

St Albans Mencap

Charity number: 210073

stalbansemencap.org.uk

Infection Control Policy

St Albans Mencap policy to ensure adequate measures are in place to stop the spread of infectious disease throughout staff groups and clients, and that all staff are aware of their responsibility for infection control.

Document control:

Version:	Date approved:	By:	Review due:
1.0			

Summary of changes:

Version:	Changes:
1.0	Converted old July 2021 version to new format (May 2026) for review

Policy Statement

Infection control is a critical element in the running and management of the services provided by St Albans Mencap. Adequate measures are required to be in place to stop the spread of infectious disease throughout staff groups and clients, and all staff are responsible for the implementation of this policy.

Clients are particularly susceptible to contracting and transmitting infections due to several factors; including a higher degree of close contact with others in particular during personal care and feeding support.

Staff are required to minimise the risk of cross infection and contamination by:

Handwashing

This simple procedure may be the most effective weapon against the spread of infection and cross contamination. All staff should ensure that before, during and after work their hands are thoroughly washed and dried regularly. Liquid soap and disposable paper towels should be used wherever possible rather than bars of soap and fabric towels.

Hand washing should be repeated regularly throughout the day, although particular when carrying out the following:

- a. After removing gloves
- b. Before any personal care procedures
- c. Handling sterilised feeding equipment
- d. After handling any bodily fluids, waste or soiled items
- e. After using the toilet
- f. Before and after handling food
- g. Eating/drinking or feeding a client
- h. Before touching any type of open wound
- i. After contact with blood
- j. After handling contaminated equipment
- k. Caring after an unwell client/colleague
- l. Sneezing/blowing nose
- m. Touching animals, cages

Alcohol based hand rubs can be useful for rapid hand decontamination between brief interactions with children, particularly where access to hand washing facilities may be lacking, however it should be remembered that alcohol hand rubs should never be used to replace effective hand washing.

The Use of Gloves and Protective Clothing

Personal Protective Equipment (PPE) (gloves, aprons and face masks) will be provided and must be used as appropriate (as stated in the risk assessments) when coming into contact with bodily fluids or potentially contaminated equipment.

PPE is required when in close contact with a client, colleague to stop the spread of Covid-19, including during personal care and first aid assistance.

Never use the same PPE for more than one client or episode of personal/first aid care.

Handling and Disposing of Clinical Waste

Any clinical waste produced will be disposed of in sealed 'yellow' plastic sacks for incineration at the end of each day and placed in the yellow clinical waste bins provided. Clinical waste is defined as:

- a. Soiled surgical dressings, swabs or other contaminated waste from treatment areas.
- b. All human tissue including blood
- c. Waste material other than bed linen which has been assessed as posing a potential risk if disposed of normally
- d. Items used in disposal of urine, faeces and other bodily secretions.
- e. Worn PPE.

Cleaning

Premises (including floors, worktops, equipment and toilets) will be kept clean and spillages will be dealt with promptly using appropriate PPE and cleaning products.

The spillage of any bodily fluid such as blood, urine, or faeces should be cleaned as quickly as possible and with caution.

Cleaning products and procedures are dependent on the premises/hire venue in which our services are operating.

Germs can survive on environmental surfaces for varied periods of time, from hours to months. The environment should be appropriately risk assessed and cleaned regularly to reduce the risk of cross contamination, particularly in areas such as toilets and kitchens.

Food Hygiene

All staff handling food preparation should be trained in food hygiene. Correct procedures for buying, storing, preparing, cooking, cooling and disposing of food should be followed at all times.

Training

All staff should make themselves aware and up to date with this policy, alongside attending yearly Infection Control training.

Outbreak

An infection 'outbreak' refers to occurrences of infectious disease that affect two or more clients or staff, the common outbreaks are Covid-19, flu, gastroenteritis, diarrhoea and vomiting.

Infections can be transmitted through direct contact and can spread rapidly. Contact with contaminated people, surfaces or objects, particularly those contaminated with faeces or vomit can easily spread, as can consuming contaminated food or water.

Staff or clients with a confirmed case of infectious disease, including Covid-19 should be isolated from the remaining group with a staff member in full PPE to support until they are able to be collected to return home. Cleaning should then take place once the staff member or client has left the premises, to reduce the spread of infection.

Staff members and clients who have come into contact with the individual will be made aware and asked to isolate upon the confirmed positive case.

Staff or clients will be asked not to return to St Albans Mencap until they are symptom free or passed the required length of absence for their illness (as below).

Reporting

Symptoms observed or recorded in more than 2 clients or staff will indicate a possible outbreak. In these circumstances staff teams and clients will be made aware of the outbreak, with a potential closure of service if deemed necessary.

If an outbreak is confirmed St Albans Mencap managers will be responsible for informing the various bodies, including Public Health England, Ofsted, CQC and Hertfordshire County Council.

Immunisations

Immunisations help to make the body's defence system respond to a weakened attack by a disease agent and produce defence mechanisms in the form of antibodies. These antibodies remain in the body ready to fight off any diseases they may encounter in the future. St Albans Mencap therefore encourages all staff and clients to ensure their immunisations are up to date, including Covid and seasonal influenza, however St Albans Mencap respects the decision by any staff member or client who chooses not to have their immunisations.

Exclusions from Services

Infection	Exclusion period	Comments
Athlete's foot	None	Athlete's foot is not a serious condition. Treatment is recommended.
Chicken pox	Five days from onset of rash and all the lesions have crusted over	Pregnant women who have not had chicken pox to contact GP.
Cold sores (herpes simplex)	None	Avoid kissing and contact with the sores. Cold sores are generally mild and heal without treatment
Conjunctivitis	None	If an outbreak/cluster occurs, consult governing bodies
Covid	10 days isolation	Anyone recently in contact with individual also required to isolate. Report outbreaks to governing bodies.
Diarrhoea and vomiting	Whilst symptomatic and 48 hours after the last symptoms.	Report outbreaks to governing bodies.
Diphtheria *	Exclusion is essential. Always consult with	Preventable by vaccination. Family contacts must be excluded until cleared to return.

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	governing bodies	
Flu (influenza)	Until recovered	Report outbreaks to governing bodies.
Glandular fever	None	
Hand foot and mouth	None	Contact governing bodies if large numbers are affected. Exclusion may be considered in some circumstances
Head lice	After first treatment	Treatment recommended only when live lice seen
Hepatitis A*	Exclude until seven days after onset of jaundice (or 7 days after symptom onset if no jaundice)	In an outbreak of hepatitis A, your local HPT will advise on control measures
Hepatitis B*, C*, HIV	None	Hepatitis B and C and HIV are blood borne viruses that are not infectious through casual contact. Contact governing bodies for more advice
Impetigo	Until lesions are crusted /healed or 48 hours after starting antibiotic treatment	Antibiotic treatment speeds healing and reduces the infectious period.
Measles*	Four days from onset of rash and recovered	Preventable by vaccination (2 doses of MMR). Promote MMR for all clients and staff. Pregnant staff contacts should seek prompt advice from their GP or midwife.
Meningococcal meningitis*/ septicaemia*	Until recovered	Meningitis ACWY and B are preventable by vaccination (see national schedule @ www.nhs.uk). Governing body will advise on any action needed
Meningitis* due to other bacteria	Until recovered	Hib and pneumococcal meningitis are preventable by vaccination (see national schedule @ www.nhs.uk) Governing body will advise on any action needed
Meningitis viral*	None	Milder illness than bacterial meningitis. Siblings and other close contacts of a case need not be excluded.
MRSA	None	Good hygiene, in particular handwashing and environmental cleaning, are important to minimise spread. Contact governing bodies.
Mumps*	Five days after onset of swelling	Preventable by vaccination with 2 doses of MMR. Promote MMR for all clients and staff.
Ringworm	Not usually required.	Treatment is needed.
Rubella (German measles)	Five days from onset of rash	Preventable by vaccination with 2 doses of MMR. Promote MMR for all clients and staff. Pregnant staff contacts should seek prompt advice from their GP or midwife
Scarlet fever	Exclude until 24hrs of appropriate antibiotic treatment completed	A person is infectious for 2-3 weeks if antibiotics are not administered. In the event of two or more suspected cases, please contact local health
Scabies	Can return after first treatment	Household and close contacts require treatment at the same time.

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Slapped cheek /Fifth disease/Parvo virus B19	None (once rash has developed)	Pregnant contacts of case should consult with their GP or midwife.
Threadworms	None	Treatment recommended for individual and household.
Tonsillitis	None	There are many causes, but most cases are due to viruses and do not need an antibiotic treatment
Tuberculosis (TB)	Always consult your local HPT BEFORE disseminating information to staff/parents/carers	Only pulmonary (lung) TB is infectious to others. Needs close, prolonged contact to spread
Warts and verrucae	None	Verrucae should be covered in swimming pools, gyms and changing rooms
Whooping cough (pertussis)*	Two days from starting antibiotic treatment, or 21 days from onset of symptoms if no antibiotics	Preventable by vaccination. After treatment, non-infectious coughing may continue for many weeks.