

# **Safety, Health, and Environment (SHE) Guidance**

## **Infection Control**

Purpose – this guide offers practical advice to employees and managers to enable them to work safely, stay healthy and reduce the risk of infection to themselves and others.



## **1. Introduction**

Infectious diseases are conditions that have the potential to be passed from one person to another, from animal to animal, from an animal to a person or through the environment. Infectious diseases may produce harmful and unpleasant symptoms in some cases, whilst in others they may produce no symptoms at all.

Effective infection control is the result of both individual and group behaviour. It can be based upon job-specific arrangements and the continuous implementation of guidelines, staff training and effective supervision.

The following general guidance outlines the appropriate action to be taken to limit the spread of infectious diseases. It provides background information about some of the most common infections but does not contain a comprehensive list of every disease, symptom, and treatment.

## **2. Workers at lower risk of exposure**

A number of staff could be in this group, which may include those working in offices or libraries, for example, who are not routinely exposed to an increased risk of infectious disease.

In the majority of cases, they do not require any job-specific guidelines for infection control, though they are expected to follow the social norms of good hygiene and can use this guidance as necessary.

## **3. Workers at higher risk of exposure**

This group includes many different types of worker, for example those involved with:

- residential care
- domiciliary care
- child care
- education
- institutional food preparation and handling
- contact with animals

Each should have their own job-specific guidelines for infection control. However, they will also find this document useful for reference purposes.

GCC staff working in social care should refer to Adult Social Care Policies and Procedures to access their specific Infection Control Policy.

Schools should refer to Public Health England webpages at [www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities](http://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities) for guidance.

#### **4. Managing Illness**

Managers should be aware of illness in their staff or others (e.g., pupils, service users, clients, contractors etc.) and the possible impact that an outbreak of illness can have.

It is not uncommon for staff to come to work feeling under the weather. There may be various reasons for this, but rarely does the notion of spreading germs cross an employee's mind when deciding to come to work ill. Unfortunately, this is one of the reasons infectious diseases spread so rapidly and manager's need to be aware of and actively manage the risks arising from 'presenteeism'.

If employees are coming into work whilst ill, there is a high chance that they will not be as productive as when they are well; and by increasing the chances of other staff becoming unwell, services could ultimately be working at a reduced capacity.

If an employee is suffering from an infectious disease, they must notify their manager and take such precautions as may be advised. If necessary, they should be encouraged to seek medical advice from their GP. The employee should be asked not to attend work where there is a risk that this could spread the infection.

GCC Managers and staff should follow the HR and employment handbook sickness absence procedures.

The Public Health England *Guidance on infection control in schools and other childcare settings* provides recommended periods for children to be kept away from school, nursery, or child-minders for common infections, which should be adhered to and communicated to parents of an infected child.

#### **5. Personal Protective Measures**

It is important that everyone maintains good levels of personal hygiene. Hand washing remains the single most important method of reducing the spread of infections and limiting outbreaks of viral illness such as influenza pandemics and gastrointestinal infections. This applies equally to the general population as well as those working in higher risk occupations.

All staff, no matter what their work, are expected to follow the social norms of the general population in respect of hand hygiene, i.e., wash their hands with soap and water after using the toilet, if obviously soiled, before and after handling food etc. Service users and visitors should be encouraged to follow the same social norms of hand hygiene.

Workers in groups at higher risk of infectious disease transmission will need to have an additional job-specific protocol for hand washing, use of gloves and alcohol gels.

A range of PPE is available and should be worn where necessary. This includes a choice of disposable gloves (latex, nitrile, vinyl, polythene, etc.),

disposable plastic aprons, and in some cases eye and respiratory protection. The choice of equipment will depend upon the hazards identified and the findings of any risk assessment.

## 6. Noroviruses

Norovirus (formerly Norwalk virus), is a highly infectious gastroenteritis, typically lasting for a day or two but may occasionally last for up to a week. It is not a serious illness in healthy people but can be very disruptive in workplaces, schools, and other institutions (e.g., care homes).

During significant outbreaks schools and other venues may consider closing. This depends on a number of issues, such as the numbers of people with illness and whether the school/service can cope. Preventing the spread of the virus by following good hygiene practices increases the likelihood of remaining open.

Symptoms of the virus can be a combination of any of the following:

- nausea.
- vomiting, which is often violent and projectile in nature and sometimes without warning.
- abdominal pain.
- diarrhoea.

Noroviruses are found in the stool and vomit of infected people. People can become infected with the virus in several ways:

- eating food or drinking liquids that are contaminated with norovirus.
- touching surfaces or objects contaminated with norovirus (e.g., toilets, taps, flush handles, door handles), and then placing their hand in their mouth.
- having direct contact with another person who is infected and showing symptoms (for example, when caring for someone with illness, or sharing foods or eating utensils with someone who is ill).
- illness can result from contact with a very small dose of virus e.g., invisible particles contaminating the area surrounding a vomiting incident.

The incubation period for Norovirus (the period between exposure and the appearance of the first symptoms) is up to 72 hours, but usually 24-48 hours.

If an outbreak is suspected:

Staff:

- if you have any of the above symptoms, do not come to work;
- stay away from work until you have been free of symptoms for at least 48 hours and avoid contact with others where possible;
- keep hydrated by drinking fluids as tolerated;
- if symptoms persist (more than 48 hours), phone the GP or the NHS non-emergency number 111 for advice;
- if symptoms commence during your working day – go straight home;
- the risk of spread is reduced considerably if contamination of the environment is reduced;

- wash hands thoroughly with soap and water regularly but particularly after toilet visits and before eating and handling food;
- do not visit friends or relatives in hospital or residential care homes as there is a real risk of introducing the infection to the establishment;
- do not handle or prepare food for other people until symptom free for at least 48 hours.

Pupils:

- if they become ill during the day, children should be sent home as soon as possible;
- if the child cannot go home, they should be kept away from other children if at all possible;
- parents should be informed verbally that the child should remain off school for 48 hours from the last symptom and to consult with their GP if necessary.

Residents:

All care homes should have an infection prevention and control policy that address such issues as:

- service user isolation/placement;
- aseptic procedures;
- good sanitation – disinfection and decontamination.

## 7. Cleaning vomit and body fluid spillages

All spillages of blood, faeces, saliva, vomit, nasal and eye discharges should be cleaned up immediately.

Offices serviced by Shire Hall custodians can have spillages dealt with by phoning ext. 5111. Custodians are trained to deal with bodily fluids and have access to spill kits. Other GCC buildings and schools should consider local emergency cleaning procedures.

Staff should wear appropriate PPE if cleaning up, usually disposable gloves and a disposable plastic apron if there is a risk of splashing contaminated matter or chemicals.

- Cover the contaminated area completely with a layer of absorbent material (newspaper, kitchen roll, toilet paper, floor cloth, paper towels, absorbent granules, saw dust etc.).
- Clean using a product that combines both a detergent and a disinfectant. Use as per manufacturer's instructions and ensure it is effective against bacteria and viruses and suitable for use on the affected surface.
- Dispose of cloths/material that have been used or contaminated. All disposable items used must be placed into a plastic bag. Double bagging is recommended, tie and dispose of safely.
- Ensure hand washing to minimise the hand to mouth risk are appropriate after cleaning.

## 8. Colds and Seasonal Flu etc

If staff are sniffling, sneezing, and have a sore throat they may be coming down with the common cold. This is contagious for 2-3 days before symptoms appear, and until all symptoms have gone. Staff should use common sense before they expose others at work to their cold virus.

If the symptoms include headache, fever, cough, sore throat, aching muscles, and painful joints this could be a sign they have flu (or influenza). Flu is a virus that is easily spread by the coughs and sneezes of infected people. It is more common in autumn and winter - from October to early spring - which is why it is called seasonal flu.

Symptoms of flu usually begin a day to 3 days after infection. After experiencing a week of symptoms, most otherwise healthy people will start to feel better, but symptoms like coughing and feeling tired can last for some weeks longer. Flu is usually more severe than a cold and staff would generally feel unable to work.

Flu can last longer in people with weakened immune systems. It can also lead to death for hundreds of people each year in the UK.

Flu vaccination is available and is recommended by the NHS for people in at-risk groups, such as people with long-term medical conditions and pregnant women. Staff working with at-risk groups are also encouraged to have the flu jab as this reduces the spread of the infection.

The flu jab is available to all staff in GCC free of charge. See information regarding the Staff Flu Jab on Staffnet each season in the health and wellbeing area of Staffnet: <https://staffnet.goucestershire.gov.uk/your-health-and-wellbeing/>

## **Covid 19 (Coronavirus)**

Covid-19 is a coronavirus that can cause pneumonia like illness, it is spread in a similar way to flu or the common cold. Because of the greater health risks control of this disease is especially critical. Staffnet will contain specific guidance on managing the risks and will follow Government Guidance when applicable.

For schools there will be guidance on Schoolsnet which will contain specific guidance on managing the risks of Covid which will follow Government Guidance when applicable.

## **9. Needle-stick Incidents**

A needle-stick incident occurs whenever the victim's skin is pierced, cut or broken by a contaminated hypodermic needle (or similar device) or any other contaminated sharp object. Sharps injuries are a well-known risk in the health and social care sector. Sharps contaminated with an infected patient's blood can transmit more than 20 diseases, including hepatitis B, C and

human immunodeficiency virus (HIV). Because of this transmission risk, sharps injuries can cause worry and stress to those who receive them.

These injuries can be avoided by eliminating the unnecessary use of needles, using devices with safety features, following safe work practices for handling needles and dispose of used needles promptly in appropriate sharps disposal containers.

If a member of staff suffers an injury from a sharp which may be contaminated:

- carefully remove any small embedded sharp objects. Dispose of these safely;
- encourage small wounds to bleed by squeezing firmly;
- wash the wound using running water and plenty of soap;
- do not scrub the wound whilst washing it;
- Do not suck the wound;
- dry the wound and cover it with a waterproof plaster or dressing;
- seek urgent medical advice (for example from Occupational Health);
- attend the nearest Accident & Emergency department so that:
  - the risk of infection can be assessed;
  - a blood sample can be taken;
  - further treatment of the wound can be rendered;
  - post-exposure drug treatment can be given (if required). Ideally, high risk cases should start treatment within one hour.
- report the injury to your manager. Managers must ensure that incidents are reported by completing the online Accident, Incident or Near Miss form within five days via SHE Assure.

## 10. Blood-borne Viruses

Blood-borne viruses (BBVs) are viruses that some people carry in their blood and can be spread from one person to another. An infected person can transmit (spread) blood-borne viruses from one person to another by various routes and over a prolonged time period.

The most prevalent BBVs are:

- Human Immunodeficiency Virus (HIV) – a virus which causes Acquired Immunodeficiency Virus (AIDS), a disease affecting the body's immune system;
- Hepatitis B and Hepatitis C – diseases affecting the liver.

It is very unlikely that staff will become infected through everyday social contact with a person who has a BBV. BBVs are mainly transmitted sexually or by direct exposure to infected blood or other body fluids contaminated with infected blood. Good hygiene practices, safe cleaning techniques and avoiding sharps injuries is required to reduce any risks.

Immunisation is available for at risk groups of staff against Hepatitis B but not other BBVs. The need for members of staff to be immunised should be determined by the risk assessment. See *SHE Guidance SHE/G053 Provision*

## **11. Business Continuity**

Staff sickness can be highly disruptive particularly when it causes non-availability of key staff. To minimise the impact, it's a good idea to have in place and review business continuity procedures.

If you are not sure if your service has a Business Continuity Management (BCM) plan or what it includes, check with a manager in the first instance. If the service does not currently have a BCM plan, a corporate plan template is available from the Civil Protection Team (CPT).

## **12. Reporting outbreaks and clusters**

It is a statutory requirement that doctors report a notifiable disease but no requirement for schools or other establishments to report. However, the advice of Public Health England is, if you suspect an outbreak of infectious disease or notice an increase in the number of cases being reported, you can call your local Public Health England Centre.

### **For more SHE advice and guidance:**



**01452 425350**



**[she@gloucestershire.gov.uk](mailto:she@gloucestershire.gov.uk)**



**[www.gloucestershire.gov.uk/she](http://www.gloucestershire.gov.uk/she)**