



LEOPARD GM

Permanent & Temporary Staff

INFECTION CONTROL POLICY

Infection control is the name given to a variety of policies, techniques intended to prevent the spread of infectious diseases amongst staff, service users and communities. All of the staff working in the hospital are at risk of infection or of spreading infections, especially if their role brings them in contact with body fluids, like blood, urine, sputum or vomit.

Policy Statement

The agency believes that following strict guidelines on infection control is of great importance in ensuring the safety of both patients and staff. The agency believes that basic hygiene is the key weapon against infection, especially with respect to learning and hand-washing and use of gloves and aprons.

Aim

The aim of infection control policy is to stop the spread of infection among patients, staff and local community.

Goals

The goals are to ensure the following:

- The patient, their families are as safe as possible from acquiring infections
- All staff are aware of, and put into practice, the basic principles of infection control

Legal Considerations and statutory Guidance:

The agency adheres to the following Guidelines:

- The Reporting of Incidents, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) which place a duty on the agency to report outbreaks of certain diseases and accidents like needle-stick accidents.
- The Environmental Protection Act 1990 which aims to dispose of clinical wastes safely.
- The Health and Safety at Work. Act 1974 and the Public Health
- The Control of Substances Hazardous to Health Regulations 1999 (COSHH) that emphasizes a duty on the Agency to ensure that the potentially infectious materials are identified as hazards and are disposed of safely.

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Web Site: www.leopardgm.co.uk/ E-mail: contact@leopardgm.co.uk.



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Effective Hand-Washing

The agency believes that hand-washing is the most important methods of preventing the spread of infection. All staff must make sure that their hands are thoroughly washed and dried properly as follows:

- After washing or dressing a patient
- After handling any body fluids or waste or soiled items
- After handling specimens, e.g. urine, faeces, blood, sputum, vomit etc.
- After using the toilet
- Before handling foodstuff
- Hand-washing should be washed according to the guidelines of hand-washing.

Liquid soap and disposable paper towels should be used rather than bar soaps and fabric towels. Antiseptic hand-washing solutions should be used only in situations where hand-washing is not possible. They are not supposed to be used for general hand-washing.

- All cuts or abrasions, particularly on the hands, should be dressed with a waterproof dressing at all times.

Cleaning and Procedures for the Cleaning of Spillages

All staff have the responsibility to help keep the environment clear and tidy and to identify areas which fall below acceptable or safe standards.

Staff should treat every spillage of body fluids or body waste as quickly as possible and as they are potentially infectious. They should wear protective gloves and aprons and use disposable wipes wherever possible. Eye protection should also be used if there is risk of splashing.

For a spillage of blood or body fluids a 10,000ppm hypochlorite solution should be used and staff should do the following:

- Put on disposable gloves and apron
- Prepare the hypochlorite solution
- Cover the spillage with paper towels
- Carefully wipe up the spillage with more towels soaked in hypochlorite solution
- Dispose of the waste in a yellow waste bag
- Wash hands in soapy warm running water
- Dry hands thoroughly.

The Cleaning and Sterilising of Instruments and Equipment

All equipment that are non disposable should be cleaned after use. Non-stick equipment should be cleaned thoroughly with hot water and a detergent. High-risk equipment should be sterilized.



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The handling and Disposal of Clinical and Soiled Waste

Clinical wastes should be disposed of in sealed yellow plastic bags and each bag should be clearly labeled with details, e.g. the ward where the wastes are being disposed from, date of disposal, time and name of the person disposing the wastes. This is so in case of accident, the wastes can be traced. Non-clinical wastes should be disposed of in a normal plastic black bag. Both yellow and black bags should be sealed when they are three quarters full and stored in the appropriate area to wait for collection by authorized collector. Yellow bags should only be used in pedal-type bins in clinical areas. Black bags can be changed by the domestic staff.

The Use of Protective Clothing

Staffs that come into direct contact with body fluids must use disposable aprons and gloves. Sterile gloves should be used when changing dressings. Staff should not re-use gloves on another patient. Non-sterile gloves are used for washing dirty or used instruments, cleaning body fluids and handling disinfectants. If, for any reason you discover that you are allergic to gloves, inform the manager at the place of work and also inform the agency immediately.

The Handling and Storage of Specimens

Hands should be washed and dried thoroughly before handling specimens. Use non-sterile gloves to handle specimens. Specimens must be collected in sterile containers and must be labeled clearly and placed in a self-sealing plastic bag before being stored in a fridge for specimens. It should be taken to the GP as soon as possible and if in hospital, it should be taken to the laboratory as soon as possible. Staff is warned to take great caution when handling specimens.

The Disposal of Sharps (broken ampoules, broken bottles, used needles)

Sharps such as used needles, broken ampoules, blades broken bottles, bottles in which medications is finished should be disposed of in yellow sharps box in accordance with the BS7320, and it must be placed in a safe place away from the service users/patients.

- Staff should never re-sheath needles
- When boxes are full, they should be sealed and marked as hazardous waste and clearly labeled
- Sharps boxes must never be overfilled
- Sealed sharps boxes should be stored safely until collected for incineration

In case of an injury with used or potentially contaminated needles, staff should take action as follows:

- Wash the affected area immediately and encourage bleeding if the skin is broken
- Report the manager at work immediately and fill in an incident form
- Report immediately to Occupational Health Department or, if none are available, Accident and Emergency



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Reporting

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulation 1995 (RIDDOR) obliges us to report the outbreak of noticeable diseases to the health and Safety Executive. These diseases consist of:

- Tuberculosis
- Whooping cough
- Measles
- Typhoid
- Meningitis cholera
- Small pox,
- Food poisoning
- Dysentery
- Rabies
- Viral hemorrhagic fever
- Cholera
- Mumps
- Yellow fever
- Leptospirosis
- Hepatitis
- Tetanus

Any such outbreak must be kept, details of dates and times and completed disease report from must be sent to Health and Safety Executive.

Infection Control Training

All new staff should be encouraged to read the policy on infection control and food preparation and handling as part of their induction process. Existing staff should be offered training to National Training Organization standards covering basic information about infection control. **Mrs Sarah** is responsible for organizing and co-ordinating training.

Date -

Signature-

Review Date-

Name- Mr Edward kavuma

Place- London

Position- Director

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