Wounds and sores may be soaked, increasing the risk of infection not only spreading between different people, but from one part of the body to another. Shaving the face or legs holds the risk of nicks and cuts and contamination through blood. *You must:*

- **Wear a disposable apron and disposable gloves**
- **Wash cleaner areas first – face, arms, hands and trunk**
- **Use separate (preferably disposable) cloths for the genital area**
- **Change sink or bowl water between clean and ‘dirty’ areas**
- **Dry the person carefully because bacteria thrive in the moist areas of body creases (under arms, breasts and stomach folds)**
- **Clean the bath, shower, sink or bowl after each use**
- **Wear disposable gloves to shave others (be aware of the risk of puncturing gloves)**
- **Treat shaving cuts immediately. Clean up blood and cover any wound with a plaster.**
- **Always take care when discarding used gloves and aprons, using the designated bin.**

3. Meal Times

This includes preparation of food as well as serving it and helping service users to eat. **You must:**

- Carry out scrupulous hand washing in between food handling tasks and when moving to and from kitchen
- Remove any disposable aprons that have been used for care or cleaning tasks
- Wear a fresh apron or protective clothing suitable for food serving
- Try to avoid coughing or sneezing over or near food
- No tasting using fingers, and no placing spoon used for tasting back into food
- Follow all the guidelines in our *Food Handler's Personal Hygiene Control Policy*
- Encourage Service Users to wash hands before eating snacks and meals.

4. Moving and Handling

This often involves very close contact with service users, other staff and volunteers. **You must:**

- If appropriate, wear a disposable apron and gloves. As part of a risk assessment, you will need to assess whether it is appropriate for each service user
- Wash your hands before and after contact
- Clean any moving and handling equipment regularly
- Always take care when discarding used gloves and aprons, using the designated bin.

5. Emergency and First Aid

After an accident or emergency, blood and body fluids are a high risk. It is not unusual for someone to wet or soil themselves after an accident. If on an outing with service users, remember to take the first aid kit and bag containing gloves, aprons, gel, clothing and continence aids. **You must:**

- Put on protective clothing (if, in an emergency, you do not have disposable apron and gloves available, use anything that creates a barrier, eg a plastic bag)
- Cover wounds with a clean dressing
- Clear any waste soiled with body fluids from the incident safely
- Complete an accident or incident report, detailing what happened and the action taken

Cleaning Spillages of Body Fluids

If a body fluid is *spilt*, you must remember that it is potentially infectious and apply universal precautions to deal with it:

- Deal with the spillage immediately. You cannot leave a spillage until routine cleaning takes place
- Cordon off the area to prevent anyone slipping in the spillage
- Before you touch anything, wear disposable gloves and apron
- Mop up excess fluid using paper towels and dispose of these in the appropriate hazardous waste bin
- Use the appropriate cleaning and disinfecting solutions
- Rinse the area with very hot water
- Leave to dry, protected by appropriate hazard warning signs for a wet floor
- Clean mops in disinfectant, rinse in very hot water and leave to dry head up
- Dispose of your protective clothing in the appropriate hazardous waste bin
- Wash your hands

On occasions, you may have unexpected contact with body fluids that suddenly splash out at you. In this event, you should:

- Wash your hands
- Wash the affected area of skin using hot water and disinfectant (just water if eyes)
- Inform the Co-ordinator or designated responsible person
- Complete an accident report form

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General Cleaning

Maintaining a clean working environment reduces the opportunity for the pathogens to thrive. Cleaning removes pathogen contamination and reduces the opportunity for cross infection to take place. Clean as you go, or as soon as practicably possible.

Mops and Cloths must be:

- Rinsed, washed and changed frequently
- Stored heads up so they can dry
- Colour coded – eg red for use in toilet area only.

Detergent and Cleaning Products:

- Store all cleaning materials safely and use according to instructions

Responsibilities

Management, Staff and Volunteers should undertake to ensure that:

- Appropriate training is available for, and completed by all staff and volunteers
- Regular information and updates are provided and read
- They comply with all legislative requirements
- They actively promote the Control of Infection
- A safe and healthy work environment is maintained
- Stocks of disposable gloves, protective aprons, sanitising hand-gel etc are readily available and used as appropriate.

Control of Infection Manual

A copy of the Health Boards '*Control of Infection Manual for care homes and day centres*' is kept within the office of our centre. This manual contains in-depth information about the Control of Infection, along with actions to take in the event of any situation concerning the outbreak of an infection. It also contains the local contact number for the Health Boards Infection Control Team and their advisers. This manual can be freely accessed by all staff and volunteers.

Communicable Diseases

A communicable disease is one that can be passed on from person to person. Under The Public Health (control of diseases) Act 1984, a number of diseases are regarded as '*notifiable*', which means that they must be reported, by law, to the Department of Health.

The following diseases are the main notifiable diseases (a fuller list is contained in the '*Control of Infection Manual for care homes and day centres*': Chicken Pox, Food Poisoning (caused by various bacteria), Hepatitis, Influenza, Legionnaire's, Lyme Disease, Measels, Meningitis, Mumps, Rabies, Rubella (German Measels), Tuberculosis (TB), Whooping Cough.

Anthrax, cholera, diphtheria, dysentery, malaria, plague, polio, scarlet fever, smallpox, typhoid and yellow fever are also notifiable. These occur in other parts of the world, and if you travel you may be advised to be vaccinated against them, but they are rarely problems in the UK.

The Group Co-ordinator, or in his absence the designated responsible person, should undertake to notify the Department of Health as soon as practibly possible on discovering a notifiable disease within our centre, group of service users, or team of staff and volunteers.

The Care Inspectorate will also have to be notified.

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Hand Washing

The following hand washing and drying technique should be used as standard:

- Remove jewelry and watches, and roll up sleeves
- Use warm running water, wet hands
- Use an adequate amount of soap from a soap dispenser
- Rub hands, palm to palm
- Rub palms over backs of hands, interlacing the fingers
- Rub palm to palm with fingers interlaced
- Clasp fingers to rub backs of fingers
- Grasp thumb and use rotational rubbing
- Finger tips together, rubbing into palms
- Thoroughly dry, using paper towel
- Use paper towel to turn tap off
- Avoid touching bin with clean hands when disposing of paper towel.

For further information and diagrams of correct hand-washing procedures, please see the copy of “Hand Hygiene Policy and Procedure”, which is available in the office. Produced by the Infection Control Team.

A guide on safe handwashing can also be downloaded from:

<https://www.food.gov.uk/sites/default/files/media/document/handwashing.pdf>

Contacts

- Environmental Health Department _____ 0845 740 6080
- Lanarkshire Health Board Infection Control Team _____ 01698 863 215
- Care Inspectorate www.careinspectorate.com _____ 0345 600 9527
- Health Protection Scotland, Infection Control Team _____ 0141 300 1175

See also, the **Health Protection Scotland** website, at: <http://www.hps.scot.nhs.uk>

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