

SILVA CARE LTD

INFECTION CONTROL POLICY

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 the organization 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.

Policy Statement

This agency 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.

Goals

The goals of the organisation are to ensure that:

1. service users, their families and staff are as safe as possible from acquiring infections through work-based activities
2. all staff at the organisation are aware of and put into operation basic principles of infection control
3. service users are empowered to make decisions about their healthcare which will protect them from unnecessary infection risks.

Infection Control Procedures

In this organisation:

1. 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
2. the management of the organisation will make every effort to ensure that staff working in the homes of service users have access to sufficient facilities and supplies of appropriate equipment to ensure that they can implement effective infection control procedures and techniques
3. any staff who does not feel that they have access to sufficient facilities and supplies of appropriate equipment to ensure that they can implement effective infection control procedures and techniques have a duty to inform their line manager or supervisor

Effective Hand Washing

This organisation 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. The organisation believes that regular, effective hand washing and drying, when done correctly, is the single most effective way to prevent the spread of communicable diseases. Staff who fail to adequately wash and dry their hands before and after contact with service users may transfer micro-organisms from one service user to another and may expose themselves, service users and the public to infection.

In this organisation:

1. all staff should, at all times, observe high standards of hygiene to protect themselves and their service users from the unnecessary spread of infection
2. all staff should ensure that their hands are thoroughly washed and dried:
 1. between seeing each and every service user where direct contact is involved, no matter how minor the contact
 2. after handling any body fluids or waste or soiled items
 3. after handling specimens
 4. after using the toilet
 5. before handling foodstuffs
 6. before and after any care or clinical activity
3. hands should be washed thoroughly — liquid soaps and disposable paper towels should be used rather than bar soaps and fabric towels whenever possible
4. all cuts or abrasions, particularly on the hands, should be covered with waterproof dressings at all times
5. 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
6. 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 (MRSA)
7. antiseptic hand washing solutions may also be used in situations where effective hand washing is not possible
8. 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 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)
9. to be effective hands should be thoroughly washed before the use of an alcoholic rub and again after the procedure or patient contact has ended.

The Handling and Disposal of Clinical and Soiled Waste

- All clinical waste should be disposed of in such a way that is compliant with the law and with locally agreed arrangements and protocols.
- Non-clinical waste should be disposed of in normal plastic bags.

The Use of Protective Clothing

- Adequate and suitable personal protective equipment and clothing should be provided by the organisation.
- All staff who are at risk of coming into direct contact with body fluids or who are performing personal care tasks should use disposable gloves and disposable aprons.
- The responsibility for ordering and ensuring that supplies of gloves and aprons are readily available and accessible lies with senior staff.
- All gloves provided are non-latex.

Cleaning and Procedures for the Cleaning of Spillages

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

The Handling of Specimens

- Specimens should only be collected if ordered by a GP.
- All specimens should be treated with equally high levels of caution.
- Specimens should be labelled clearly and packed into self-sealing bags before being taken to the doctors.
- Non-sterile gloves should be worn when handling the specimen containers and hands should be washed afterwards.

Food Hygiene

- All staff should adhere to the organisation's food hygiene policy and ensure that all food prepared in service users homes 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) Regulations 2005.
- Any member of staff who becomes ill while handling food should report at once to his or her line manager or supervisor, or to the agency office.
- 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

The RIDDOR obliges the organisation to report the outbreak of notifiable diseases to the 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 must be kept specifying dates and times and a completed disease report form must be sent to the HSE.

In the event of an incident, Lyn Isaac is responsible for informing the HSE.



RIDDOR forms are kept in the central office

In the event of the suspected outbreak of an infectious disease at the organisation, the local Consultant in Communicable Disease Control or Communicable Disease Team should be contacted immediately.

Training

All staff are provided with infection control training as part of their induction and is updated annually.

Aaron Armoogum is responsible for organizing and coordinating training

Date Reviewed:	Signature	Next Renewal Date
06/08/2014	 Sharon Moore	06/08/2015
06/08/2015	 Sharon Moore	06/08/2016