

# Infection Control Policy

## Purpose and Scope

The purpose of this Infection Control Policy is to establish a framework for preventing and managing infections within domiciliary elderly care settings. This policy is designed to protect service users, care staff, volunteers, and visitors from healthcare-associated infections (HCAIs) by minimizing their occurrence and impact. It aligns with UK regulations and industry standards, including guidelines from the National Institute for Health and Care Excellence (NICE), the Care Quality Commission (CQC), and Public Health England (PHE).

This policy applies to all care staff, including healthcare assistants, thus safeguarding the health and well-being of all stakeholders involved.

The policy covers several key areas of infection control, including hand hygiene, personal protective equipment (PPE) usage, environmental cleanliness, waste disposal, and antimicrobial stewardship. It also outlines staff responsibilities, training requirements, risk assessment procedures, and mechanisms for auditing and monitoring compliance. The policy is informed by evidence-based practices and incorporates insights from leading bodies such as the Infection Prevention Society (IPS) and the Royal College of Nursing (RCN).

Furthermore, this policy takes into account specific regional regulations applicable to England, Scotland, Wales, and Northern Ireland. It acknowledges the unique challenges faced in domiciliary settings, such as the varying levels of dependency among service users and the diverse environmental conditions within individual homes. By providing a comprehensive and adaptable framework, this policy aims to support care providers in delivering safe, effective, and person-centred care.

## Definitions

- **Healthcare-Associated Infections (HCAIs):** Infections that occur in a healthcare setting as a result of healthcare interventions.
- **Personal Protective Equipment (PPE):** Equipment worn to minimize exposure to hazards that cause serious workplace injuries and illnesses.
- **Antimicrobial Stewardship:** A set of coordinated strategies to improve the use of antimicrobial medications with the goal of enhancing patient health outcomes.

## Key Principles

Infection control is fundamental to providing safe and effective care. Key principles include maintaining high standards of hand hygiene, utilizing personal protective equipment (PPE) appropriately, ensuring effective waste management, and conducting regular risk assessments. Hand hygiene is the cornerstone of infection prevention, and all staff must adhere to the '5 Moments for Hand Hygiene' as outlined by the World Health Organization (WHO). This includes handwashing before and after patient contact, before aseptic tasks, after exposure to body fluids, and after touching patient surroundings.

The correct use of PPE is crucial in preventing the spread of infections. Staff must be trained to select, wear, and dispose of PPE correctly, in line with NHS guidelines. PPE should be used based on the risk assessment of each care activity and should include gloves, aprons, masks, and eye protection as necessary.

Waste management is another critical aspect of infection control. Waste should be segregated into appropriate categories, such as clinical waste, sharps, and general waste, and disposed of in accordance with Yellowback and Yellow Continent and HSE regulations. Regular environmental cleaning and disinfection are also essential to minimize infection risks, particularly in high-touch areas.

Finally, antimicrobial stewardship involves the judicious use of antibiotics to combat resistance and ensure effective treatment of infections. Staff should encourage prudent antibiotic use and collaborate with healthcare professionals to monitor and optimize antimicrobial prescribing practices.

## Staff Responsibilities

All staff members have a responsibility to adhere to this Infection Control Policy and to promote a culture of safety and awareness. Care staff, including nurses and healthcare assistants, are required to follow infection control procedures diligently, report any breaches or incidents, and participate in regular training and updates. They must ensure that personal protective equipment (PPE) is used correctly and that hand hygiene is performed at critical times.

Managers and supervisors have additional responsibilities to oversee the implementation of infection control measures, conduct regular audits, and address any non-compliance issues. They must ensure that all staff have access to necessary resources, such as PPE and hand sanitizers, and that the environment is maintained in a clean and safe condition.

Volunteers and external contractors who interact with service users must also comply with infection control protocols and receive appropriate training and guidance. They should be aware of the specific risks associated with their activities and take necessary precautions to mitigate these risks.

Reporting and communication are vital components of infection control. All staff must report any suspected or confirmed infections, outbreaks, or incidents to their line manager or designated infection control lead immediately. This ensures that appropriate

measures can be taken promptly to prevent further spread and protect vulnerable individuals.

## **Risk Assessment**

Conducting risk assessments is a vital part of infection control, enabling care providers to identify potential hazards and implement measures to mitigate them. Risk assessments should be conducted regularly and whenever there are changes to the care environment or the health status of service users. They should consider factors such as the susceptibility of service users to infections, the nature of care activities, and the adequacy of existing control measures.

The findings of risk assessments should be documented and used to inform care planning and decision-making. Staff should be trained to carry out risk assessments effectively and to recognize signs that may indicate an increased risk of infection. Regular monitoring and review of risk assessments ensure that they remain relevant and effective in addressing current challenges.

## **Procedures for Dealing with Pets**

Pets can be a source of comfort and companionship for service users, but they can also pose infection control challenges. Staff should be aware of potential risks associated with pets and take appropriate precautions. This includes ensuring that pets are kept clean and vaccinated, minimizing contact between pets and medical equipment, and ensuring that pet waste is disposed of safely. Additionally, staff should wash their hands after handling pets and use PPE if necessary to prevent the transmission of infections. Specific procedures for handling pets on site must be followed as outlined in the animal control policy.

## **Management of Sharps**

The safe management of sharps is essential to prevent injuries and the transmission of infections. Staff must use appropriate containers for the disposal of sharps and ensure that these containers are available at the point of use. Sharps should never be recapped, bent, or broken before disposal. Any incidents involving sharps injuries must be reported immediately, and appropriate medical evaluation and follow-up should be conducted.

## **Disposal of Clinical Waste and Handling of Communicable Diseases**

The disposal of clinical waste must be carried out in accordance with local authority and HSE regulations to prevent the spread of infections. Clinical waste should be segregated from general waste, and staff must use designated containers for its collection and disposal. Sluice management procedures must be adhered to as specified in just disposing outside the big outside container. In the event of a communicable disease outbreak, specific protocols must be followed to contain the spread, including isolation

measures, enhanced cleaning procedures, and communication with public health authorities.

## **Management of Agency Workers with Communicable Diseases**

Agency workers who have or are suspected to have communicable diseases must be managed carefully to prevent the spread of infections. They should undergo health screening before commencing work and be excluded from duties if they pose an infection risk. Agency workers must adhere to the same infection control protocols as permanent staff and should receive appropriate training on infection prevention measures. The management of agency workers is overseen by Simon Reeve.

## **Training and Competency**

Ongoing training and competency assessments are essential to ensure that staff are equipped with the knowledge and skills required to implement effective infection control measures. All staff must undergo initial training upon induction, followed by regular refresher courses to update their knowledge and skills in line with current guidelines and best practices.

Training should cover key areas such as hand hygiene, PPE usage, waste management, and antimicrobial stewardship. It should also address the specific challenges and considerations relevant to domiciliary elderly care settings. Competency assessments should be conducted to evaluate staff performance and identify any areas where additional support or training may be needed.

The organization should maintain records of all training and competency assessments, ensuring that they are up to date and accessible. This supports compliance with CQC and NHS standards and demonstrates a commitment to continuous improvement and high-quality care.

## **Audits and Monitoring**

Regular audits and monitoring are crucial to assess compliance with the infection control policy and evaluate its effectiveness. The organization should conduct periodic audits to review adherence to hand hygiene practices, PPE usage, waste management, and antimicrobial stewardship. Audit findings should be documented, and any areas of non-compliance should be addressed promptly through corrective actions and staff training.

## **Legal Considerations**

This policy aligns with relevant laws and regulatory requirements, including the Health and Safety at Work Act 1974, the Health and Social Care Act 2008, and the Health and Safety Regulations 2013. Compliance with these legal frameworks ensures that the organization meets its legal obligations and provides a safe and healthy environment for service users and staff.

## Review Period

The Infection Control Policy should be reviewed every 6 months or in response to significant changes in regulations, guidelines, or organizational practices. Regular reviews ensure that the policy remains relevant, accurate, and effective in addressing current infection control challenges.

## References

- [National Institute for Health and Care Excellence \(NICE\)](#)
- [Care Quality Commission \(CQC\)](#)
- [Health and Safety Executive \(HSE\)](#)
- [National Health Service \(NHS\)](#)
- [Public Health England \(PHE\)](#)