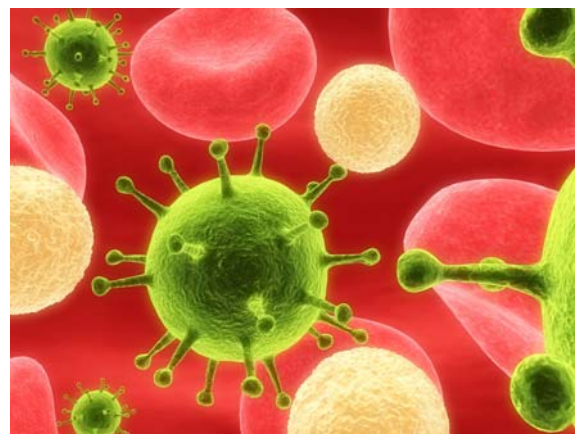




Kent County Council

Infection Prevention and Control Policy For Kent Adult Placement Scheme (Shared Lives)

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Owner	Kent County Council Families and Social Care (Adults) Business Strategy and Support Brenchley House Maidstone Kent ME14 1RF



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Authorised to vary:	Carol Cassin
Replaces:	New Policy

RELATED POLICIES/PROCEDURES/PROTOCOLS

Related Documentation	
Guidelines for Infection Prevention & Control in the Community (Oct 2008)	Kent Health Protection Unit
Food Hygiene Policy & Procedures	Families and Social Care (Adults)
Policy & Guidance for the selection and Use of PPE (Gloves) (May 2007)	Families and Social Care (Adults)
Moving & Handling Policy	Families and Social Care (Adults)
First Aid guidance	KCC (Safety net)
Blood Borne Viruses Guidance	KCC (Safety net)
Disposing of Discarded Needles and Syringes	KCC (Safety net)
Control of Substances Hazardous to Health (COSHH)	KCC (Safety net)
Personal Protective Equipment Guidance	KCC (Safety net)
Health & Social Care Act 2008 – Code of Practice	Dept of Health
Good Practice on the Delivery of Social Services for People Living with and Those Affected by HIV and AIDS	Families and Social Care (Adults)

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Appendix 1 - Universal Precautions – Hand Hygiene Notice

Appendix 2 - Management of Needlestick ‘blood borne’ Virus Exposure

1 INTRODUCTION

KCC (Kent County Council) is required to assess and address any risks to the health, safety and welfare of staff, service users, contractors and anyone else affected by our actions. The council also has a general public health obligation to prevent the spread of infectious diseases and conditions.

For the purpose of infection control, KCC's Direct Service Provision will follow guidelines and utilise the tools provided by the Kent Health Protection Unit unless superseded by KCC specific policy.

It is recognised in this policy that the KHPU (Kent Health Protection Unit) document is now out of time and will not be replaced. The general guidance however, is still applicable and should still be referred to until this policy undergoes a full review.

It is intended that this policy and guidance assist KCC with compliance with the Health & Social Care Act 2008 CoP, for the Prevention and Control of Infection.

2 SCOPE

This policy and guidelines are applicable to all those providing support within Kent Adult Placement Scheme (Shared Lives).

3 DOCUMENT SUMMARY

This document covers the main roles and responsibilities for AP Carers in providing support within the Adult Placement Scheme in protecting Service Users from health care associated infections.

It describes the role of the Kent Health Protection Unit (KHPU) and their essential involvement in the management, prevention and control of infections.

This document outlines the system of monitoring and auditing.

Guidance and information is provided in the KHPU Guidelines for Infection Prevention and Control in the Community and should be referred to by all Community Service Provision, as indicated under Section 2.

This document describes the structure of meetings and training requirements for staff.

4 ROLES AND RESPONSIBILITY

4.1 The scheme is responsible for;

- ensuring that all AP Carers are aware of this policy and have received relevant induction/training.
- providing information updates as required.
- seeking support from the NHS Infection Control Team and /or KHPU as necessary.
- ensuring safe and compliant disposal of clinical/hazardous waste in the community setting.

4.2 Nurse Specialists KHPU are responsible for;

- giving advice about infection control and communicable disease issues.
- providing support and advice in relation to hospital and community acquired infections.
- giving advice on how to manage outbreaks within FSC direct service provision, in conjunction with the appropriate Consultant Microbiologist and the Consultant in Communicable Disease Control at KHPU.

NB The advice of the KHPU must be followed and any difficulties with this should be referred to a Senior Manager/Head of Department.

4.2.1 Adult Placement Team workers Responsibilities:

- To facilitate introduction and implementation of infection control policies and undertaking monitoring as part of the standard yearly inspection
- To assist in the education of AP carers in the principles of infection control and provide induction to AP carers as necessary.
- To assist in the enforcement of hand hygiene principles.
- To monitor placements to reduce or stop infections.
- To follow up any concerns raised by the AP carer.
- To raise concerns with Care Manager.

4.3 AP Carers are responsible for:

- carrying out their duties in accordance with the training and advice provided to them.
- wearing appropriate Personal Protective Equipment.
- reporting any concerns on infection control to the scheme and recording in the Service User's file.
- reporting any specific diseases to the Adult Placement Scheme which are notifiable to the KHPU.

5 INFECTION CONTROL PROCEDURE

- 5.1 The specific procedures for reducing and managing infection are provided in the KHPU Guidelines for Infection Prevention and Control in the Community.
- 5.2 The Adult Placement Scheme will have access to the Kent Health Protection Unit Publication as above.

6 RISK MANAGEMENT

- 6.1 It is not always possible to identify people who may be infectious to others; therefore universal precautions are required to prevent the spread of infection.
- 6.2 Universal precautions will be used at all times and includes good hand hygiene principles. Universal Precautions are described in the Guidelines for Infection Prevention and Control in the Community and at Appendix 1.
- 6.3 When undertaking a comprehensive needs assessment of service users, their infection status needs to be considered as part of their physical health assessment.
- 6.4 Once the service user's infection status has been identified it must be recorded on their support plan. The support / action plan must be written in a way that provides sufficient information to people and services that need to know and identify the actions that are taking place to minimise infection spread.
- 6.5 AP Carers need to consider how the Service Users infection status is communicated, i.e. in a sensitive way, to them and their carers / relatives. Any known infection should be recorded in the Service Users Record.

- 6.6 AP Carers will be advised to have vaccinations against recognised diseases in accordance with the Blood Borne Viruses guidance and any further advice given by the KHPU in respect of seasonal or other diseases.

7 INFECTION CONTROL GUIDELINES

- 7.1 The scheme will maintain and supply all AP carers with a carer handbook which will include:
- 7.1.1 A copy of this policy
 - 7.1.2 Information on types of infections that may be encountered within the home.
 - 7.1.3 Hand washing procedures
 - 7.1.4 Universal precautions (see appendix 1)

8 PROTECTIVE CLOTHING FOR AP CARERS

- 8.1 All AP carers must be provided with information and demonstrate an understanding of the use and disposal of appropriate protective clothing to undertake their duties
- 8.2 AP Carers may be responsible for purchasing appropriate protective clothing as advised by the AP Scheme and or care manager.

9 REPORTING AN INFECTION

Responsibility of AP Scheme

- 9.1 Certain infections / diseases must be notified to the KHPU, the H&S section and the Head of Service. These infectious diseases are listed at Appendix 2 of the KHPU Guidelines. KHPU Guidelines provide guidance and policy on these infections and must be followed. The KHPU will provide individual advice and guidance.
- 9.2 A discussion must take place with the KHPU who may provide an action plan which you must adhere to. This will describe what actions you are required to take to control the spread of infection.

The KHPU will advise on any further reporting required. They can also provide copy of letters for onward communication within the service. Any documented reports will be copied to the Care Quality Commission (CQC) and the Senior Service Manager.

Tuberculosis (TB)

Any known or suspected cases of TB should be referred to the KHPU who will be able to provide specific advice on the individual cases concerned.

10 TRAINING

10.1 Induction – all AP workers receive training on infection control. This will be given in the form of a one day training course.

10.2 The AP Carers will undertake the following:

- Induction.
- Completion of the Common Induction Standards workbook.

11 MONITORING

Monitoring is necessary to ensure systems are in place and to ensure AP Carers are complying with defined hygiene practices.

AP workers will carry out regular monitoring visits to AP Carers in addition to completing an annual review.

12 POLICY REVIEW

Review of the policy and guidance should be carried out if for any reason it is considered insufficient or at a minimum of 2 yearly intervals.

Date of next review:	February 2015
Master Location:	Families & Social Care (Adults)
Lead Officer:	Carol Cassin

UNIVERSAL PRECAUTIONS AND HAND HYGIENE FOR COMMUNITY BASED SERVICES



1 ALWAYS WASH YOUR HANDS

- **Before** and **after** using protective gloves (Gloves should always be worn when in contact with blood or other body fluids)
- After sneezing or blowing your nose
- After handling bed linen or laundry
- After using the toilet
- After providing physical care for a service user
- Before preparing or serving meals or drinks
- At any time when the hands are visibly soiled.

Note: Alcohol gel is only to be used **in support** of hand washing.

2 TAKE SIMPLE PROTECTIVE MEASURES

- Appropriate gloves and plastic apron must be used to prevent contamination from bodily fluids and blood stained products. (Refer to KASS Glove Policy). Avoid contaminating yourself or your clothing with blood. Always wear gloves appropriate to the task and a plastic apron when delivering all personal care and when dealing with body fluids and dispose of as instructed below. Household rubber gloves should be used for general cleaning. Afterwards wash them and then remove.

3 ALWAYS COVER CUTS OR ABRASIONS ON YOUR SKIN

- Clean the wound with water and paper towels or tissues. Use clean waterproof plasters. Take every care to avoid damaging your skin with cuts or abrasions in the presence of blood.

4 CLEAR UP SPILLAGES OF BODY FLUIDS PROMPTLY

- Spillages of body fluids and blood stained spillages on soft fabrics should be cleaned up with paper towels and the area washed thoroughly with detergent or shampoo solution. Refer to individual risk assessment and COSHH training.

5 TAKE CARE WITH CHLORINE BASED PRODUCTS

- These are corrosive and can damage fabrics. Always use at the strength directed and never use on skin. Never mix with anything other than water as they can liberate chlorine gas in contact with acids like toilet cleaners and urine.

6 DISPOSE OF WASTE SAFELY

- Waste such as soiled incontinence pads, dressings and disposable gloves, aprons and paper towels contaminated with body fluids should be disposed of in the appropriate clinical waste collection bin, where provided. Where such bins are not provided, unless you are told otherwise, you may place small quantities of clinical waste in a plastic bag, tie it securely then place in another plastic bag and dispose of it with the normal waste. Sharps must always be placed in a 'Sharps' container for collection and must never be disposed of with normal waste.

THE SIMPLE PRECAUTIONS DESCRIBED ABOVE MUST BE ADOPTED AT ALL TIMES

If you have damaged skin and believe yourself to have been exposed to bodily fluids from a client at risk then immediately wash the cut or abrasion liberally with soap and water but without scrubbing. Splashes of blood into the eyes or mouth should be washed out immediately with copious amounts of water. If the skin has been punctured, free bleeding should be encouraged but the wound should not be sucked.

Any incident must be reported immediately to the Line Manager and dealt with exactly as an accident. Where necessary, seek emergency advice from your GP or nearest accident and emergency centre.

PROPER HAND WASHING

Remember that effective hand washing is the single most fundamental means of preventing and controlling the spread of infection. In certain circumstances your local Infection Control Team may advise the use of alcohol based hand rub solution to follow a hand wash with soap and water.

Note: The use of alcohol gel is not on its own sufficient to reduce infection. It is essential to use soap and water for hand washing.

Remember to use the following technique with soap and water:

- between fingers - around finger tips
around the wrist and thumbs
- both the front and back of palms.
- Then rinse soap off thoroughly and dry your hands using disposable paper towels.

This diagram shows the areas, in dark, that are easy to miss.



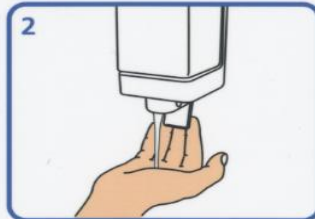
For further information on infection control refer to the
**Kent Health Protection Unit's Guidelines for
Infection Prevention and Control in the Community.**



Hand-washing technique with soap and water



1
Wet hands with water



2
Apply enough soap to cover all hand surfaces



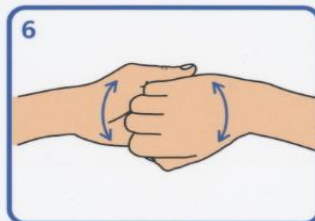
3
Rub hands palm to palm



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



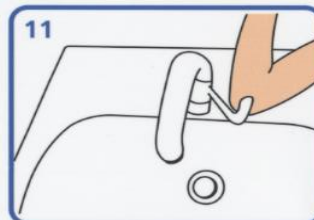
8
Rub tips of fingers in opposite palm in a circular motion



9
Rub each wrist with opposite hand



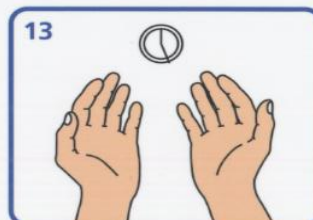
10
Rinse hands with water



11
Use elbow to turn off tap

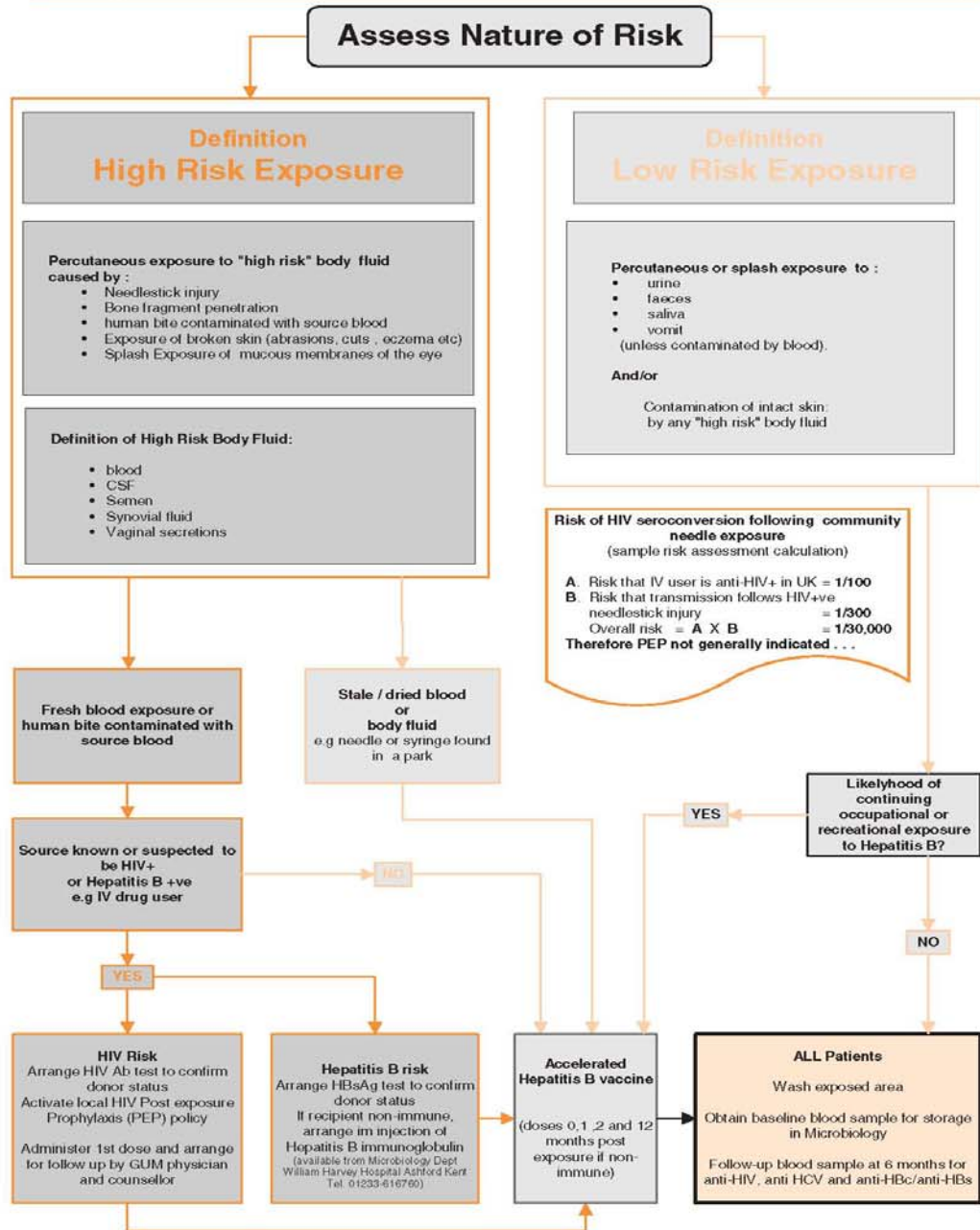


12
Dry thoroughly with a single-use towel



13
Hand washing should take 15–30 seconds

Management of "Needlestick" blood borne virus exposure in the community



Prepared by R Workman and J Nash 2003

