Infection Control

1. PURPOSE

1.1 The purpose of this procedure is to detail the measures in place to minimise the spread of infectious diseases within the University population including all staff students and visitors.

2. SCOPE

2.1 The procedure applies to all staff and students of the University and is effective from 3 May 2011.

3. DEFINITIONS

Serious Communicable Diseases	Includes acute bacterial gastroenteritis (e.g. caused by campylobacter, salmonella, e coli, etc) acute viral gastroenteritis, influenza, measles, rubella, chickenpox, glandular fever, mumps, shingles, meningococcal disease, viral meningitis, tuberculosis, etc

4. RESPONSIBILITIES

Vice- Chancellor

4.1 On behalf of the Council the Vice-Chancellor has executive responsibility to ensure, that the requirements of the health and safety legislation and the University health and safety policy are complied with. The Vice-Chancellor will ensure that responsibility for health and safety is properly assigned and accepted at all levels within the University.

Heads of School / Department / Line Managers

4.2 It is the responsibility of Heads of School / Department / Line managers to inform Occupational Health or Student Health, as appropriate, when they become aware that a member of staff or student is infected with a serious communicable disease. It is also the responsibility of these managers to ensure that all food handlers and nursery workers are referred to Occupational Health if they contract a serious communicable disease. It may also be appropriate for a manager to refer pregnant workers or those with weakened immune systems to Occupational Health if they contract a serious communicable disease

Occupational Health

4.3 It is the responsibility of Occupational Health staff to inform the Public Health authorities as appropriate when they are informed that a member of staff has contracted a serious communicable disease. In additional Occupational health will review all food handlers and nursery workers as necessary prior to restarting work after contracting a serious communicable disease and all other individuals who have been referred by line managers.

Student Health

4.4 It is the responsibility of Student Health staff to inform the Public Health authorities as appropriate when they are informed that a student has contracted a serious communicable disease

Food Handlers and Nursery Staff

4.5 It is the responsibility of food handlers and nursery staff to report immediately to their line manager if they contract a serious communicable disease. Food handlers will require the approval of Occupational health before returning to work.

All Staff and Students

4.6 All staff and students are responsible for good hygiene practices and in particular for effective hand washing and minimising spread of infection by coughs and sneezes. Good hygiene practices are important at all times but particularly when the individual has been in contact with someone known to have an infectious disease.

4.7 Further to this all staff must inform their Head of School / Department / Line Manager if they are aware that they have contracted or come in close contact with a person with a serious communicable and must follow the advice and guidance available from their medical practitioner or Occupational Health. Normally, for serious communicable diseases, this will require the individual to remain at home until the infection has

passed. For less serious infectious diseases, the individual may wish to seek the advice of their GP or Occupational Health as necessary.

4.8 It is the responsibility of all staff and students to follow other relevant procedures, e.g. personal protective equipment, exposure to blood borne viruses and waste disposal (particularly with regard to body fluid spillages) procedures to minimise the risk of contracting and/or spreading an infectious disease.

5. PROCEDURE

5.1 It is important that all staff and student follow the good hygiene practices and procedures, e.g. hand washing, dealing with body fluid spillages, etc., outlined in appendix 1.

5.2 When a member of staff or a student becomes aware that they have contracted a serious communicable disease they must contact their Head of School / Department / Line Manager or Course Director, as appropriate, at the earliest opportunity and inform them of this. This is in addition to any requirements under the sickness absence policy.

5.3 When a Head of School / Department / Line Manager or Course Director is informed that a member of their staff or their student has contracted a serious communicable disease they should inform Occupational health or Student Health, as appropriate, as soon as possible.

5.4 Depending on the particular circumstances Occupational Health or Student Health will advise as appropriate. If necessary, Occupational Health or Student Health will liaise with the Public Health authorities. In all cases, food handlers and nursery staff must be reviewed by Occupational Health prior to recommencing work.

5.5 More information on each of the infectious diseases mentioned will be made available via the Wellbeing Hub and / or the Health and Safety Service Website.

APPENDIX 1. GOOD HYGIENE PRACTICES

1. HAND WASHING

1.1 Hand washing is the single most effective means of reducing the spread of infection. Good hand washing should, therefore, be encouraged and practised by everyone.

1.2 Good hand washing should be practised:

Before:

- preparing, serving or eating food.

After:

- Going to the toilet.
- Dealing with sick people.
- Handling sick people's clothing.
- Handling, stroking or being licked by animals.
- Contact with animal excreta.
- Cleaning pets' living and sleeping areas.
- Preparing food.
- Contact with body fluid substances (urine, faeces, vomit, sputum, or blood).

1.3 Effective Hand Washing:

DO'S:

- Hands should be wet under running water before applying soap
- Hands should be washed vigorously for 15-30 seconds particular attention should be paid to thumbs, finger nails and between fingers.
- Rinse hands thoroughly.
- Hands should be dried thoroughly after washing.

DON'Ts:

- Don't use excess soap as this can cause sore skin.
- Don't use excessively hot or cold water.
- Don't wash for longer than 1 minute.

2. PERSONAL PROTECTIVE EQUIPMENT

2.1 Personal protective equipment (PPE) is used to protect both yourself and those you come in contact with from the risks of cross infection. It may also be required for contact with hazardous chemicals. Gloves should be worn whenever there might be contact with blood and body fluids, mucosa membranes or non intact skin. Gloves are not a substitute for hand washing. They should be put on immediately before the task to be performed, then removed and discarded as soon as the procedure is completed. The choice of glove should be made following a suitable risk assessment of the task. Polythene or vinyl gloves are not suitable for use when dealing with blood or body fluids. Masks should be worn when a procedure is likely to cause blood or body fluids or substances to splash into the eyes, face or mouth. Masks may also be necessary if infection is spread by an airborne route. You should ensure the mask fits correctly and is discarded immediately after use.

3. SAFE HANDLING AND DISPOSAL OF SHARPS

3.1 Sharps include needles, scalpels, stitch cutters, glass ampoules and any sharp instrument. The main hazards of sharps injury are hepatitis B, hepatitis C and HIV. To reduce the risk of injury and exposure to blood-borne viruses, it is vital that sharps are used safely and disposed of carefully following University guidelines and procedures (e.g. Exposure to a Blood Borne Virus Procedure UUHSM 3.37)

4. SAFE HANDLING AND DISPOSAL OF WASTE

4.1 All waste should be segregated including special waste and should have an audit trail. This should include colour coding of bags used for waste, e.g.,

- Yellow bags for clinical waste
- Black bags for general waste
- Special bins for glass and aerosols
- Colour coded bins for pharmaceutical or cytotoxic waste

4.2 All staff should comply with University guidelines and procedures on safe handling and disposal of waste.

5. BODY FLUID SPILLAGES - URINE, VOMIT & FAECES

5.1 All spillages of body fluids (urine, vomit or faeces) should be dealt with immediately. Gloves (ideally disposable) should be worn and as much of the spillage as possible should be mopped up with absorbent toilet tissue or paper towels: this can be disposed of into a plastic waste sack (or flushed down the toilet if there are only small amounts). For spillages indoors, clean the area with a detergent, e.g. washing-up liquid and hot water, rinse and dry. For spillages outside (e.g. in the grounds) sluice the area with water. Do not forget to wash the gloves and then wash your hands after you have taken the gloves off.

Blood

5.2 Blood spillage's should be dealt with immediately, and in the same manner as described in above. Wear gloves, contain the spillage with tissue or paper towels. Thoroughly clean the area, rinse and dry. Dispose of all waste, including disposable gloves in a plastic waste bag.

Carpets

5.3 Blood, or other body fluid spillage on carpets and upholstery should be cleaned with warm soapy water or a proprietary liquid carpet shampoo since the use of hypochlorite granules may discolour fabrics.

6. EQUIPMENT DECONTAMINATION

6.1 Decontamination is the combination of processes – cleaning, disinfection and sterilisation.

Cleaning

6.2 This uses water and detergent to remove visible contamination but does not necessarily destroy micro-organisms, although it should reduce their numbers. Effective cleaning is a prerequisite to both disinfection and sterilisation.

Disinfection

6.3 This uses chemical agents or heat to reduce the number of visible organisms. It may not necessarily inactivate all viruses and bacterial spores.

Chemical disinfectants

6.4 Chemical disinfectants are classified generally and their biocide capabilities vary. While most are capable of inactivating bacteria and enveloped viruses, many are not so effective against non enveloped viruses – e.g. the hepatitis viruses and also cysts and bacterial spores. Efficiency depends on choosing and using the disinfectant correctly. The use of disinfectants is governed by the Control of Substances Hazardous to Health (COSHH) regulations.

Sterilisation

6.5 This method ensures that an object is free from visible micro-organisms, including bacterial spores.

Environment hygiene

6.6 The environment plays a relatively minor role in transmitting infection, but dust, dirt and liquid residues will increase the risk. They should be kept to a minimum by regular cleaning and by good design features in buildings, fittings and fixtures. A written cleaning schedule should be devised based on a Control of Substances Hazardous to Health (COSHH) assessment. It should set out the management of spilt body fluids and regular dust removal and specify the persons responsible for cleaning, the frequency of cleaning and methods to be used.

6.7 Key Boards, pointing devices, monitors and telephone head sets which are generally shared should be cleaned with an alcohol wipe on a regular basis.