Infection Control Policy

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Policy Statement

Age UK York provides a range of services and support for older people within the City of York and surrounding areas. In carrying out these services and providing this support, staff and volunteers working for Age UK York may be at risk of contracting or spreading infection. This policy document outlines the step-by-step prevention and control processes which should be followed, to minimise and mitigate infection risks, enabling the organisation’s operations to be carried out safely at all times and in all circumstances.

Introduction

This policy is intended for all employees carrying our work for Age UK York, their supervisors and managers. It includes both paid staff and volunteers. The policy is also for the trustees of the charity.

Responsibilities and Accountability

Ultimate responsibility

The Chief Executive Officer will oversee the implementation of the policy, ensuring enough resources are in place to support the training of staff in infection control practice, the purchase of adequate protective equipment and managers are supported to fulfil their responsibilities.

Managers and Supervisors

Managers and supervisors will ensure that staff:

- Are aware of and have access to this policy
- Have had appropriate training in infection prevention and control
- Have adequate support and resources to implement, monitor and take corrective action to comply with this policy
- They regularly monitor the implementation of the infection control policy, monitoring any near miss incidents identified by employees and volunteers

Employees and Volunteers

All employees and volunteers should follow this policy and must

- Show their understanding by applying the infection prevention and control principles in this policy
- Maintain competence, skills and knowledge in infection prevention
- Report to managers any concerns about the implementation of this policy or deficit in their knowledge and skills regarding infection control
- Report to managers any ‘near misses’ in terms of infection control, so these can be monitored, and policies and practices amended if necessary
The policy is not contractual and may be changed subject to the approval by the Board of Trustees and consultation with employees.

**Procedures and Implementation**

All staff are to follow standard infection control precautions when interacting with older people using Age UK York services. The precautions must always be followed, whether there is a known infection risk, or not.

Precautions will include:

- Assessment of infection risk in care plan
- Hand hygiene
- Respiratory and cough hygiene
- Personal Protective Equipment
- Safe Management of equipment and the care setting

**Assessment of infection risk in care assessments**

All care plans must consider the specific infection risk for each service user. If there are any specific infection risks identified in the care plan, specific precautions must be clearly identified and documented. These must be shared with all members of staff working with the service user and if required training must be undertaken in these specific precautions.

When reviewing care plans, consideration should be given to whether specific infection risk has changed.

**Hand hygiene**

All staff must have regard to the hand hygiene procedures. For those undertaking personal care tasks, hand hygiene must be performed:

- Upon entering the place where the personal care will take place (for example the person’s home)
- Immediately prior to leaving where the personal care took place
- Before touching medication boxes, medication sheets or the older person’s notes
- Before preparing food
- After touching or emptying rubbish bins
- Immediately before any episode of personal care given to an older person (for example bathing/showering, transporting an older person)
- Immediately after any episode of personal care given to an older person
- Immediately after any exposure to bodily fluids
- Immediately after any other activity or contact with an older person’s surroundings which could potentially result in hands becoming contaminated
- Immediately after the removal of gloves or when hands are visibly soiled or potentially contaminated with bodily fluids.
Hand hygiene must follow the steps below

- Forearms must be bare below the elbow whenever delivering personal care to older people.
- All hand and wrist jewellery must be removed
- Fingernails must be kept clean and short, and artificial nails and nail products must not be worn at work
- All cuts and abrasions must be covered with a waterproof dressing.

All staff and volunteers must follow good hand washing techniques. Annex 1 has the full NHS guidance for effective hand washing

**Respiratory and cough hygiene**

Respiratory and cough hygiene will minimise the transmission of respiratory illness.

All staff must follow good respiratory and cough hygiene, including:

- Covering the nose and mouth with a disposable tissue when sneezing, coughing, wiping and blowing the nose
- Dispose of all used tissues promptly into a waste bin
- Wash hands according to hand hygiene advice after coughing, sneezing and using tissues
- Where there is no running water use antibacterial hand wipes
- Keep contaminated hands away from eyes, nose and mouth

**Personal Protective Equipment**

All PPE should be:

- Put on and taken off in line with training and guidance from Public Health England (Annex 2)
- Worn in line with latest government guidance, as communicated by your service manager
- Located close to the point of use
- Stored to prevent contamination in a clean, dry area until required for use
- Items should only be used once unless specified otherwise by the manufacturer
- Changed immediately after each patient and/or after completing a procedure or task
- Disposed of correctly, either placed in the relevant disposal bin or bagged up if no bin is accessible
- Reusable items such as face shields must be decontaminated after each use.

Gloves must be:

- Worn when performing care tasks
• Changed immediately after completing each care task
• Changed if a tear, or perforation is suspected
• Well-fitting

Aprons must be:
• Worn when performing care tasks
• Changed after completing a care task

Fluid-resistant surgical face masks must be
• Well-fitting and fully cover the mouth and nose
• Removed or changed regularly and immediately when damp

Footwear must be:
• Visibly clean, non-slip and well-maintained and cover the entire foot

Safe Management of equipment and the setting

Infection may be transmitted on shared equipment or surfaces touched by different people.

Staff must manage equipment and the setting by:
• Ensuring that seat covers are used on vehicle seats whenever an older person is transported
• Seat covers must be changed for new passengers and the used cover disposed of with other PPE
• Wiping down with antibacterial wipes surfaces which are regularly touched in any care setting ahead of use, including door handles, table surfaces, equipment. Equipment should be wiped down between use by different older people.
• Ensure the cleanliness of all kitchen equipment, plates and cutlery. Wipe all surfaces where food will be prepared or served.
• Ensure all other food safety guidance and procedures are followed

Related Policies, Guidance and Procedures

Medication policy
Health and Safety Policy
Transport Policy
Food Safety Policy
Monitoring and Review

This policy will be reviewed every two years in consultation with managers and staff members and will be approved by the Board of Trustees.

Appendices

Appendix 1 NHS guidance on handwashing
Appendix 2 Public Health England Guidance on PPE
Hand-washing technique with soap and water

1. Wet hands with water
2. Apply enough soap to cover all hand surfaces
3. Rub hands palm to palm
4. Rub back of each hand with palm of other hand with fingers interlaced
5. Rub palm to palm with fingers interlaced
6. Rub with back of fingers to opposing palms with fingers interlocked
7. Rub each thumb clasped in opposite hand using a rotational movement
8. Rub tips of fingers in opposite palm in a circular motion
9. Rub each wrist with opposite hand
10. Rinse hands with water
11. Use elbow to turn off tap
12. Dry thoroughly with a single-use towel
13. Hand washing should take 15–30 seconds

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Adapted from World Health Organization Guidelines on Hand Hygiene in Health Care
Guide to donning and doffing standard Personal Protective Equipment (PPE) for health and social care settings

**Donning or putting on PPE**

Before putting on the PPE, perform hand hygiene. Use alcohol handrub or gel or soap and water. Make sure you are hydrated and are not wearing any jewellry, bracelets, watches or stoned rings.

1. Put on your plastic apron, making sure it is tied securely at the back.
2. Put on your surgical face mask, if tied, make sure securely tied at crown and nape of neck. Once it covers the nose, make sure it is extended to cover your mouth and chin.
3. Put on your eye protection if there is a risk of splashing.
4. Put on non-sterile nitrile gloves.
5. You are now ready to enter the patient area.

**Doffing or taking off PPE**

Surgical masks are single session use, gloves and apron should be changed between patients.

1. Remove gloves, grasp the outside of the cuff of the glove and peel off, holding the glove in the gloved hand, insert the finger underneath and peel off second glove.
2. Perform hand hygiene using alcohol hand gel or rub, or soap and water.
3. Snap or unfasten apron ties the neck and allow to fall forward.

Snap waste ties and fold apron in on itself, not handling the outside as it is contaminated, and put into clinical waste.

4. Once outside the patient room. Remove eye protection.
5. Perform hand hygiene using alcohol hand gel or rub, or soap and water.
6. Remove surgical mask.
7. Now wash your hands with soap and water.


If you require the PPE for aerosol generating procedures (AGPs) please visit: [www.gov.uk/government/publications/covid-19-personal-protective-equipment-use-for-aerosol-generating-procedures](http://www.gov.uk/government/publications/covid-19-personal-protective-equipment-use-for-aerosol-generating-procedures)