# Infection Control policy

Yeoman Park Academy September 2024



# Contents

1	Purpose	3
2	Objectives	3
3	Document Review	3
4	Definition: Control and Monitoring	3
5	Prevention of Infection	4
	5.1 Staff Responsibilities	4
	5.2 Hand Hygiene	4
	5.3 Protective Clothing	4
	5.4 Laundry	5
	5.5 Gloves	5
	5.6 Prevention in Classrooms	5
	5.7 Prevention in the Toilet and Bathrooms	5
6	Contamination Incidents	5
	6.1 Bag Breakages and Blood Spillages	6
	6.2 Caution when using Chlorine based product	6
	6.3 Method	6
7	Control of Waste	6
	7.1 Clinical Waste	6
	7.2 Sharps	7
	7.3 Non -Clinical Waste	7

1 Purpose

The Academy recognises the need under "Health and Safety Legislation" for maintaining an

effective management system for prevention and control of infectious disease within the academy,

and will as far as reasonably practicable:

a) Prevent the occurrence of any infectious disease.

b) Limit the spread of any infectious disease.

c) Limit the degree and duration of any such illness and consequently minimise any suffering or

distress caused.

2 Objectives

The Principal and Business Lead are responsible for the implementation of the policy and will

specifically:

a) Provide adequate resources and staffing.

b) Provide adequate information, instruction and training to staff, and where necessary, other

persons involved.

c) Report all cases of disease coming within the scope of this policy to the proper authority.

d) Liaise with any persons officially authorised to investigate or control infectious disease.

e) Inform the Governing Body.

3 Document Review

This policy will be reviewed annually unless circumstances dictate that it should be reviewed

earlier, all amendments to be recorded.

4 Definition: Control and Monitoring

Definition an outbreak is defined as more than would be expected of the same infection in the

Academy.

3

Stakeholders, and all relevant agencies will be informed by the Business Lead after the situation has been evaluated and the conclusion is a suspected outbreak.

#### **5 Prevention of Infection**

### 5.1 Staff Responsibilities

Each member of staff is accountable for their own actions and must follow safe practices

Any member of staff suffering from diarrhoea and /or vomiting must not come to work or, if already at work, must go home immediately. Their return to work should be after the Diarrhoea and vomiting have ceased. This does not have to be 48 hours after the last bout if the member of staff is feeling well enough to return.

#### 5.2 Hand Hygiene

Staff should ensure wounds and moist skin conditions are always covered with a waterproof dressing; the dressings are available in the first aid boxes.

Hands should be washed / sanitised:

- Whenever hands have become visibly soiled
- After using the toilet, blowing the nose, covering a sneeze
- Before and after removing protective clothing
- · After handling contaminated items i.e. pads

Hands must be wet up to the wrists before applying the cleanser and rubbing vigorously, every trace of lather must be rinsed off, it is very important to use running water. Dry thoroughly using the paper towels, take special care to dry between fingers.

# 5.3 Protective Clothing

To avoid the spread of infection and protect the wearers clothing "Disposable Plastic Aprons" should be worn in all activities that may be worn in all activities that may result in contamination of bodily fluids, clothing with blood or excreta. Before carrying out any other activity between different children the apron should be discarded, and the hands washed.

#### 5.4 Laundry

Linen should be removed, and disposable gloves and aprons are to be worn when handling soiled or wet laundry. The wash is to be done at the highest temperature and washed separately.

#### 5.5 Gloves

Gloves are to be worn when dealing with infected materials, body fluids, potentially infected blood, wounds or certain" health and safety" reasons e.g. certain cleaning agents.

To avoid cross infection, they are to be used only once

- · Wash hands before putting on gloves
- · Prior to removing, wash with gloves on, use soap and water
- Do not puncture when removing, remove carefully
- Place in appropriate waste container for disposal

#### 5.6 Prevention in Classrooms

- Treatments are to be carried out as far as possible
- Waste products to be double bagged
- Blood spillage and Bag Breakage must be dealt with promptly in accordance with procedure, wearing disposable gloves and using the appropriate cleaning fluid.
- All surfaces to be wiped with sterilising fluid.

#### 5.7 Prevention in the Toilet and Bathrooms

If the walls and ceilings are visibly soiled, clean using hot water and detergent. Splashes of blood, urine or known contaminated material are to be cleaned immediately using hypochlorite

All cleaning equipment must be discarded of appropriately

#### 6. Contamination Incidents

#### 6.1 Bag Breakages and Blood Spillages

Any person dealing with bag breakages or blood Spillages must wear disposable gloves; a plastic apron and eye protection where appropriate (refer to The Control of Substances Hazardous to Health Regulations 1994)

If the incident involves blood spillage, use a granular chlorine-based disinfectant such as Precept to contain and solidify spillages and avoid further spread of contamination. If the spillage is greater than 30ml or a quarter of a cup remove the bulk of it by physical means first, then disinfect the remainder.

#### 6.2 Caution when using Chlorine based product

- Avoid contact with skin, eyes and mouth.
- Do not mix with acids, such as urine.
- Ensure room/area is well ventilated.
- Replace cap after use and store back in the dry area of the COSHH cupboard.

#### 6.3 Method

- Sprinkle granules over contaminated area/ spillage to cover and absorb the liquid. Leave for at least two minutes after application. If spillage has already dried, see below
- After two minutes, remove all spillage material with paper towels. Double bag and discard into the relevant bin.
- If spillage has already dried, apply granules to a wet paper towel and clean up spillage
  area. Discard paper towels into a bag. Finally dispose of apron and gloves as clinical waste
  and wash your hands.

#### 7 Control of Waste

The responsibility for the day-to-day management of clinical waste rests with the Principal of the Academy. All staff must follow the rules for the disposal waste.

#### 7.1 Clinical Waste

The following must be discarded in double bags and then put in the relevant bin outside.

- Soiled surgical dressings, swabs and other contaminated waste from treatment areas.
- Material other than linen from cases of infectious disease.
- All human tissues (whether infected or not) and all related swabs and dressings.
- Tampons and sanitary towels to be disposed of in Sanitary bins.

# 7.2 Sharps

The following to be disposed of in a sharp's container, Discarded razors, syringes, needles, cartridges, small items of broken glass and any other sharp instruments

## 7.3 Non -Clinical Waste

General waste should be disposed of in black bags i.e. non-contaminated paper and household materials